Custody

#### **MISSION**

### **Mission Statement**

The mission of the Tulare County Sheriff's Office is to improve the quality of life through professional services and community partnerships.

#### **Vision Statement**

It is the vision of the Tulare County Sheriff's Office to provide quality service to the community and be recognized as the regional leader among law enforcement agencies by utilizing the latest in policing technologies, maintaining professional employees, and demonstrating innovation and operational flexibility.

#### **Core Values**

- Integrity: We are committed to uphold our position of trust by maintaining the highest ethical standards as set forth in the Law Enforcement Code of Ethics.
- Community Safety: We are committed to public safety through community partnerships, preparedness, crime prevention strategies and steadfast enforcement of violations of the law.
- Customer Service: We are committed to prompt, professional, and courteous service, unbiased and effective in our response to community concerns.
- Quality: We are committed to the highest standards of excellence through recruitment, training, teamwork, leadership, innovation and accountability.
- Organization: We value our members and have confidence in their individual initiative and ability to solve problems. We believe open, honest, and sincere communication is critical to a healthy work environment. We take Pride and receive satisfaction from doing our very best. We recognize the importance of each team member, and do our utmost to encourage and assist one another to develop as individuals and professionals. We acknowledge teamwork as the key to attaining our goals.
- Families: We rely upon the support of our families and friends as we serve in an everchanging and challenging world. The values we hold dear at home we also strive to share with the community: caring, honesty, fairness, stability, and friendship.

## CODE OF ETHICS LAW ENFORCEMENT CODE OF ETHICS

As a law enforcement officer,my fundamental duty is to serve the community; to safeguard lives and property; to protect the innocent against deception, the weak against oppression or intimidation and the peaceful against violence or disorder; and to respect the constitutional rights of all to liberty, equality and justice.

I will keep my private life unsullied as an example to all and will behave in a manner that does not bring discredit to me or to my agency. I will maintain courageous calm in the face of danger, scorn or ridicule; develop self-restraint; and be constantly mindful of the welfare of others. Honest in thought and deed both in my personal and official life, I will be exemplary in obeying the law and the regulations of my department. Whatever I see or hear of a confidential nature or that is confided to me in my official capacity will be kept ever secret unless revelation is necessary in the performance of my duty.

I will never act officiously or permit personal feelings, prejudices, political beliefs, aspirations, animosities or friendships to influence my decisions. With no compromise for crime, I will enforce the law courteously and appropriately without fear or favor, malice or ill will, never employing unnecessary force or violence and never accepting gratuities.

I recognize the badge of my office as a symbol of public faith, and I accept it as a public trust to be held so long as I am true to the ethics of criminal justice service. I will never engage in acts of corruption or bribery, nor will I condone such acts by other officers. I will cooperate with all legally authorized agencies and their representatives in the pursuit of justice.

I know that I alone am responsible for my own standard of professional performance and will take every reasonable opportunity to enhance and improve my level of knowledge and competence.

I will constantly strive to achieve these objectives and ideals, dedicating myself before God to my chosen profession...law enforcement

### Custody

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**Chapter 1 - Role and Authority** 

## **Authority and Legal Assistance**

### 100.1 PURPOSE AND SCOPE

This policy acknowledges and reflects the legal authority under which the Tulare County Sheriff's Department shall operate and maintain a local detention facility in this state. In addition to the authority vested by state law, the detention facility operates in accordance with these laws, constitutional mandates, regulations and local ordinances.

#### **100.2 POLICY**

It is the policy of this Office that the local detention facility will be maintained by all lawful means for the incarceration of persons suspected of violating the law or who have been adjudicated as guilty of committing a crime or civil offense by a competent legal authority, as prescribed by law.

### 100.3 LEGAL FOUNDATION

Detention Facility staff, at every level must have an understanding and true appreciation of their authority and limitations in the operation of a local detention facility. The Tulare County Sheriff's Office recognizes and respects the value of all human life and the expectation of dignity without prejudice toward anyone. It is also understood that vesting law enforcement personnel with the authority to incarcerate suspected law violators to protect the public and prevent individuals from fleeing justice requires a careful balancing of individual rights and legitimate government interests.

# **Annual Review and Performance-Based Goals and Objectives**

### 101.1 PURPOSE AND SCOPE

The Tulare County Sheriff's Office is dedicated to the concept of continuous improvement in the services provided on behalf of the public and in accordance with applicable laws, regulations and best practices in the operation of this facility. This policy establishes minimum review criteria to measure and evaluate the success of achieving established goals and objectives.

### **101.2 POLICY**

The Tulare County Sheriff's Office shall strive to continually improve the operation of its facilities to ensure they are safe, humane, and protect inmates' constitutional and statutory rights. To this end, the Office shall conduct an annual review to evaluate its progress in meeting stated goals and objectives.

#### 101.3 ANNUAL REVIEW

The Division Captain should ensure that the custody management team conducts an annual management review of, at a minimum:

- (a) Statutory, regulatory, and other requirements applicable to the operation of the facility.
- (b) Lawsuits and/or court orders/consent decrees.
- (c) Office policies, procedures, directives, and post orders that guide the operation of the facility.
- (d) Fiscal operations and accounting procedures.
- (e) Personnel issues/actions that include but are not limited to on-the-job injuries, internal affairs investigations, employee grievances, employee discipline, selection, and recruitment.
- (f) Compliance with internal/external inspections of the facility.
- (g) Condition of the physical plant, infrastructure, and maintenance efforts.
- (h) Cleanliness of the facility.
- (i) Inmate profiles and trends that measure:
  - 1. Inmate population (Average Daily Population).
  - 2. Inmate population by gender.
  - 3. Highest one-day count.
  - 4. Bookings/releases.
  - 5. Percentage of male inmates.
  - Percentage of female inmates
  - 7. Felony inmates in custody.

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### Annual Review and Performance-Based Goals and Objectives

- 8. Misdemeanor inmates in custody.
- 9. Pretrial population.
- 10. Sentenced population.
- 11. Medical beds.
- 12. Mental health beds.
- 13. Meal counts (regular, medical, court meals).
- 14. Early releases.
- 15. Alternative-to-incarceration participants.
- 16. Special needs inmates.
- 17. Classification issues.
- 18. Inmate grievances (founded/denied).
- 19. Demographics (age, race, gang affiliation).
- 20. Court movement.
- (j) Security issues that include:
  - Inmate-on-inmate assaults.
  - 2. Inmate-on-staff assaults.
  - 3. Major disturbances.
  - 4. Deaths in custody (natural/suicide/homicide/accidents).
  - 5. Suicide attempts (15 CCR 1030).
- (k) Inmate programs including:
  - 1. Education.
  - 2. Commissary.
  - 3. Drug and alcohol programs.
  - 4. Faith-based services.

## **Custody Manual**

### 102.1 PURPOSE AND SCOPE

The Custody Manual is a statement of the current policies, rules, and guidelines of this office's detention facility. All prior and existing manuals, orders, and regulations that are in conflict with this manual are revoked, except to the extent that portions of existing manuals, orders, and other regulations that have not been included herein shall remain in effect where they do not conflict with the provisions of this manual.

Except where otherwise expressly stated, the provisions of this manual shall be considered guidelines. It is recognized, however, that work in the custody environment is not always predictable, and circumstances may arise that warrant departure from these guidelines. It is the intent of this manual to be viewed from an objective standard, taking into consideration the sound discretion entrusted to members of this office under the circumstances reasonably known to them at the time of any incident.

### **102.2 POLICY**

The manual of the Tulare County Sheriff's Office Detention Facility is hereby established and shall be referred to as the Custody Manual (15 CCR 1029). All members are to conform to the provisions of this manual.

### 102.2.1 DISCLAIMER

The provisions contained in the Custody Manual are not intended to create an employment contract nor any employment rights or entitlements. The policies contained within this manual are for the internal use of the Tulare County Sheriff's Office and shall not be construed to create a higher standard or duty of care for civil or criminal liability against the county, its officials or members. Violations of any provision of any policy contained within this manual shall only form the basis for office administrative action, training or discipline. The Tulare County Sheriff's Office reserves the right to revise any policy content, in whole or in part.

### 102.3 DEFINITIONS

The following words and terms shall have these assigned meanings, unless it is apparent from the content that they have a different meaning:

Office - The Tulare County Sheriff's Office.

Custody Manual - The Office Custody Manual.

**Employee -** Any person employed by the Office.

Incarcerated Person - Any person held in the custody of the detention facility.

**May** - Indicates a permissive, discretionary, or conditional action.

Member - Any person employed or appointed by the Tulare County Sheriff's Office, including:

Full- and part-time employees.

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### Custody Manual

- Sworn deputies.
- Reserve deputies.
- Non-sworn employees.
- Volunteers.

**Deputy** - All persons, regardless of rank, who are employees and who are selected and trained in accordance with state law as deputies of the Tulare County Sheriff's Office.

**On-duty employee** - Status during the period when the employee is actually engaged in the performance of assigned duties.

**Order** - A written or verbal instruction issued by a superior.

Rank - The job classification title held by a deputy.

Shall or will - Indicates a mandatory action.

**Should** - Indicates a generally required or expected action absent a rational basis for failing to conform.

### 102.4 REVISIONS TO POLICIES

All members are responsible for keeping abreast of all Custody Manual revisions. All changes to the Custody Manual will be posted on the office network for review prior to implementation. The Training Lieutenant will forward revisions to the Custody Manual as needed to all personnel via electronic mail. Each member shall acknowledge receipt by return email or online acknowledgement, review the revisions, and seek clarification as needed.

Each supervisor will ensure that members under the supervisor's command are familiar with and understand all revisions.

#### 102.5 RESPONSIBILITIES

The Sheriff shall be considered the ultimate authority for the provisions of this manual and shall continue to issue General Orders, which shall modify the provisions to which they pertain. General Orders shall remain in effect until such time as they may be permanently incorporated into the manual.

The Facility Commander shall ensure that the Custody Manual is comprehensively reviewed at least every two years, updated as needed, and the staff trained accordingly to ensure that the policies in the manual are current and reflect the mission of the Tulare County Sheriff's Office (15 CCR 1029). The review shall be documented in written form sufficient to indicate that policies and procedures have been reviewed and amended as appropriate to facility changes.

### 102.5.1 INTERNAL AND EXTERNAL SECURITY MEASURE REVIEW

The Facility Commander shall ensure that Custody Manual review, evaluation, and procedures include internal and external security measures of the facility, including security measures specific to prevention of sexual abuse and sexual harassment (15 CCR 1029).

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### Custody Manual

### 102.6 MANUAL ACCEPTANCE

As a condition of employment, all members are required to read and obtain necessary clarification of this office's policies. All members are required to sign a statement of receipt acknowledging that they have received a copy or have been provided access to the Custody Manual.

### 102.7 DISTRIBUTION OF MANUAL

Copies of the Custody Manual shall be made available to all members. An electronic version of the Custody Manual will be made available to all members on the office network (15 CCR 1029).

No changes shall be made to the electronic version without authorization from the Facility Commander.

## **Organizational Structure and Responsibility**

### 103.1 PURPOSE AND SCOPE

The organizational structure of the Office is designed to create an efficient means to accomplish its mission and goals and to provide for the best possible service to the public (15 CCR 1029(a)(1)).

### 103.2 DIVISIONAL RESPONSIBILITY

The Sheriff is responsible for administering and managing the Office. There are six divisions in the Office:

- Investigation Division
- Patrol Division
- Professional Standards
- Administrative Services
- Detentions
- Administrative Support

### 103.2.1 ADMINISTRATIVE SERVICES

The Administrative Services Division is commanded by a Captain, whose primary responsibility is to provide general management direction and control for the Administrative Division. The Administrative Division consists of Court Services, and Personnel and Training Services (15 CCR 1029(a)(1)).

### 103.2.2 PATROL DIVISION

The Patrol Division is commanded by a Captain, whose primary responsibility is to provide general management over Five Substations and Night Watch.

### 103.2.3 INVESTIGATION DIVISION

The Investigations Division is commanded by a Captain, whose primary responsibility is to provide general management direction to Crimes Against Persons, Gang Suppression, Tagnet Majors, Cyber & Forensic, and Property Crimes.

### 103.2.4 DETENTIONS OPERATIONS DIVISION

The Detentions Operation Division is commanded by a Captain, whose primary responsibility is to provide general management over Four Detention Facilities, Sheriff Emergency Response Team, and Special Investigation Units within Detentions.

#### 103.2.5 PROFESSIONAL STANDARDS

The Professional Standards Division is commanded by a Captain, whose primary responsibility is to provide general management over Emergency Services, Legal, Compliance, and Employee & Public Relations.

Custody Custody

### Organizational Structure and Responsibility

### 103.2.6 ADMINISTRATIVE SUPPORT

The Administrative Support Division is commanded by a Captain, whose primary responsibility is to provide general management over Support Services, Jail Services, Inmate Programs, Fiscal, and Farm

### 103.3 CHAIN OF COMMAND

The chain of command of the Office begins with the Sheriff, to whom all employees of the Office are responsible.

To maintain continuity, order and effectiveness in the Office, a chain of command has been established and should be respected. All staff members should adhere to the chain of command in all official actions. However, nothing shall prohibit a staff member from initiating immediate action outside of the chain of command if it is necessitated by a complaint of discrimination, sexual harassment, gross malfeasance or a violation of the law.

## **Administrative Communications**

### 104.1 PURPOSE AND SCOPE

Effective communications within the Office are critical to the accomplishment of the mission of the Office and the effective operation of the detention facility. Administrative communications of this office are governed by the following policy (15 CCR 1029(a)(1)).

### 104.2 PERSONNEL ORDERS

Personnel orders may be issued periodically by the Sheriff to announce and document all promotions, transfers, hiring of new personnel, separations, personnel and group commendations or other changes in status.

### 104.3 CORRESPONDENCE

All office correspondence is to be written in a clear, concise manner, consistent with the report formats and guidelines prescribed in this policy and reflecting the highest possible quality in organization, grammar, punctuation and spelling.

All external correspondence shall be on Office letterhead. All office letterhead, including all digital facsimiles of the letterhead, shall bear the signature element of the Sheriff or the authorized designee. Personnel should use office letterhead only for official business and with the approval of their supervisors.

### 104.4 SURVEYS

All surveys made in the name of the Tulare County Sheriff's Office shall be authorized in advance by the Sheriff, Assistant Sheriff, or the Division Captain.

### 104.5 ADMINISTRATIVE REPORT FORMAT

All staff reports submitted via the chain of command to superior officers for further action should be written in accordance with the following format, when applicable.

**Executive Summary Section** - The staff report should begin with a brief statement of the problem or issue and what could be done about it. This summary should restate the main points of the report in general, nontechnical language, leaving out details. The length of the executive summary section should range from one paragraph to one page.

**Problem/Issue Identification Section** - This section of a staff report is critical to the success of the reader's ability to grasp the issues involved and to arrive at an informed decision. It should strive to identify the true nature and scope of the problem by identifying the known facts and background of the situation, including who has the problem, how long it has existed and the known or likely consequences of the problem.

**Forecast Future Impacts** - This section of the report should clearly define the problem and be accompanied by an analysis of relevant factors, supported by specific examples, details or testimony, clarifying what the problem is and why it exists. Generally, the reader should be able to

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### Administrative Communications

leave this section of the report clearly understanding the issues involved and the consequences of taking no action.

**Alternatives Analysis Section** - Whenever the seriousness or complexity of a problem warrants the development of alternative solutions, a staff report should include a section containing a discussion of different courses of action and their consequences, taking into account the comments and positions of other staff members or entities affected by the response to the problem.

### **104.6 POLICY**

The Tulare County Sheriff's Office will appropriately communicate significant events within the organization to its members. Both electronic and non-electronic administrative communications will be professional in appearance and comply with the established letterhead, signature and disclaimer guidelines, as applicable.

## **General Orders**

### 105.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for issuing General Orders.

### 105.2 GENERAL ORDERS PROTOCOL

General Orders will be incorporated into the manual as required upon approval of the Sheriff. General Orders will modify existing policies or create a new policy as appropriate. The previous policy will be rescinded upon incorporation of the new or updated policy into the manual.

Any General Order issued after publication of the manual should be numbered consecutively, starting with the last two digits of the year, followed by the number "01" as in yy-01.

### **105.3 POLICY**

General Orders establish a communication practice that may be used by the Sheriff to make immediate changes to policy and procedure in accordance with and as permitted by statutes, regulations, or negotiated contracts. General Orders will immediately modify or change and supersede the sections of this manual to which they pertain.

### 105.4 RESPONSIBILITIES

The responsibilities of the Agency Head and Managers are defined below.

### 105.4.1 SHERIFF

The Sheriff, with the assistance of office staff, shall issue and be responsible for all General Orders, including their publication and dissemination throughout the Office.

### 105.4.2 MANAGERS AND SUPERVISORS

Managers and Supervisors are responsible for ensuring that staff under their command receive training on all new General Orders.

Training documentation shall be placed into the supervisor's file or the employee's training file.

## **Annual Facility Inspection**

### 106.1 PURPOSE AND SCOPE

Annual facility inspections are the collections of data designed to assist administrators, managers, and supervisors in the management of the custody facility by means of establishing a systematic inspection and review of its operation. This policy provides guidelines for conducting the annual facility inspection.

#### **106.2 POLICY**

This office will use a formal annual inspection process of its facility to ensure that practices and operations are in compliance with statutes, regulations, policies and procedures and best practice standards (15 CCR 1029(a)(2)). Inspections will be used to help identify the need for new or revised policies and procedures, administrative needs, funding requirements, evaluation of service providers and changes in laws and regulations.

### 106.3 FACILITY COMMANDER RESPONSIBILITIES

The Facility Commander is responsible for collecting performance indicators and other relevant data to generate and provide an annual inspection of all custody facilities. The Facility Commander will ensure that inspections are conducted as outlined below for each facility type on an annual basis.

Annual inspections may be used in preparation of inspections by outside entities, such as inspections by a government inspection authority, professional organization, or accreditation body. In this case, the local inspection will serve as a pre-inspection review that will prepare the facility for the outside or third-party evaluator.

The Compliance Lieutenant along with compliance unit staff, will assist with annual inspections within the Detention Division.

### 106.4 FOCAL POINTS FOR INSPECTIONS

Inspections of facilities used for detaining persons pending arraignment, held during trial, and held upon a lawful court commitment should include inspection of the policies, procedures, and performance by management and staff to ensure compliance and timely updates. Inspections should include but not be limited to the following inspection points:

- Staff training
- Number of personnel
- Policy and procedures manual
- Fire suppression pre-planning
- Incident reports
- In-custody deaths
- Documented suicide attempts

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### Annual Facility Inspection

- Classification plan
- Reception and booking
- Communicable disease prevention plan
- Inmates with mental disorders
- Administrative segregation
- Developmentally disabled inmates
- Use of force and restraint devices
- Contraband control
- Perimeter security
- Searches
- Access to telephones
- Access to courts and counsel
- Inmate visiting
- Inmate mail
- Religious access
- Health care services
- Intake medical screening
- Pest control
- Detoxification treatment
- Suicide prevention program
- First-aid kit
- Meals, frequency of serving
- Minimum diet
- Food services plan
- Food serving and supervision
- Facility sanitation, safety, maintenance
- Tools, key, and lock control
- Use of safety and sobering cells
- Plan for inmate discipline including rules and disciplinary penalties, forms of discipline, limitations on discipline, and disciplinary records
- Standard bedding and linen use

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Annual F	acility Ins	pection
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Mattresses

## **Special Assignments and Promotions**

### 107.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for promotions and for making special assignments within the Tulare County Sheriff's Office.

### 107.2 EVALUATION CRITERIA

The following criteria will be used in evaluating candidates for a special assignment:

- (a) Demonstrates the following traits:
  - (a) Ability to conform to office goals and objectives in a positive manner.
  - (b) Adaptability and flexibility.
  - (c) Initiative.
  - (d) Leadership skills.
  - (e) Personal integrity and ethical conduct.
  - (f) Sound ethical judgment and decision-making.
  - (g) Stress tolerance.
  - (h) Emotional stability and maturity.
- (b) Presents a professional, neat appearance.
- (c) Maintains a physical condition that aids in his/her performance.
- (d) Expresses an interest in the assignment.

### 107.3 SPECIAL ASSIGNMENT POSITIONS

The following positions are considered special assignments:

- (a) Sheriff Emergency Response Team (SERT)
- (b) Strategic Response Unit (SRU)
- (c) Negotiation Team (hostage or other)
- (d) Canine handler
- (e) Gang Information Tracking Unit
- (f) Search and Rescue
- (g) Dive Team
- (h) UAV Operator
- (i) Compliance Unit
- (j) IA Unit
- (k) Training Unit
- (I) Jail Training Officer (JTO)

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### Special Assignments and Promotions

- (m) Personnel Unit
- (n) Transport Unit
- (o) Rangemaster
- (p) Courts
- (q) Instructor

### 107.3.1 DESIRABLE QUALIFICATIONS

Qualifications that will be considered for a specialized assignment include:

- (a) Required experience for the specialized assignment.
- (b) Completed probation.
- (c) Has shown an interest in the specialized assignment.
- (d) Education, training and demonstrated abilities in related areas, such as law, gang suppression, medical/mental health issues in the detention facility, report writing, public relations.
- (e) Completion of any training required by the government or a professional organization.

### 107.3.2 SELECTION PROCESS

The following criteria apply to specialized assignments:

- (a) Administrative evaluation, as determined by the Sheriff, will be conducted. This should include a review of supervisor recommendations and the employee's performance evaluation history. Each supervisor who has supervised or otherwise been involved with the candidate will submit these recommendations.
- (b) Based on recommendations of both the immediate supervisor and Facility Commander, the recommendations will be submitted to the Sheriff and/or their designee.
- (c) Appointments will be made by the Sheriff.

The selection process for all special assignment positions may be waived for temporary assignments, emergency situations, training, and at the discretion of the Sheriff.

### 107.3.3 DISQUALIFICATION

The Tulare County Sheriff's Office shall not promote, assign, or transfer any member to a position that may allow contact with inmates if the member has (28 CFR 115.17):

- (a) Engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution as defined in 42 USC § 1997.
- (b) Been convicted of engaging in or attempting to engage in sexual activity facilitated by force, by overt or implied threats of force, or by coercion, or if the victim did not consent or was unable to consent or refuse.

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### Special Assignments and Promotions

(c) Been civilly or administratively adjudicated to have engaged in the activity described in paragraph (b) of this section.

### 107.4 PROMOTIONAL REQUIREMENTS

Requirements and information regarding any promotional process are available at Tulare Human Resources and Development.

### **107.5 POLICY**

The Tulare County Sheriff's Office determines assignments and promotions in a nondiscriminatory manner based upon job-related factors and candidate skills and qualifications. Assignments and promotions are made by the Sheriff.

### Standards of Conduct

### **108.1 POLICY**

This policy addresses standards of conduct specific to the Detention Division. You are also required to review the Standards of Conduct Policy in the Operational Policy Manual (LE Manual) for the complete policy.

Refer to LE Policy: Chapter 3-General Operations, Standards Of Conduct

#### 108.2 GENERAL STANDARDS

Members shall conduct themselves, whether on- or off-duty, in accordance with the United States and California constitutions and all applicable laws, ordinances and rules enacted or established pursuant to legal authority.

Members shall familiarize themselves with policies and procedures and are responsible for compliance with each. Members should seek clarification and guidance from supervisors in the event of any perceived ambiguity or uncertainty.

Discipline may be initiated for any good cause. It is not mandatory that a specific policy or rule violation be cited to sustain discipline. This policy is not intended to cover every possible type of misconduct.

### 108.3 CAUSES FOR DISCIPLINE

The following are illustrative of causes for disciplinary action. This list is not intended to cover every possible type of misconduct and does not preclude the recommendation of disciplinary action for violation of other rules, standards, ethics and specific action or inaction that is detrimental to efficient office service.

#### 108.3.1 CONDUCT

- (a) Failure of any member to promptly and fully report activities on his/her part or the part of any other member where such activities resulted in contact with any law enforcement agency or that may result in criminal prosecution or discipline under this policy.
- (b) Unreasonable and unwarranted force to a person encountered or a person under arrest.
- (c) Exceeding lawful peace officer powers by unreasonable, unlawful, or excessive conduct.
- (d) Unauthorized or unlawful fighting, threatening, or attempting to inflict unlawful bodily harm on another.
- (e) Engaging in horseplay that reasonably could result in injury or property damage.
- (f) Discourteous, disrespectful, or discriminatory treatment of any member of the public or any member of this office or the county.
- (g) Use of obscene, indecent, profane, or derogatory language while on-duty or in uniform.

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### Standards of Conduct

- (h) Criminal, dishonest, or disgraceful conduct, whether on- or off-duty, that adversely affects the member's relationship with this office.
- (i) Unauthorized possession of, loss of, or damage to office property or the property of others, or endangering it through carelessness or maliciousness.
- (j) Attempted or actual theft of office property; misappropriation or misuse of public funds, property, personnel, or the services or property of others; unauthorized removal or possession of office property or the property of another person.
- (k) Activity that is incompatible with a member's conditions of employment or appointment as established by law or that violates a provision of any memorandum of understanding or contract, including fraud in securing the appointment or hire.
- (I) Initiating any civil action for recovery of any damages or injuries incurred in the course and scope of employment or appointment without first notifying the Sheriff of such action.
- (m) Allowing contraband articles including but not limited to weapons, cellular telephones or other wireless devices, clothing, food, illegal drugs, or tobacco in any jail facility.
- (n) Receiving from an inmate any articles to deliver outside the facility.
- (o) Any other on- or off-duty conduct which any member knows or reasonably should know is unbecoming a member of this office, is contrary to good order, efficiency, or morale, or tends to reflect unfavorably upon this office or its members.

### 108.3.2 PERFORMANCE

(a) Substantiated, active, continuing association with or membership in organized crime or criminal syndicates or a criminal gang with knowledge thereof, except as specially directed and authorized by the office.

### 108.3.3 SAFETY

- (a) Unsafe firearm or other dangerous weapon handling, including loading or unloading firearms in an unsafe manner, either on or off-duty.
- (b) Carrying, while on the premises of the work site, any firearm or other lethal weapon that is not authorized by the member's appointing authority.

### 108.4 PRISON RAPE ELIMINATION ACT DISCLOSURE

Members have a continuing affirmative duty to notify the Facility Commander in writing if they have (28 CFR 115.17):

- (a) Engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution as defined in 42 USC § 1997.
- (b) Been convicted for an offense involving engaging in or attempting to engage in sexual activity facilitated by force, by overt or implied threats of force, or by coercion, or if the victim did not consent or was unable to consent or refuse.

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### Standards of Conduct

(c) Been the subject of any civil or administrative adjudication finding that the member engaged in sexual activity facilitated by force, by overt or implied threats of force, or by coercion, or if the victim did not consent or was unable to consent or refuse.

### 108.5 POST-INVESTIGATION PROCEDURES

Regardless of the source of an allegation of misconduct, all such matters will be investigated in accordance with the Office's Personnel Complaint Policy.

### 108.5.1 FACILITY COMMANDER RESPONSIBILITIES

Upon receipt of any completed personnel investigation, the Facility Commander shall review the entire investigative file, the employee's personnel file and any other relevant materials.

The Facility Commander may make recommendations regarding the disposition of any allegations and the amount of discipline, if any, to be imposed.

- (a) Prior to forwarding recommendations to the Sheriff, the Facility Commander may return the entire investigation to the assigned detective or supervisor for further investigation or action.
- (b) When forwarding any written recommendation to the Sheriff, the Facility Commander shall include all relevant materials supporting the recommendation. Actual copies of an employee's existing personnel file need not be provided and may be incorporated by reference.

## **Discriminatory Harassment**

109.1 REFER TO OPERATIONAL POLICY 315

Refer to LE Policy 315: Chapter 3-General Operations, Section 315: Discriminatory Harassment

## **Anti-Retaliation**

### 110.1 PURPOSE AND SCOPE

This policy prohibits retaliation against members who identify workplace issues, such as fraud, waste, abuse of authority, gross mismanagement, or any inappropriate conduct or practices, including violations that may pose a threat to the health, safety, or well-being of members.

This policy does not prohibit actions taken for nondiscriminatory or non-retaliatory reasons, such as discipline for cause.

These guidelines are intended to supplement and not limit members' access to other applicable remedies. Nothing in this policy shall diminish the rights or remedies of a member pursuant to any applicable federal law, provision of the U.S. Constitution, state and local law, ordinance, or memorandum of understanding.

### **110.2 POLICY**

The Tulare County Sheriff's Office has a zero tolerance for retaliation and is committed to taking reasonable steps to protect from retaliation members who, in good faith, engage in permitted behavior or who report or participate in the reporting or investigation of workplace issues. All complaints of retaliation will be taken seriously and will be promptly and appropriately investigated.

#### 110.3 RETALIATION PROHIBITED

No member may retaliate against any person for engaging in lawful or otherwise permitted behavior; for opposing a practice believed to be unlawful, unethical, discriminatory, or retaliatory; for reporting or making a complaint under this policy; or for participating in any investigation related to a complaint under this or any other policy.

Retaliation includes any adverse action or conduct, including but not limited to:

- Refusing to hire or denying a promotion.
- Extending the probationary period.
- Unjustified reassignment of duties or change of work schedule.
- Real or implied threats or other forms of intimidation to dissuade the reporting of wrongdoing or filing of a complaint, or as a consequence of having reported or participated in protected activity.
- Taking unwarranted disciplinary action.
- Spreading rumors about the person filing the complaint or about the alleged wrongdoing.
- Shunning or unreasonably avoiding a person because the person has engaged in protected activity.

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### Anti-Retaliation

#### 110.3.1 RETALIATION PROHIBITED FOR REPORTING VIOLATIONS

A deputy shall not be retaliated against for reporting a suspected violation of a law or regulation by another deputy to a supervisor or other person in the Office who has the authority to investigate the violation (Government Code § 7286 (b)).

### 110.4 COMPLAINTS OF RETALIATION

Any members who feel they have been retaliated against in violation of this policy should promptly report the matter to any supervisor, any command staff member, the Sheriff, or the county Human Resources Director.

Members shall act in good faith, not engage in unwarranted reporting of trivial or minor deviations or transgressions, and make reasonable efforts to verify facts before making any complaint in order to avoid baseless allegations. Members shall not report or state an intention to report information or an allegation knowing it to be false or with willful or reckless disregard for the truth or falsity of the information, or otherwise act in bad faith.

Investigations are generally more effective when the identity of the reporting member is known, thereby allowing investigators to obtain additional information from the reporting member. However, complaints may be made anonymously. All reasonable efforts shall be made to protect the reporting member's identity. However, confidential information may be disclosed to the extent required by law or to the degree necessary to conduct an adequate investigation and make a determination regarding a complaint. In some situations, the investigative process may not be complete unless the source of the information and a statement by the member are part of the investigative process.

### 110.5 SUPERVISOR RESPONSIBILITIES

Supervisors are expected to remain familiar with this policy and ensure that members under their command are aware of its provisions.

The responsibilities of supervisors include but are not limited to:

- (a) Ensuring complaints of retaliation are investigated as provided in the Personnel Complaints Policy.
- (b) Receiving all complaints in a fair and impartial manner.
- (c) Documenting the complaint and any steps taken to resolve the problem.
- (d) Acknowledging receipt of the complaint, notifying the Sheriff via the chain of command, and explaining to the member how the complaint will be handled.
- (e) Taking appropriate and reasonable steps to mitigate any further violations of this policy.
- (f) Monitoring the work environment to ensure that any member making a complaint is not subjected to further retaliation.
- (g) Periodic follow-up with the complainant to ensure that retaliation is not continuing.
- (h) Not interfering with or denying the right of a member to make any complaint.

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### Anti-Retaliation

(i) Taking reasonable steps to accommodate requests for assignment or schedule changes made by a member who may be the target of retaliation if it would likely mitigate the potential for further violations of this policy.

### 110.6 COMMAND STAFF RESPONSIBILITIES

The Sheriff should communicate to all supervisors the prohibition against retaliation.

Command staff shall treat all complaints as serious matters and shall ensure that prompt actions take place, including but not limited to:

- (a) Communicating to all members the prohibition against retaliation.
- (b) The timely review of complaint investigations.
- (c) Remediation of any inappropriate conduct or condition and instituting measures to eliminate or minimize the likelihood of recurrence.
- (d) The timely communication of the outcome to the complainant.

### 110.7 WHISTLE-BLOWING

California law protects members who (Labor Code § 1102.5; Government Code § 53296 et seq.):

- (a) Report a violation of a state or federal statute or regulation to a government or law enforcement agency, including the member's supervisor or any other member with the authority to investigate the reported violation.
- (b) Provide information or testify before a public body if the member has reasonable cause to believe a violation of law occurred.
- (c) Refuse to participate in an activity that would result in a violation of a state or federal statute or regulation.
- (d) File a complaint with a local agency about gross mismanagement or a significant waste of funds, abuse of authority, or a substantial and specific danger to public health or safety. Members shall exhaust all available administrative remedies prior to filing a formal complaint.
- (e) Are family members of a person who has engaged in any protected acts described above.

Members are encouraged to report any legal violations through the chain of command (Labor Code § 1102.5).

Members who believe they have been the subject of retaliation for engaging in such protected behaviors should promptly report it to a supervisor. Supervisors should refer the complaint to the Internal Affairs Unit for investigation pursuant to the Personnel Complaints Policy.

### 110.7.1 DISPLAY OF WHISTLE-BLOWER LAWS

The Office shall display a notice to members regarding their rights and responsibilities under the whistle-blower laws, including the whistle-blower hotline maintained by the Office of the Attorney General (Labor Code § 1102.8).

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### Anti-Retaliation

### 110.8 RECORDS RETENTION AND RELEASE

The Support Services Manager shall ensure that documentation of investigations is maintained in accordance with the established records retention schedules.

### 110.9 TRAINING

This policy should be reviewed with each new member.

All members should receive periodic refresher training on the requirements of this policy.

## **Drug- and Alcohol-Free Workplace**

### 200.1 PURPOSE AND SCOPE

The purpose of this policy is to establish clear and uniform guidelines regarding drugs and alcohol in the workplace (41 USC § 8103).

### **200.2 POLICY**

It is the policy of the Tulare County Sheriff's Office to provide a drug- and alcohol-free workplace for all members.

### 200.3 GENERAL GUIDELINES

Alcohol and drug use in the workplace or on office time can endanger the health and safety of office members and the public.

Members who have consumed an amount of an alcoholic beverage or taken any medication, or combination thereof, that would tend to adversely affect their mental or physical abilities shall not report for duty. Affected members shall notify the Shift Supervisor or appropriate supervisor as soon as the member is aware that the member will not be able to report to work. If the member is unable to make the notification, every effort should be made to have a representative contact the supervisor in a timely manner. If the member is adversely affected while on-duty, the member shall be immediately removed and released from work (see the Work Restrictions section in this policy).

### 200.3.1 USE OF MEDICATIONS

Members should not use any medications that will impair their ability to safely and completely perform their duties. Any member who is medically required or has a need to take any such medication shall report that need to the member's immediate supervisor prior to commencing any on-duty status.

### 200.3.2 MEDICAL CANNABIS

Possession, use, or being under the influence of medical cannabis on-duty is prohibited and may lead to disciplinary action.

### 200.4 MEMBER RESPONSIBILITIES

Members shall report for work in an appropriate mental and physical condition. Members are prohibited from purchasing, manufacturing, distributing, dispensing, possessing, or using controlled substances or alcohol on office premises or on office time (41 USC § 8103). The lawful possession or use of prescribed medications or over-the-counter remedies is excluded from this prohibition.

Members shall notify a supervisor immediately if they observe behavior or other evidence that they believe demonstrates that a fellow on-duty member is impaired due to drug or alcohol use.

Members are required to notify their immediate supervisors of any criminal drug statute conviction for a violation occurring in the workplace no later than five days after such conviction (41 USC § 8103).

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### Drug- and Alcohol-Free Workplace

#### 200.5 EMPLOYEE ASSISTANCE PROGRAM

There may be available a voluntary employee assistance program to assist those who wish to seek help for alcohol and drug problems (41 USC § 8103). Insurance coverage that provides treatment for drug and alcohol abuse also may be available. Employees should contact the Human Resources and Development, their insurance providers, or the employee assistance program for additional information. It is the responsibility of each employee to seek assistance before alcohol or drug problems lead to performance problems.

### 200.6 WORK RESTRICTIONS

If a member informs a supervisor that the member has consumed any alcohol, drug or medication that could interfere with a safe and efficient job performance, the member may be required to obtain clearance from the member's physician before continuing to work.

If the supervisor reasonably believes, based on objective facts, that a member is impaired by the consumption of alcohol or other drugs, the supervisor shall prevent the member from continuing work and shall ensure that the member is safely transported away from the Office.

#### 200.7 SCREENING TESTS

The supervisor may require an employee to submit to a screening under any of the following circumstances:

- (a) The supervisor reasonably believes, based upon objective facts, that the employee is under the influence of alcohol or drugs that are impairing the employee's ability to perform duties safely and efficiently.
- (b) The employee discharges a firearm in the performance of duties (excluding training or authorized euthanizing of an animal).
- (c) The employee discharges a firearm issued by the Office while off-duty, resulting in injury, death, or substantial property damage.
- (d) The employee drives a motor vehicle in the performance of duties and becomes involved in an incident that results in bodily injury, death, or substantial damage to property.

### 200.7.1 SUPERVISOR RESPONSIBILITIES

The supervisor shall prepare a written record documenting the specific facts that led to the decision to require the test, and shall inform the employee in writing of the following:

- (a) The test will be given to detect either alcohol or drugs, or both.
- (b) The result of the test is not admissible in any criminal proceeding against the employee.
- (c) The employee may refuse the test, but refusal may result in dismissal or other disciplinary action.

## **Supervision of Incarcerated Persons**

### 201.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure the safety and security of the facility through the application of appropriate staffing levels.

### **201.2 POLICY**

It is the policy of this facility to provide for the safety and security of citizens, staff and incarcerated persons through appropriate staffing levels that are sufficient to operate the facility and perform functions related to the safety, security, custody, and supervision of incarcerated persons.

### 201.3 SUPERVISION OF INCARCERATED PERSONS

There shall be, at all times, sufficient staff designated to remain in the facility for the supervision and welfare of incarcerated persons, to ensure the implementation and operation of all programs and activities as required by Title 15 CCR Minimum Jail Standards, and to respond to emergencies when needed. Such staff must not leave the facility while incarcerated persons are present and should not be assigned duties that could conflict with the supervision of incarcerated persons (15 CCR 1027).

When a person from each gender is being held at this facility, a minimum of one deputy from each gender should be on-duty in the detention facility at all times.

Staff members shall not be placed in positions of responsibility for the supervision and welfare of incarcerated persons of the opposite gender in circumstances that can be described as an invasion of privacy or that may be degrading or humiliating to the incarcerated persons.

To the extent reasonably practicable, incarcerated person bathrooms will contain modesty screens that preserve privacy without creating areas that cannot be properly supervised.

The Facility Commander or the authorized designee shall be responsible for developing staffing plans to comply with this policy. Records of staff deployment should be maintained in accordance with established records retention schedules (Penal Code § 4021; 15 CCR 1027).

### 201.4 SEPARATION OF DUTIES

Maintenance personnel are employed to perform preventive, routine, and emergency maintenance functions. Custody staff will not be given physical plant maintenance duties that distract from their primary responsibility of supervising incarcerated persons.

### **Prohibition on Incarcerated Person Control**

### 202.1 PURPOSE AND SCOPE

The purpose of this policy is to define the requirement that staff should at all times exercise control of the incarcerated person population under their supervision and should prevent incarcerated persons from controlling other incarcerated persons within the facility.

### **202.2 POLICY**

All staff, including support staff, contractors, and volunteers should exercise control and supervision of all incarcerated persons under their control. It is the policy of this office to prohibit any staff member to implicitly allow, or by dereliction of duty allow, any incarcerated person or group of incarcerated persons to exert authority over any other incarcerated person (Penal Code § 4019.5; 15 CCR 1083(b)).

### 202.3 EDUCATION, DRUG, OR ALCOHOL PROGRAM ASSISTANTS

Nothing in the policy is intended to restrict the legitimate use of incarcerated persons to assist in the instruction of educational or drug and alcohol programs. Any use of incarcerated persons in this manner will be expressly authorized by the Facility Commander in a legally prescribed manner. Any program that uses incarcerated persons to assist in legitimate program activities will be closely supervised by facility employees or vocational instructors. Nothing in this section is intended to authorize an incarcerated person program assistant to engage in disciplining other incarcerated persons.

## **Equipment Inventory and Supplies**

### 203.1 PURPOSE AND SCOPE

This facility must have the materials, supplies and equipment that are necessary to maintain effective and efficient operations. This policy establishes responsibilities and requirements for purchasing, storing, and inventory of those items.

### 203.2 EQUIPMENT INVENTORY

The Facility Commander or the authorized designee will conduct an audit on all supplies and equipment annually. All losses will be reported by the Sheriff to the County Administrative Officer. The Administrative Service Captain may also conduct an interim audit on all fixed assets in order to maintain a complete and accurate accounting of equipment and its location.

## **Tool and Culinary Equipment**

### 204.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a tightly controlled process for the use of tools and culinary equipment in order to reduce the risk of such items becoming weapons for the inmate population. While there are times that specific inmate workers may need to possess tools or equipment for legitimate daily operations, the possession and use of those tools must be carefully monitored and controlled by staff (15 CCR 1029(a)(6)).

### **204.2 POLICY**

It is the policy of all detention facilities to securely store, inventory, control and monitor the use of tools and culinary equipment to ensure accountability and the secure use of these items (15 CCR 1029(a)(6)).

### 204.3 CUSTODY TOOLS

Tools include all implements that are maintained within the secure perimeter of the facility to complete specific tasks. These tools include, but are not limited to, mops, brooms, dustpans and floor polishers.

All tools, culinary items or medical equipment shall be locked in secure cabinets or storage rooms as soon as possible, when not in use.

Any time tools are brought into a secure area where inmates are present, staff supervising the area shall count the number of tools brought in to ensure that the same number of tools is taken out.

Any tool that is used within the secure perimeter of the facility must be closely monitored and controlled by the staff supervising the area so that it cannot be used as a weapon (15 CCR 1029(a) (6)). Inmates who are assigned tasks that require these tools shall be closely supervised.

An inventory of all tools used and stored within the secure perimeter of the facility shall be developed and maintained by the Facility Commander. Tools will be inventoried by an assigned staff member at least once every 24 hours. The loss of any tool will be immediately reported to the on-duty supervisor, who shall initiate immediate action to locate or account for the missing tool, including:

- (a) Detaining and searching any inmate who had access to the tool.
- (b) Conducting a thorough search of the immediate area for the missing item.
- (c) Initiating a facility-wide search.

The staff member responsible for the supervision of the use of the missing tool will prepare and submit a report to the Shift Supervisor documenting the specific tool that is missing and the circumstances of the disappearance. The report will be forwarded to the Facility Commander. A report identifying all members involved in the search should be submitted to the on-duty supervisor documenting their findings.

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### Tool and Culinary Equipment

#### 204.4 MAINTENANCE OR CONSTRUCTION TOOLS

Maintenance or construction tools are those tools and equipment that are brought into and out of the secure perimeter of the facility by employees or contractors to facilitate repairs or construction of the physical plant. Only the tools and equipment needed specifically for the intended work will be permitted into the facility. All tools and equipment will be inventoried and a list of the tools will be provided to the control booth prior to any tools or equipment being brought inside the secure perimeter.

A staff member will check the tools being brought into this facility against the inventory list. Prior to entering the secure perimeter of the facility, the contractor shall be instructed to maintain personal possession of the tools at all times. When it is necessary to complete a task in an area where inmates are present, the inmates shall be locked down by staff supervising the area.

When the person has finished working in the area, the assigned deputy will ensure that all tools are accounted for by checking the tool inventory. In the event of a discrepancy, the on-duty supervisor shall be immediately notified and appropriate action taken to locate or account for the items. Once all tools have been accounted for, the inmates may be released from lockdown.

### 204.5 EXTERIOR-USE TOOLS

Exterior-use tools are those that are used by inmate workers outside of the secure perimeter. These tools include, but are not limited to, the following:

- Handheld tools
- Power tools
- Landscape maintenance tools
- Farm equipment

Only inmate workers who are classified to work outside the secure perimeter of the facility will be allowed to possess exterior-use tools. The deputy responsible for supervising inmate workers on outside work crews will inventory all tools assigned for this purpose at the beginning of the shift.

Any tool issued to an inmate will be logged with the inmate's name, the tool type and documented. When an inmate worker is finished with that tool, the responsible staff member shall check the tool against the check-out log and document its return. Inmate workers shall not be permitted to pass tools between each other except under the direct supervision of a deputy.

All tools will be checked-in and noted on the log and returned to the tool storage area at the end of each shift. Until all tools are accounted for, inmate workers should not be released from the work assignment.

In the event that an exterior-use tool is missing, the deputy shall immediately notify a supervisor. A thorough search for the tool will be undertaken and an incident report shall be completed. Inmates may only be released from their work assignments when it has been determined that it is safe to do so, and upon the approval of the supervisor. The incident report with all relevant information shall be forwarded to the Facility Commander.

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### Tool and Culinary Equipment

#### 204.6 KITCHEN EQUIPMENT

Culinary tools are located in the kitchen and include common tools used in the preparation, service and delivery of meals.

All kitchen knives or metal tools with sharp edges shall be stored in a locked cabinet. There shall be an outline of the tool's assigned location in the cabinet so that any tool missing from the cabinet can be easily identified. When in use, all knives shall be tethered to the work area. All tools shall be returned to the secure cabinet immediately when not in use.

The cooks assigned to the kitchen shall inventory all kitchen tools at the beginning of his/her shift and prior to the arrival of inmate workers. Kitchen tools will only be issued to inmates who have been classified as inmate workers. Staff will directly supervise inmates at all times when the inmates are using tools.

Each tool issued will be assigned to an individual inmate and logged. The inmate's name and the tool type will be documented. When an inmate worker is finished with a tool, the tool shall be checked in with the cook and documented. Inmate workers shall not be permitted to pass tools between each other.

All tools will be returned to the kitchen tool cabinet at the end of each shift and must be accounted for prior to any inmate worker being released from the work assignment.

In the event that a kitchen tool is missing, the staff member shall immediately notify the on-duty supervisor and assigned deputy. The deputy shall immediately notify the on-duty sergeant, who shall initiate immediate action to locate or account for the missing tool. A thorough search for the tool will be undertaken and an incident report shall be completed by the deputy responsible for the supervision of the kitchen area.. The incident report with all relevant information shall be forwarded to the Facility Commander.

### 204.7 SERVING AND INDIVIDUAL EATING TOOLS

Serving tools and individual eating tools are those culinary tools located outside of the kitchen. Only inmate workers who are assigned to serve food shall be in control of serving tools. These tools shall be assigned to each inmate worker by the kitchen cook or Food and Laundry managers prior to leaving the kitchen. The tool type shall be documented. Upon returning to the kitchen from serving meals, the inmate workers shall individually check their tools in with the kitchen cook, who shall document each one.

In the event that a serving tool is missing, the kitchen staff shall notify a supervisor and assigned kitchen deputy and a search for the tool shall be initiated.

Eating utensils (forks/spoons/sporks) shall be counted by the deputy supervising the meal service prior to and at the completion of each meal. In the event that a utensil is missing, the housing unit shall be immediately locked down and a supervisor notified. A thorough search of the housing unit shall be initiated to locate the tool.

## **Disposition of Evidence**

### 205.1 PURPOSE AND SCOPE

The purpose of this policy is to provide direction regarding the proper handling and disposition of contraband and evidence to ensure that the chain of custody is maintained so that evidence is admissible in a court of law or disciplinary hearing.

#### **205.2 POLICY**

It is the policy of the Tulare County Sheriff's Office to seize evidence and contraband in accordance with current constitutional and search-and-seizure law. Members of this office shall properly handle all contraband and evidence in order to maintain its admissibility. All contraband and evidence shall be handled in a safe manner and in a way that will maintain the chain of custody.

### 205.3 INITIAL SEIZURE OF EVIDENCE

Any staff member who first comes into possession of any evidence should retain such evidence in his/her possession until it is properly tagged and booked. When handling evidence and contraband, staff should observe the following safety precautions:

- (a) Unload any firearm located in the approved loading/unloading area outside of the facility. If it is a revolver, the cylinder should be left open. If it is a semi-automatic pistol, the magazine shall be removed and the slide locked back in an open position. The cartridges and/or magazine will be packaged separately and booked with the firearm.
- (b) Sheath any knife or other stabbing instrument in its holster (if any), or attach (tape) stiff cardboard to completely cover the blade.
- (c) Place needles, such as syringes, into a hard plastic container that cannot be punctured by the needle.

(d)

### 205.4 PROPERTY BOOKING PROCEDURE

All property shall be booked prior to the employee going off-duty unless otherwise approved by a supervisor. Employees booking property shall observe the following guidelines:

- (a) Complete the property form describing each item of property separately, listing all serial numbers, owner's name, finder's name and other identifying information or markings.
- (b) Mark each item of evidence with the booking employee's initials and the date booked using the appropriate method to prevent defacing or damaging the value of the property.
- (c) Complete an evidence/property tag and attach it to each package or envelope in which the property is stored.
- (d) Place the case number in the upper right corner of the bag or in the appropriate field of the evidence/property tag.

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### Disposition of Evidence

- (e) The original property form shall be submitted with the case report. A copy shall be placed with the property in the temporary property locker or with the property if it is stored somewhere other than a property locker.
- (f) When the property is too large to be placed in a locker, the item may be retained in the secure supply room or another area that can be secured from unauthorized entry. Place the completed property form into a numbered locker indicating the location of the property.

### 205.4.1 NARCOTICS AND DANGEROUS DRUGS

All narcotics and dangerous drugs shall be booked separately using a separate property record. Paraphernalia as defined by Health and Safety Code § 11364 shall also be booked separately.

The Deputy Seizing the narcotics and dangerous drugs shall place them in the designated locker accompanied by two copies of the form for the Records Unit and detectives. The remaining copy will be detached and submitted with the case report.

### 205.4.2 PACKAGING NARCOTICS

The Deputy seizing narcotics and dangerous drugs shall handle all narcotic substances as if the drug fentanyl has been introduced to the substance and use extreme caution in retaining such property in their possession until it is properly weighed, packaged, tagged, and placed in the designated narcotics locker, accompanied by the property record. Prior to packaging, Personal Protective Equipment (PPE) needs to be utilized in handling, collecting and packaging any narcotic or dangerous substance, The narcotic or dangerous substance will need to be sent to Fresno Regional Laboratory for further handling and processing.

Narcotics and dangerous drugs shall be packaged in an envelope of appropriate size. The booking Deputy shall initial the sealed envelope and the initials covered with cellophane tape. Narcotics and dangerous drugs shall not be packaged with other property.

A completed property tag shall be attached to the outside of the container. The chain of evidence shall be recorded on the back of this tag.

### 205.4.3 EXCEPTIONAL HANDLING

Certain property items require a separate process. Bodily fluids, such as blood or semen stains, shall be air-dried prior to booking.

### 205.4.4 PROPERTY CONTROL

Every time property is released or received, an appropriate entry on the evidence package and property control card shall be completed to maintain the chain of custody. No property or evidence is to be released without first receiving written authorization from a supervisor or the employee who is managing the case.

Request for analysis for items other than narcotics and dangerous drugs shall be completed on the appropriate forms and submitted to the Sergeant. This request may be filled out any time after booking the property or evidence.

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### Disposition of Evidence

#### 205.4.5 STATUS OF PROPERTY

Each person receiving property will make the appropriate entry to document the chain of custody. Temporary release of property to a law enforcement authority for investigative purposes or for court shall be noted on the property control card, stating the date, time and to whom it was released.

The Sergeant shall obtain the signature of the person to whom the property was released and the reason for release. Any employee receiving property shall be responsible for such property until it is returned to property or released to another authorized person or entity.

The return of the property should be recorded on the property control card, indicating date, time and the name of the person who returned the property.

#### 205.5 DISPOSITION OF PROPERTY

All property not held for evidence in a pending criminal investigation or proceeding, and held for three months or longer because the owner has not been located or has failed to claim the property, may be disposed of in compliance with existing laws, upon receipt of proper authorization for disposal.

Property personnel shall make reasonable efforts to attempt to contact the owner when known. Property not held for any other purpose and not claimed within 90 days after notification (or receipt, if notification is not feasible) may be auctioned to the highest bidder at a properly published public auction. If such property is not sold at auction or otherwise lawfully claimed, it may thereafter be destroyed (Civil Code § 2080.6). The final disposition of all such property shall be fully documented on the property control card and in any related reports (Civil Code § 2080.6).

### **Records and Data Practices**

### 206.1 PURPOSE AND SCOPE

This policy establishes guidelines for the control and access of confidential records by staff, contractors and volunteers.

### 206.2 ACCESS TO CRIMINAL RECORDS

Official files, documents, records, electronic data, video and audio recordings and information held by the Tulare County Sheriff's Office or in the custody or control of office employees, volunteers or contractors are regarded as non-public and/or confidential.

Access to confidential paper or electronically generated records in this facility is restricted at various locations according to job function and the need to know. Employees working in assigned areas will only have access to the information that is necessary for the performance of their duties. Granting access to other employees or anyone outside of the work area must meet with supervisory approval. All requests for information received from outside the Office shall be forwarded to the Facility Commander.

Custody staff, volunteers and contractors shall not access, disclose or permit the disclosure or use of such files, documents, reports, records, video or audio recordings or other confidential information except as required in the performance of their official duties and in accordance with office policies, statutes, ordinances and regulations related to data practices.

Custody staff, volunteers and contractors who are uncertain of the confidentiality status of any document should consult with a supervisor or Facility Commander to determine the status of the documents in question.

### 206.3 STAFF TRAINING

Prior to being allowed to work inside this facility, all custody staff, volunteers and contractors will receive training on office records, policies and confidentiality requirements, including the potential criminal and civil penalties that may result from a breach of confidentiality in violation of this policy and all applicable statutes.

## **Report Preparation**

### 207.1 PURPOSE AND SCOPE

Report preparation is a major part of each deputy's job. The purpose of reports is to refresh the deputy's memory and to provide sufficient information for a follow-up investigation and successful prosecution or a disciplinary proceeding. Report writing is the subject of substantial formal and on-the-job training.

### 207.2 REPORT PREPARATION

Employees should ensure that reports are sufficiently detailed for their purpose and free from errors prior to submission. Reports shall be prepared by the staff assigned to investigate or document an incident, approved by a supervisor and submitted to the Facility Commander or the authorized designee in a timely manner (15 CCR 1044). Any incident resulting in death, injury or endangerment to staff or a visitor, serious injury to an inmate, escape, a major disturbance, a facility emergency or an unsafe condition at the facility shall be submitted to the Facility Commander as soon as practicable but within 24 hours of the incident. It is the responsibility of the assigned employee to ensure that all the above listed reports meet this requirement or that supervisory approval has been obtained to delay the report. The supervisor must determine whether the report will be available in time for appropriate action to be taken, such as administrative notifications or resolution, investigative leads or an inmate disciplinary proceeding.

Handwritten reports must be prepared legibly. If the report is not prepared legibly, the employee shall be required by the reviewing supervisor to promptly correct the report. Employees who dictate reports by any means shall use appropriate grammar, as content is not the responsibility of the typist. Employees who generate reports on computers are subject to all requirements of this policy.

All reports shall accurately reflect the identity of the persons involved, all pertinent information seen, heard or assimilated by any other sense, and any actions taken. Employees shall not suppress, conceal or distort the facts of any reported incident, nor shall any employee make a false report orally or in writing. Generally, the reporting employee's opinions should not be included in reports unless specifically identified as such.

### 207.3 REQUIRED REPORTING

Written reports are required in all of the following situations on the appropriate office-approved form unless otherwise approved by a supervisor (15 CCR 1044).

### 207.3.1 CRIMINAL ACTIVITY REPORTING

When an employee responds to an incident, or as a result of self-initiated activity, and becomes aware of any activity where a crime has occurred, the employee is required to document the activity. The fact that a victim is not desirous of prosecution is not an exception to documentation.

#### 207.3.2 INCIDENT REPORTING

Incident reports generally serve as an in-house notation of occurrences in the facility and to initiate, document and support the inmate disciplinary process. The Office shall establish a filing system

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### Report Preparation

that differentiates between incident reports, crime reports and disciplinary actions. This policy does not require the duplication of information on two different forms. Where both exist, cross-referencing facilitates retrieval of one or both.

Incidents that shall be documented using the appropriate approved report include (15 CCR 1044):

- (a) Non-criminal incidents of rule violations by inmates.
- (b) Attempted suicide or suicidal ideation on the part of an inmate, if known.
- (c) Non-criminal breaches of security or evidence of an escape attempt.
- (d) Non-criminal security threats, including intelligence related to detention facility activities.
- (e) Significant incidents related to medical issues, health or safety in the detention facility.
- (f) Discovery of contraband in the possession of inmates or their housing areas.
- (g) Detaining or handcuffing any visitor at the facility.
- (h) Traffic collisions involving office vehicles.
- (i) Risk management incidents to include injuries to inmates and lost or damaged property.
- (j) Accidental injuries of staff, inmates or the general public.

### 207.3.3 DEATHS

All deaths shall be investigated and a report completed by a qualified investigating officer to determine the manner of death and to gather information, including statements of inmates and staff who were in the area at the time the death occurred.

Reporting of deaths will be handled in accordance with the Reporting Inmate Deaths Policy.

### 207.3.4 INJURY OR DAMAGE BY OFFICE PERSONNEL

Reports shall be taken if an injury occurs that is a result of an act of an employee. Reports shall be taken involving damage to property or equipment.

### 207.3.5 FORCE OPTIONS

Reports related to force options shall be made in accordance with the Force OptionPolicy.

### 207.4 GENERAL POLICY OF EXPEDITIOUS REPORTING

In general, all employees and supervisors shall act with promptness and efficiency in the preparation and processing of all reports. An incomplete report, unorganized reports or reports delayed without supervisory approval are not acceptable. Reports shall be processed according to established priorities or according to special priority necessary under exceptional circumstances.

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### Report Preparation

#### 207.4.1 GENERAL POLICY OF HANDWRITTEN REPORTS

Some incidents and report forms lend themselves to block print rather than typing. In general, the narrative portion of those reports in which there is a long narrative should be typed or dictated.

Supervisors may require, with the foregoing general policy in mind, block printing or typing of reports of any nature for office consistency.

### 207.4.2 GENERAL USE OF OTHER HANDWRITTEN FORMS

County, state and federal agency forms may be block printed as appropriate. In general, the form itself may make the requirement for typing apparent.

### 207.5 REPORT CORRECTIONS

Supervisors shall review reports for content and accuracy. If a correction is necessary, the reviewing supervisor should return it to the reporting employee for correction as soon as practicable. It shall be the responsibility of the originating employee to ensure that any report returned for correction is processed in a timely manner. It shall be the responsibility of the supervisor rejecting the report to follow up on any report corrections not received in a timely manner.

### 207.6 REPORT CHANGES OR ALTERATIONS

Reports that have been approved by a supervisor and submitted to the Records Division for filing and distribution shall not be modified or altered except by way of a supplemental report. Reviewed reports that have not yet been submitted to the Records Division may be corrected or modified by the authoring employee only with the knowledge and authorization of the reviewing supervisor. Reviewing supervisors should not alter reports. When modifications are required, these should be the responsibility of the authoring employee.

### 207.7 ELECTRONIC SIGNATURES

The Tulare Detention Facility has established an electronic signature procedure for use by all employees of the Tulare Detention Facility. The Facility Commander or the authorized designee shall be responsible for maintaining the electronic signature system and ensuring that each employee creates a unique, confidential password for his/her electronic signature. The system use and design shall follow the requirements of Civil Code § 1633 et seq. when applicable.

- (a) Employees may only use their electronic signature for official reports or other official communications.
- (b) Each employee shall be responsible for the security and use of his/her electronic signature and shall promptly notify a supervisor if the electronic signature has or may have been compromised or misused.

### **Inmate Records**

### 208.1 PURPOSE AND SCOPE

This policy establishes the procedures required to create and maintain accurate records of all persons booked and confined in this facility.

### **208.2 POLICY**

It is the policy of this office that all records shall be complete and comprehensive, resulting in reliable data that provides information about each inmate's period of confinement, as well as histories of previous confinement in this facility. All inmate records are official office documents and should be used for official business only. Inmate records are a vital component of the criminal justice system and should only be released to authorized persons.

### 208.2.1 RECORDS RETENTION

Inmate records shall be maintained consistent with the established records retention schedule.

#### 208.3 RECORD MAINTENANCE

It shall be the responsibility of the Records Division to maintain the following records on all persons who have been committed or assigned to this facility, including, but not limited to, the following (15 CCR 1041):

- Information gathered during the admission process as provided in the Inmate Reception Policy
- Photographs and fingerprints cross referenced to the booking number
- Duration of confinement
- Cash and property receipts
- Classification records, including inmate classification levels and housing restrictions
- Housing history records
- Reports of disciplinary events and dispositions
- Grievances and dispositions
- Reports of incidents or crimes committed during confinement
- Request forms
- Special visit forms
- Court appearances, documents and the disposition of hearings
- Work documentation
- Program documentation
- Visitation records
- Telephone records

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### Inmate Records

 Medical, dental, mental health, drug and alcohol screenings, assessments, treatments and medications

The Facility Commander or the authorized designee shall establish a procedure for managing inmate records.

### 208.3.1 COURT ORDERS OF NAME OR GENDER CHANGE

When a court order is received that involves a name change of an inmate, the Records Division shall document the new name in the inmate's records and list any prior names as an alias. When a court order is received involving a gender change, appropriate adjustments will be made to the inmate records (Code of Civil Procedure § 1279.5).

### 208.4 RELEASE OF INMATE RECORDS

Inmate records are confidential and shall be used for official business only. Any release of inmate records shall be made only in compliance with lawful court order or as authorized by state and federal law to persons having a legitimate criminal justice need, or with a consent form signed by the inmate (15 CCR 1045). A copy of the release authorization document shall be maintained in the inmate record file.

### 208.5 ELECTRONIC RECORD MAINTENANCE

All inmate records and data maintained in an electronic format shall be accessible only through a login/password-protected system capable of documenting by name, date and time any person who has accessed the information. The Facility Commander shall be responsible for working with the information technology personnel to ensure the security of the data and to develop and maintain a copy of the security plan.

### 208.6 RECORDS RETENTION

Inmate records shall be maintained consistent with the established records retention schedule.

### 208.7 INFORMATION SHARING REGARDING IMMIGRATION STATUS

No member of this office will prohibit, or in any way restrict, another member from doing any of the following regarding the citizenship or immigration status, lawful or unlawful, of any individual (8 USC § 1373; Government Code § 7284.6):

- (a) Sending information to, or requesting or receiving such information from federal immigration officials
- (b) Maintaining such information in office records
- (c) Exchanging such information with any other federal, state or local government entity Nothing in this policy restricts sharing information permissible under the California Values Act.

## **Key and Electronic Access Device Control**

### 209.1 PURPOSE AND SCOPE

The control and accountability of facility keys and electronic access devices are vital factors in maintaining a safe and secure environment for inmates, staff, volunteers, contractors and the public (15 CCR 1029(a)(6)). This policy outlines the methods that the Office will use in maintaining strict security of its keys and electronic access devices. For ease of reference, the term "key" as used in this policy includes all physical means of access to or exit from the secure areas of the facility.

### **209.2 POLICY**

It is the policy of this office that all keys used to access secure areas of the facility or to exit the secure areas of the facility are strictly controlled. Employees and supervisors will be held accountable for the security and safety of the facility. All key control activities shall be accurately documented on a daily basis (15 CCR 1029(a)(6)).

### 209.2.1 KEY IDENTIFICATION

All keys that open any doors within the facility shall be marked with unique identification codes that will allow for quick inventory. Keys that are bundled together as a set shall be numbered or coded with a tag to identify that set and the number of keys on the ring. The identifying numbers or code on keys shall not correspond to numbers/codes on locks.

A separate secure document identifying all keys will be maintained by the central control supervisor.

### 209.2.2 KEYSET CONTENTS

Keysets issued to staff for use within the secure perimeter of the facility shall not contain any key that would permit access to areas outside the secure perimeter. The armory key shall be secured in a lock box. Exterior door keys shall not be permitted inside the facility except during an emergency requiring access to the exterior doors.

### 209.2.3 KEY CONTROL

All facility keys shall be maintained in a locked key box within the Central Control room. This room shall have controlled access for staff only.

Employees shall not possess any key for which they have not been authorized.

Employees shall not duplicate, mark, alter or manufacture any key without written authorization from the Facility Commander or the authorized designee.

Supervisors shall, at the beginning and end of their respective shifts, inventory the key box and its contents. All keys must be accounted for before the supervisor may end his/her shift.

Under no circumstances will security keys be made available to inmates regardless of their status.

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### Key and Electronic Access Device Control

#### 209.2.4 LOCK POLICY

All security perimeter entrances, Central Control doors and cell doors shall be kept locked, except when used for admission or exit of employees, inmates or visitors, and in an emergency. Operators of sallyports shall ensure that only one of the doors of a sallyport is opened at any time for entry or exit purposes, except where the entry or exit of emergency personnel requires the operator to override the doors and allow for rapid entry or exit.

### 209.2.5 TESTING

Locks to security doors or gates shall be tested periodically for proper function to ensure proper operation.

### 209.2.6 EXTERIOR DOOR AND ARMORY KEYS

Keys for exterior doors to the facility and the armory shall be kept in a locked cabinet in a secure location. Staff shall, at the beginning and end of their respective shifts, inventory and account for these keys.

### 209.2.7 MISSING KEYS

Any staff member who discovers that a key or keyset is missing shall immediately make a verbal report to a supervisor and shall prepare a written incident report as directed by the supervisor. The supervisor shall immediately initiate a search for the missing key. If a reasonable effort to locate the key fails, the supervisor shall order a lockdown of the facility. All inmates shall be locked in their cells/housing units. Inmates shall not be allowed to pass into or out of the facility without being thoroughly searched for the missing key. The supervisor shall, as soon as practicable, notify the Facility Commander regarding the loss of the key, when it was discovered and the circumstances involved.

A methodical and thorough search of the entire facility will be made by the on-duty staff.

Additional staff may be called to assist with the search. If, after a thorough search, the key or keyset is not located, the Facility Commander will determine whether to re-key any locks that may have been compromised, and whether this should be done immediately.

The Facility Commander shall initiate an investigation into the disappearance of the keys to reexamine the procedures for key control, and shall notify the Sheriff of his/her findings. Based upon the findings of the investigation and any recommendations, the procedures governing this policy may be amended.

### 209.2.8 DAMAGED KEYS OR LOCK

Damaged keys or locks shall be promptly reported to a supervisor. No part of a broken key shall be left in the lock. All portions of the damaged key must be turned in to the Shift Supervisor, who will ensure duplicate keys are provided as needed. Damaged locks shall be replaced or repaired as soon as practicable. Appropriate security measures shall be taken until such time as the lock is properly restored. No lock to a security door or gate shall be permitted to be inoperable or left in an unsuitable condition. No inmate shall be secured in a cell, detention room or area that has inoperable locks.

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Key and Electronic Access Device Control

### 209.3 KEY CONTROL RECORDS

A shift roster will be maintained for the accounting and security of all keysets. Each shift is responsible for reporting any key malfunctions or missing keysets. Key control measures shall be documented by the control room staff on logs and forms, and the records retained in accordance with established records retention schedules.

### **Personnel Records**

### 210.1 PURPOSE AND SCOPE

This policy governs maintenance and access to personnel records. Personnel records include any file maintained under an individual member's name.

### **210.2 POLICY**

It is the policy of this office to maintain personnel records and preserve the confidentiality of personnel records pursuant to the Constitution and the laws of California (Penal Code § 832.7).

### 210.3 OFFICE FILE

The Office file shall be maintained as a record of a person's employment/appointment with this office. The office file should contain at a minimum:

- (a) Personal data, including photographs, marital status, names of family members, educational and employment history, or similar information. A photograph of the member should be permanently retained.
- (b) Election of employee benefits.
- (c) Personnel action reports reflecting assignments, promotions, and other changes in employment/appointment status. These should be permanently retained.
- (d) Original performance evaluations. These should be permanently retained.
- (e) Discipline records including copies of sustained personnel complaints (see the Personnel Complaints Policy.
  - Disciplinary action resulting from sustained internally initiated complaints or observation of misconduct shall be maintained pursuant to the established records retention schedule and at least four years (Government Code § 12946).
  - 2. Disciplinary action resulting from a sustained civilian's complaint involving misconduct shall be maintained pursuant to the established records retention schedule and at least 15 years (Penal Code § 832.5).
  - 3. A civilian's complaint involving misconduct that was not sustained shall be maintained pursuant to the established records retention schedule and at least five years (Penal Code § 832.5).
- (f) Adverse comments, such as supervisor notes or memos may be retained in the office file after the member has had the opportunity to read and initial the comment (Government Code § 3305).
  - 1. Once a member has had an opportunity to read and initial any adverse comment, the member shall be given the opportunity to respond in writing to the adverse comment within 30 days (Government Code § 3306).
  - 2. Any member response shall be attached to and retained with the original adverse comment (Government Code § 3306).

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- 3. If a member refuses to initial or sign an adverse comment, at least one supervisor should note the date and time of such refusal on the original comment and the member should sign or initial the noted refusal. Such a refusal, however, shall not be deemed insubordination, nor shall it prohibit the entry of the adverse comment into the member's file (Government Code § 3305).
- (g) Commendations and awards.
- (h) Any other information, the disclosure of which would constitute an unwarranted invasion of personal privacy.

### 210.4 DIVISION FILE

Division files may be separately maintained internally by a member's supervisor for the purpose of completing timely performance evaluations. The Division file may contain supervisor comments, notes, notices to correct, and other materials that are intended to serve as a foundation for the completion of timely performance evaluations.

All materials intended for this interim file shall be provided to the employee prior to being placed in the file in accordance with Government Code § 3305 and Government Code § 3306.

### 210.5 TRAINING FILE

An individual training file shall be maintained by the Training Lieutenant for each member. Training files will contain records of all training; original or photocopies of available certificates, transcripts, diplomas, and other documentation; and education and firearms qualifications. Training records may also be created and stored remotely, either manually or automatically (e.g., Daily Training Bulletin (DTB) records).

- (a) The involved member is responsible for providing the Training Lieutenant or immediate supervisor with evidence of completed training/education in a timely manner.
- (b) The Training Lieutenant or supervisor shall ensure that copies of such training records are placed in the member's training file.

### 210.6 INTERNAL AFFAIRS UNIT FILE

Internal affairs files shall be maintained under the exclusive control of the Internal Affairs Unit in conjunction with the office of the Sheriff. Access to these files may only be approved by the Sheriff or the Internal Affairs Unit supervisor.

These files shall contain the complete investigation of all formal complaints of member misconduct, regardless of disposition (Penal Code § 832.12). Investigations of complaints that result in the following findings shall not be placed in the member's file, but will be maintained in the internal affairs file:

- (a) Not sustained
- (b) Unfounded
- (c) Exonerated

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### Personnel Records

Investigation files arising out of sustained civilian's complaints involving misconduct shall be maintained pursuant to the established records retention schedule and for a period of at least 15 years. Investigations that resulted in other than a sustained finding may not be used by the Office to adversely affect an employee's career (Penal Code § 832.5).

Investigation files arising out of internally generated complaints shall be maintained pursuant to the established records retention schedule and for at least four years (Government Code § 12946).

Investigation files arising out of a civilian complaint involving misconduct that was not sustained shall be maintained pursuant to the established records retention schedule and at least five years (Penal Code § 832.5).

#### 210.7 MEDICAL FILE

A medical file shall be maintained separately from all other personnel records and shall contain all documents relating to the member's medical condition and history, including but not limited to:

- (a) Materials relating to a medical leave of absence, including leave under the Family and Medical Leave Act (FMLA).
- (b) Documents relating to workers' compensation claims or the receipt of short- or longterm disability benefits.
- (c) Fitness-for-duty examinations, psychological and physical examinations, follow-up inquiries, and related documents.
- (d) Medical release forms, doctor's slips, and attendance records that reveal a member's medical condition.
- (e) Any other documents or material that reveals the member's medical history or medical condition, including past, present, or future anticipated mental, psychological, or physical limitations.

#### 210.8 SECURITY

Personnel records should be maintained in a secured location and locked either in a cabinet or access-controlled room. Personnel records maintained in an electronic format should have adequate password protection.

Personnel records are subject to disclosure only as provided in this policy or according to applicable discovery procedures.

Nothing in this policy is intended to preclude review of personnel records by the County Administrative Officer, County Counsel, or other attorneys or representatives of the county in connection with official business.

### 210.9 REQUESTS FOR DISCLOSURE

Any member receiving a request for a personnel record shall promptly notify the custodian of records or other person charged with the maintenance of such records.

Upon receipt of any such request, the responsible person shall notify the affected member as soon as practicable that such a request has been made (Evidence Code § 1043).

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The responsible person shall further ensure that an appropriate response to the request is made in a timely manner, consistent with applicable law. In many cases, this may require assistance of available legal counsel.

All requests for disclosure that result in access to a member's personnel records shall be logged in the corresponding file.

### 210.9.1 REQUESTS FOR DISCLOSURE OF FORMER EMPLOYEE FILES

Members receiving requests for information from another agency regarding allegations of sexual abuse or sexual harassment involving a former employee should work with counsel to ensure compliance with Prison Rape Elimination Act (PREA) requirements (28 CFR 115.17).

### 210.9.2 RELEASE OF PERSONNEL INFORMATION

Personnel records shall not be disclosed except as allowed by law (Penal Code § 832.7; Evidence Code § 1043).

Any person who maliciously, and with the intent to obstruct justice or the due administration of the laws, publishes, disseminates, or otherwise discloses the residence address or telephone number of any member of this office may be guilty of a misdemeanor (Penal Code § 146e).

The Office may release any factual information concerning a disciplinary investigation if the member who is the subject of the investigation (or the member's representative) publicly makes a statement that is published in the media and that the member (or representative) knows to be false. The disclosure of such information, if any, shall be limited to facts that refute any such false statement (Penal Code § 832.7).

### 210.9.3 RELEASE OF LAW ENFORCEMENT GANG INFORMATION

Information relating to the termination of a deputy from this office for participation in a law enforcement gang shall be disclosed to another law enforcement agency that is conducting a preemployment background investigation except where specifically prohibited by law (Penal Code § 13670).

### **210.9.4 SUBPOENAS**

Personnel files may be subpoenaed by a third party. If employment records are subpoenaed under state authority, the employee may be notified and has the right to object to production of the records under certain circumstances.

Any subpoena duces tecum should be promptly provided to a supervisor for review and processing. While a subpoena duces tecum may ultimately be subject to compliance, it is not an order from the court that will automatically require the release of the requested information.

All questions regarding compliance with any subpoena or subpoena duces tecum should be promptly referred to legal counsel for the Office so that a timely response can be prepared.

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### Personnel Records

## 210.10 RELEASE OF PERSONNEL RECORDS AND RECORDS RELATED TO CERTAIN INCIDENTS, COMPLAINTS, AND INVESTIGATIONS OF OFFICERS/DEPUTIES

Personnel records and records related to certain incidents, complaints, and investigations of deputies shall be released pursuant to a proper request under the Public Records Act and subject to redaction and delayed release as provided by law.

The custodian of records should work as appropriate with the Sheriff or the Internal Affairs Unit supervisor in determining what records may qualify for disclosure when a request for records is received and if the requested record is subject to redaction or delay from disclosure.

For purposes of this section, a record includes (Penal Code § 832.7(b)(3)):

- All investigation reports.
- Photographic, audio, and video evidence.
- Transcripts or recordings of interviews.
- Autopsy reports.
- All materials compiled and presented for review to the District Attorney or to any person
  or body charged with determining whether to file criminal charges against a deputy in
  connection with an incident, whether the deputy's action was consistent with law and
  office policy for purposes of discipline or administrative action, or what discipline to
  impose or corrective action to take.
- Documents setting forth findings or recommending findings.
- Copies of disciplinary records relating to the incident, including any letters of intent
  to impose discipline, any documents reflecting modifications of discipline due to the
  Skelly or grievance process, and letters indicating final imposition of discipline or other
  documentation reflecting implementation of corrective action.

Unless a record or information is confidential or qualifies for delayed disclosure as provided by Penal Code § 832.7(b)(8) or other law, the following records (hereinafter referred to as "qualifying records") shall be made available for public inspection no later than 45 days from the date of a request (Penal Code § 832.7(b)(1)):

- (a) Records relating to the report, investigation, or findings of:
  - 1. The discharge of a firearm at another person by a deputy.
  - 2. The use of force against a person resulting in death or in great bodily injury (as defined by Penal Code § 243(f)(4)) by a deputy.
  - 3. A sustained finding involving a complaint that alleges unreasonable or excessive force.
  - 4. A sustained finding that a deputy failed to intervene against another deputy using force that is clearly unreasonable or excessive.
- (b) Records relating to an incident where a sustained finding was made by the Office or oversight agency regarding:

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- 1. A deputy engaged in sexual assault of a member of the public (as defined by Penal Code § 832.7(b)).
- 2. Dishonesty of a deputy relating to the reporting, investigation, or prosecution of a crime, or directly relating to the reporting of, or investigation of misconduct by another deputy, including but not limited to any false statements, filing false reports, destruction, falsifying, or concealing of evidence, or perjury.
- 3. A deputy engaged in conduct including but not limited to verbal statements, writings, online posts, recordings, and gestures involving prejudice or discrimination against a person on the basis of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran status.
- 4. A deputy made an unlawful arrest or conducted an unlawful search.

Qualifying records will be made available regardless of whether the deputy resigns before the office or an oversight agency concludes its investigation (Penal Code § 832.7(b)(3)).

A record from a separate and prior investigation or assessment of a separate incident shall not be released unless it is independently subject to disclosure (Penal Code § 832.7(b)(4)).

When an investigation involves multiple deputies, the Office shall not release information about allegations of misconduct or the analysis or disposition of an investigation of a deputy unless it relates to a sustained finding of a qualified allegation as provided by Penal Code § 832.7(b)(5). However, factual information about the action of the deputy during an incident or the statements of a deputy shall be released if the statements are relevant to a finding of the qualified allegation against another deputy that is subject to release (Penal Code § 832.7(b)(5)).

A record of a complaint, or the investigations, findings, or dispositions of that complaint, shall not be released if the complaint is frivolous or if the complaint is unfounded (Penal Code § 832.7(b)(9)).

### 210.10.1 REDACTION

The custodian of records, in consultation with the Sheriff or the authorized designee, shall redact the following portions of qualifying records made available for release (Penal Code § 832.7(b)(6)):

- (a) Personal data or information (e.g., home address, telephone number, identities of family members) other than the names and work-related information of deputies
- (b) Information that would compromise the anonymity of whistleblowers, complainants, victims, and witnesses
- (c) Confidential medical, financial, or other information where disclosure is prohibited by federal law or would cause an unwarranted invasion of personal privacy that clearly outweighs the strong public interest in records about possible misconduct and use of force
- (d) Where there is a specific, articulable, and particularized reason to believe that disclosure of the record would pose a significant danger to the physical safety of the deputy or another person

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Additionally, a record may be redacted, including redacting personal identifying information, where, on the facts of the particular case, the public interest served by not disclosing the information clearly outweighs the public interest served by disclosing it (Penal Code § 832.7(b)(7)).

### 210.10.2 DELAY OF RELEASE

Unless otherwise directed by the Sheriff, the custodian of records should consult with a supervisor familiar with the underlying investigation to determine whether to delay disclosure of qualifying records due to any of the following conditions (Penal Code § 832.7):

- (a) Active criminal investigations
  - Disclosure may be delayed 60 days from the date the misconduct or use of force occurred or until the District Attorney determines whether to file criminal charges, whichever occurs sooner.
  - 2. After the initial 60 days, delay of disclosure may be continued if the disclosure could reasonably be expected to interfere with a criminal enforcement proceeding against a deputy or against someone other than a deputy who engaged in misconduct or used the force.
- (b) Filed criminal charges
  - When charges are filed related to an incident in which misconduct occurred or force was used, disclosure may be delayed until a verdict on those charges is returned at trial or, if a plea of guilty or no contest is entered, the time to withdraw the plea has passed.
- (c) Administrative Investigations
  - Disclosure may be delayed until there is a determination from the investigation whether the misconduct or use of force violated law or office policy, but no longer than 180 days after the date of the office's discovery of the misconduct or use of force or allegation of misconduct or use of force.

### 210.10.3 NOTICE OF DELAY OF RECORDS

When there is justification for delay of disclosure of qualifying records, the custodian of records shall provide written notice of the reason for any delay to a requester as follows (Penal Code § 832.7):

- (a) Provide the specific basis for the determination that the interest in delaying disclosure clearly outweighs the public interest in disclosure. The notice shall also include the estimated date for the disclosure of the withheld information.
- (b) When delay is continued beyond the initial 60 days because of criminal enforcement proceedings against anyone at 180-day intervals provide, the specific basis that disclosure could reasonably be expected to interfere with a criminal enforcement proceeding and the estimated date for disclosure.
  - Information withheld shall be disclosed when the specific basis for withholding the information is resolved, the investigation or proceeding is no longer active, or no later than 18 months after the date of the incident, whichever occurs sooner, unless:

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### Personnel Records

(a) When the criminal proceeding is against someone other than a deputy and there are extraordinary circumstances to warrant a continued delay due to the ongoing criminal investigation or proceeding, then the Office must show by clear and convincing evidence that the interest in preventing prejudice to the active and ongoing criminal investigation or proceeding outweighs the public interest for prompt disclosure of records about misconduct or use of force by deputies.

In cases where an action to compel disclosure is brought pursuant to Government Code § 6258, the Office may justify delay by filing an application to seal the basis for withholding if disclosure of the written basis itself would impact a privilege or compromise a pending investigation (Penal Code § 832.7(b)(8)).

### 210.11 MEMBERS' ACCESS TO THEIR PERSONNEL RECORDS

Any member may request access to the member's own personnel records during the normal business hours of those responsible for maintaining such files. Any member seeking the removal of any item from the member's personnel records shall file a written request to the Sheriff through the chain of command. The Office shall remove any such item if appropriate, or within 30 days provide the member with a written explanation of why the contested item will not be removed. If the contested item is not removed from the file, the member's request and the written response from the Office shall be retained with the contested item in the member's corresponding personnel record (Government Code § 3306.5).

Members may be restricted from accessing files containing any of the following information:

- (a) An ongoing internal affairs investigations to the extent that it could jeopardize or compromise the investigation pending final disposition or notice to the member of the intent to discipline
- (b) Confidential portions of internal affairs files that have not been sustained against the member
- (c) Criminal investigations involving the member.
- (d) Letters of reference concerning employment/appointment, licensing, or issuance of permits regarding the member.
- (e) Any portion of a test document, except the cumulative total test score for either a section of the test document or for the entire test document
- (f) Materials used by the Office for staff management planning, including judgments or recommendations concerning future salary increases and other wage treatments, management bonus plans, promotions and job assignments or other comments or ratings used for office planning purposes
- (g) Information of a personal nature about a person other than the member if disclosure of the information would constitute a clearly unwarranted invasion of the other person's privacy
- (h) Records relevant to any other pending claim between the Office and the member that may be discovered in a judicial proceeding

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### Personnel Records

#### 210.12 RETENTION AND PURGING

Unless provided otherwise in this policy, personnel records shall be maintained in accordance with the established records retention schedule.

- (a) During the preparation of each member's performance evaluation, all personnel complaints and disciplinary actions should be reviewed to determine the relevancy, if any, to progressive discipline, training, and career development. Each supervisor responsible for completing the member's performance evaluation should determine whether any prior sustained disciplinary file should be retained beyond the required period for reasons other than pending litigation or other ongoing legal proceedings.
- (b) If a supervisor determines that records of prior discipline should be retained beyond the required period, approval for such retention should be obtained through the chain of command from the Sheriff.
- (c) If, in the opinion of the Sheriff, a personnel complaint or disciplinary action maintained beyond the required retention period is no longer relevant, all records of such matter may be destroyed in accordance with the established records retention schedule.

### 210.13 BRADY MATERIAL IN PERSONNEL FILES

The purpose of this section is to establish a procedure for releasing potentially exculpatory information (*Brady* material) contained within personnel files.

If a member is a material witness in a criminal case, a person or persons designated by the Sheriff may examine the subject deputy's personnel file to determine whether it contains *Brady* material.

Brady material includes all material evidence and facts that are reasonably believed to be exculpatory to any individual in a case (to impeach a witness, for example). Evidence or facts are considered material if there is a reasonable probability that they may affect the result of any criminal proceeding, including sentencing. If potential *Brady* material is located, the prosecuting attorney shall be notified.

Because a determination of what is or is not *Brady* material will often require legal or even judicial review, any questions should be resolved by the prosecuting attorney.

Prior to the release of any information pursuant to this process, a protective order should be requested from the court limiting the use of such materials to the involved case and requiring the return of all copies upon completion of the case.

## **Administrative and Supervisory Inspections**

### 211.1 PURPOSE AND SCOPE

The purpose of this policy is to establish both regularly scheduled and unannounced inspections of the facility's living and activity areas. This is to encourage contact with staff and inmates and to observe inmate living and working conditions. Inspections may be useful in identifying deficiencies, which can be corrected, as well as processes working properly, which may be replicated elsewhere in the facility.

### **211.2 POLICY**

Inspections shall be conducted by administrative and/or supervisory staff throughout the detention facility at least weekly.

### 211.3 INSPECTIONS

The Facility Commander is responsible for ensuring that scheduled and unscheduled inspections, visits and contacts are implemented to minimally include:

- (a) The general conditions.
- (b) The living and working conditions of inmates.
- (c) Compliance with policies.
- (d) Safety, security and sanitation concerns.
- (e) Inmate concerns.
- (f) Meal services.

### 211.3.1 AREAS TO BE INSPECTED

Supervisor inspections should occur in all occupied areas of the facility on a daily basis, including weekends and holidays. Inspections should be conducted randomly and special effort should be given to tour and informally inspect the following areas:

- Inmate housing areas
- Booking and receiving areas, including holding cells
- Exercise yard and recreation areas
- Visiting and program areas
- Medical and dental service areas
- Vocational work areas, e.g., the kitchen, janitorial closets
- Sallyports and transportation staging areas

### 211.4 INSPECTIONS OF SECURITY EQUIPMENT

The Facility Commander shall be responsible for designating a qualified person to conduct weekly inspections of all security devices, identifying those in need of repair or maintenance and providing

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### Administrative and Supervisory Inspections

a written report of the results of the inspection. The Facility Commander shall document all action taken to correct identified deficiencies, including maintenance records, and shall retain those records in accordance with established records retention schedules.

## Daily Activity Logs and Shift Briefing Reports

### 212.1 PURPOSE AND SCOPE

Accurate and legible records are vital to the management of the facility. They provide a means for managers to review events and emergency situations that have occurred within the facility.

This policy provides guidance for creating and maintaining accurate and legible records necessary for the management of the facility.

#### **212.2 POLICY**

This policy establishes the requirement for the preparation, maintenance and retention of permanent logs and shift reports to provide a record of both routine activities and unusual events such as emergencies or other notable occurrences.

### 212.3 PROCEDURES

All members assigned to a security post shall prepare an accurate daily activity log and shift report. The daily activity log and shift report is a permanent record of daily activities. Members who falsify any official document may be subject to disciplinary action, up to and including termination, as well as criminal prosecution.

All members will adhere to the following procedures when preparing a daily activity log or shift report:

- (a) Black ink pen shall be used, unless entries are logged into an electronic record.
- (b) Entries should be legible and provide sufficient detail to ensure that the log entry or report properly reflects the events of the day.
- (c) Entries shall include the name of the individual making the entry.
- (d) Entries shall reflect the date and time of the event logged.
- (e) Entries created and stored electronically shall not be modified. If corrections or changes become necessary, they shall be done by way of a supplemental entry, leaving the original entry unaltered and retrievable.
- (f) Handwritten log entries requiring modification shall be crossed out with one line and a new entry made, noting that it is a correction.

### 212.4 SHIFT ACTIVITY LOG AND SHIFT BRIEFINGS

All pertinent activities should be documented in the daily activity log. At a minimum this includes:

- Personnel on-duty
- Bookings and releases
- Formal counts
- Well-being checks, security checks and inspections and routine activities (Logged with the Pipe System)
- All searches/shakedowns

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### Daily Activity Logs and Shift Briefing Reports

- Inmate movement within the facility and inmates received at a housing assignment
- Meal service
- Professional visits to the housing units, including maintenance work and tours
- Medication delivery, sick call or inmate complaint of illness or injury and the action taken
- Disciplinary actions
- Supervisor rounds to the housing area and/or to specific inmates
- Unusual inmate behavior
- Discovered contraband
- Activities and programs offered and the attendees
- Unusual occurrences
- Equipment Count
- Use of emergency equipment
- Use of force option.
- Key counts: Check box only on log
- Inmate count at the beginning and end of each shift
- The time supervisors made rounds
- Information that would assist the oncoming shift
- Exchange of security equipment

The daily activity log will be retained in accordance with established records retention schedules.

Shift briefings will be conducted at the beginning of each shift and will cover information that would assist the oncoming shift, any unusual occurrences along with any other information provided by Facility Commander or Duty Sergeant.

## 212.5 DAILY DIVISION REPORTS AND DAILY FACILITY BRIEFING REPORTS DAILY DIVISION REPORT

The on duty supervisor will ensure A Daily Division Detention Report is sent out each morning. This report should contain the following:

- (a) Formal inmate count at the beginning and end of each shift (shift 1 and Shift 2)
- (b) Shift assignments, staff on loan, inmate reclassification and report information
- (c) Cells searched, Miscellaneous information (Policies reviewed, unusual occurrences)
- (d) Files ran, hospital details and perimeter checks

### **FACILITY BRIEFING REPORT**

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### Daily Activity Logs and Shift Briefing Reports

Each shift sergeant will complete a daily briefing report. The report should contain the following:

- (a) Date and shift (1 or 2)
- (b) Incident report information (Type Incident, case number, location, time occurred, deputy involved and a brief synopsis)
- (c) Housing unit issues, intake issues, other facility issues
- (d) Any special details or projects
- (e) Any staff who called in sick, on vacation, or working overtime
- (f) Any reports to follow

### 212.6 SUPERVISOR RESPONSIBILITIES

Supervisors shall review the daily activity logs and shift reports during the course of each shift. Supervisors shall sign and include the date and time of review on each log or report. When appropriate, supervisors should include comments in the logbook with regard to an incident or unusual occurrence in the facility.

Whenever a major event in the facility requires a coordinated command response, the Incident Commander (IC) should designate someone to keep a running log that identifies, at a minimum, the following:

- Date and time the incident began
- Specific location of the incident
- Times of significant response measures taken during the incident
- Name, identification number and time of arrival of personnel on-scene
- Orders issued by the IC
- Significant events that occurred as a result of the incident

The above information should remain available to the IC throughout the event to assist with ongoing response planning.

## **Perimeter Security**

### 213.1 PURPOSE AND SCOPE

The purpose of this policy is to establish this facility's perimeters, to ensure that incarcerated inmates remain inside the perimeters, and that visitors, vendors, volunteers and employee access is granted only with proper authorization and through designated safety vestibules and sallyports. The secure perimeter of this facility will provide protection from the escape of persons being processed, held or housed, and will act as a defense against the entry of unauthorized persons. It shall be maintained to prevent contraband from entering the secure areas of the facility (Title 15 CCR § 1029(a)(6)).

### **213.2 POLICY**

All entry points to the secure perimeter of the facility shall be monitored and controlled continuously. The entire perimeter shall be inspected, maintained, monitored and continuously assessed to ensure its physical integrity and prevent unauthorized entry, inmate escape and contraband from entering the facility.

#### 213.2.1 **VISITORS**

This facility shall be maintained as a secure area and no person shall enter any portion of the inner perimeter without specific authorization from the Facility Commander or the authorized designee. All visitors shall be required to provide satisfactory identification, such as a valid driver's license, valid passport or military identification. Visitors shall be required to sign in on the visitor log and state the reason for the visit. Visitors must wear a visitor's badge at all times and shall be escorted by one or more staff members at all times while they are in the secure areas of the facility. Visitors will be required to comply with all state and local health orders.

### 213.3 PROCEDURE

The secure perimeter shall be maintained by assigned staff. The Facility Commander or the authorized designee shall ensure that a staffing plan is in place to monitor the secure perimeter of this facility. Suspicious activity at or near the perimeter shall immediately be reported to the Shift Supervisor and the Central Control. The Central Control staff shall initiate an appropriate law enforcement response at the direction of the shift supervisor.

Individuals suspected to be in violation of any law may be subject to detention or arrest. Warrant checks should be conducted on all individuals who are on the property without proper authorization. Individuals found to be loitering on or around the perimeter of the facility will be stopped and questioned to determine the circumstances of their presence. They may be denied entrance into the facility.

The Central Control staff shall identify all persons seeking to gain access to the secure perimeter of the facility. Persons delivering goods or services shall identify themselves to the Central Control staff prior to being allowed access to the delivery area.

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### Perimeter Security

Materials delivered to or transported from the facility's secure perimeter shall be inspected for contraband. Vendors making deliveries into the secure area of the facility will do so under the supervision of custody staff.

Keys to the secure perimeter shall be easily identifiable and issued only in emergency situations or with the authorization of the Facility Commander.

Weapons lockers are provided outside all secure perimeter entrances. All weapons must be secured prior to an individual being allowed to enter the facility.

The sallyport and the secure garage are to be used for the transfer of inmates.

Operation of the sallyport doors will be done in such a manner as to effectively control movement into and out of the secure inner perimeter of this facility. Central Control staff are responsible for ensuring all perimeter surveillance equipment is in good working order and shall immediately report malfunctions or failures to the on-duty supervisor.

Outer perimeter security may be accomplished by using fencing or another type of barrier. These barriers should be designed to route vehicular and pedestrian traffic away from non-public areas. Outer perimeter lighting should be designed to illuminate all areas of the exterior to allow visual inspection by video monitor or perimeter patrols.

## **Media Relations Refer to Operational Policy 329**

### 214.1 PURPOSE AND SCOPE

This policy provides guidelines for media releases, media accessand general public information.

Refer to Operational Policy 329 - Media Relations

## **Community Relations and Public Information**

### 215.1 PURPOSE AND SCOPE

This policy provides guidelines to custody personnel when dealing with the general public or interested groups when requests are received to share information regarding the operations and policies of the facility (see the News Media Relations Policy for guidance on media releases) (15 CCR 1045).

### **215.2 POLICY**

It is the policy of the Tulare County Sheriff's Office to protect the privacy rights of individuals while releasing non-confidential information to interested groups when requests are received. Information that has the potential to affect the safety and security of the Detention Facility or an investigation will not be released.

#### 215.3 RESPONSIBILITIES

The Facility Commander is responsible for ensuring that the following information is public and available to all who inquire about it.

- (a) The Board of State and Community Corrections Minimum Standards for Local Detention Facilities as found in Title 15 of the California Code of Regulations.
- (b) Facility rules and procedures affecting incarcerated persons as specified in 15 CCR sections:
  - 1. 1045, Public Information Plan
  - 2. 1061, Incarcerated Persons Education Plan
  - 3. 1062, Visiting
  - 4. 1063, Correspondence
  - 5. 1064, Library Service
  - 6. 1065, Exercise and Out of Cell Time
  - 7. 1066, Books, Newspapers, Periodicals, and Writings
  - 8. 1067, Access to Telephone
  - 9. 1068, Access to Courts and Counsel
  - 10. 1069. Incarcerated Persons Orientation
  - 11. 1070, Individual/Family Service Programs
  - 12. 1071, Voting
  - 13. 1072, Religious Observance
  - 14. 1073, Incarcerated Persons Grievance Procedure
  - 15. 1080, Rules and Disciplinary Action Penalties
  - 16. 1081, Plan for Discipline of Incarcerated Persons

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### Community Relations and Public Information

- 17. 1082, Forms of Discipline
- 18. 1083, Limitations on Discipline
- 19. 1200, Responsibility for Health Care Services

This information is to be made available at the facility's front desk and assembled into a binder or clearly posted for public viewing. Additionally, a copy should be made available in this facility's library or provided by other means for use by incarcerated persons. At the discretion of the Sheriff, the information may also be made available electronically. No information will be released on persons whose booking process is not completed.

### 215.4 PROHIBITED MATERIALS

Policies, procedures, and other information and materials related to the safety and security of incarcerated persons, custody personnel, the facility, or the maintenance of order should not be provided as a part of the public information material unless directed by the Sheriff.

### **Victim Notification of Inmate Release**

### 216.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure victims of crimes receive notice when an inmate held for those crimes is released, and that victims receive any other notification required by California law.

### **216.2 POLICY**

It is the policy of this office to act in accordance with all laws regarding victim notification.

### 216.3 PROCEDURE

The Facility Commander shall ensure that a system is in place for individuals to request release notification on any inmate housed in this facility.

Notification requests or requirements that are known during the booking process should be documented in the appropriate designated section of the inmate's booking file.

In the event that an individual contacts this facility and requests notification on any inmate housed in this facility, staff should notify a supervisor, who will determine whether notifications are required or appropriate, and ensure the notification request and determination is documented in the inmate's file.

### 216.4 NOTIFICATION

Members tasked with the release of an inmate or investigating an escape shall verify whether there is a required release notification in the inmate's file.

Members shall document notification efforts in the inmate's file.

Unless ordered by the court or a supervisor, no victim information shall be provided to any inmate by any employee or volunteer of this facility. Any unauthorized access or release of victim information is a direct violation of victim confidentiality and applicable policies, and may subject the person releasing the information to disciplinary action, up to and including termination from employment and/or criminal prosecution.

### 216.4.1 REQUIRED NOTIFICATIONS

The Shift Supervisor or the authorized designee shall make a reasonable and good faith effort to make all notifications required by law including:

- (a) Notice to any person a court identifies as a victim of the offense, a family member of the victim, or a witness to the offense not less than 15 days prior to the release of any person convicted of stalking under Penal Code § 646.9 or convicted of a felony involving domestic violence (Penal Code § 646.92(a)).
- (b) Notice to any person a court identifies as a victim of the offense, a family member of the victim, or a witness upon escape and capture of any person convicted of violating Penal Code § 646.9 or convicted of a felony offense involving domestic violence (Penal Code § 646.92(d)).

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### Victim Notification of Inmate Release

- (c) Notice to any victim or other affected person who has requested notification that an inmate convicted of the offenses listed in Penal Code § 679.02(a)(13) has been ordered placed on probation and the proposed date of release (Penal Code § 679.02(a)(14)).
- (d) If the crime was a homicide, notice to any victim or the next of kin of the victim within 60 days of an inmate's placement in a reentry or work furlough program, or of the inmate's escape (Penal Code § 679.02(a)(6)).
- (e) Notice of the release of any inmate to victims of crime who have requested to be notified
- (f) Notice to law enforcement agencies known to be involved with the case upon any escape and capture of an inmate.

Notification should be made by telephone, certified mail, or electronic mail, using the method of communication selected by the person to be notified, if that method is reasonably available. In the event the person's contact information provided to the Office is no longer current, the Office shall make a diligent, good faith effort to learn the whereabouts of the victim in order to comply with these notification requirements. Notification shall only be left on a messaging system if the person has indicated in the notification request that such notification is acceptable or if staff has attempted and cannot make other contact with the person.

If contact cannot be made and no means exist to leave a message with the person, the Shift Supervisor or the authorized designee should request the law enforcement agency having jurisdiction where the person resides perform a welfare check. Subsequent and continuing attempts shall be made to contact the person using the numbers listed in the notification request. All attempts to contact shall be documented on the victim notification request form.

### **Accessibility - Facility and Equipment**

### 217.1 PURPOSE AND SCOPE

This policy is intended to ensure that staff and the general public have access to the facility, in compliance with the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act (29 USC § 794).

### 217.1.1 DISABILITY DEFINED

A disability is any physical or mental impairment that substantially limits one or more major life activities. These include, but are not limited to, any disability that would substantially limit the mobility of an individual or an impairment of vision and/or hearing, speaking or performing manual tasks that require some level of dexterity. Additionally, disability includes a physical or mental impairment that would inhibit a person's ability to meet the requirements established by the Office for conducting visitation or other business in the facility.

### **217.2 POLICY**

The Tulare County Sheriff's Office prohibits discrimination of persons with disabilities. The Tulare County Sheriff's Office adheres to the ADA and all other applicable federal and state laws, regulations and guidelines in providing reasonable accommodations to ensure that the facility is reasonably accessible to and usable by individuals.

### 217.3 ACCOMMODATIONS

As part of the compliance with the ADA and the commitment to provide access to persons with disabilities, the Office will provide reasonable accommodations that include, but are not limited to:

- Vehicle parking areas that accommodate cars and vans or other vehicles with wheelchair lifts.
- Public areas that are wheelchair accessible.
- Drinking fountains that can accommodate wheelchairs or other mobility devices.
- ADA-compliant elevators.
- Restroom areas that are wheelchair compliant and meet ADA standards for accessibility.
- Search areas and metal detection devices, including private areas where alternative search methods may be performed.
- Services and equipment for the deaf and hard of hearing.
- Visitor check-in areas.
- Visitation areas, including attorney interview rooms that can accommodate wheelchairs and other mobility devices.

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### Accessibility - Facility and Equipment

#### 217.3.1 MEMBER RESPONSIBILITIES

Members receiving a request for accommodation should make reasonable attempts to do so. If a request cannot be reasonably accommodated, a supervisor should be notified.

Members becoming aware of any potential ADA violation should document the issue in a memorandum and forward the memorrandum to the Facility Commander and Compliance Unit via chain of command.

Members receiving a complaint of disability discrimination or inability to reasonably access the facility, or any other complaint to the ADA, should document the complaint and refer the matter to the Compliance Unit.

### 217.4 ADA COORDINATOR

The Compliance Unit will serve the ADA coordinator, whose primary responsibilities include, but are not limited to, coordinating compliance with ADA requirements. The ADA coordinator should be knowledgeable and experienced in a variety of areas, including:

- (a) The office's structure, activities and employees, including special issues relating to the requirements of the detention facility.
- (b) The ADA and other laws that address the rights of people with disabilities, such as Section 504 of the Rehabilitation Act (29 USC § 794).
- (c) The accommodation needs of people with a broad range of disabilities.
- (d) Alternative formats and technologies that enable staff, inmates and the public with disabilities to communicate, participate and perform tasks related to detention facility activities.
- (e) Construction and remodeling requirements with respect to ADA design standards.
- (f) Working cooperatively with staff, inmates and the public with disabilities, as well as with local disability advocacy groups or other disability groups.
- (g) Negotiation and mediation.

### 217.4.1 DISSEMINATION OF INFORMATION

The ADA coordinator will be responsible for the dissemination of information to staff and visitors on issues specifically related, but not limited to:

- Services available to members of the public who are disabled.
- Accessing services to accommodate disabilities.
- Registering complaints or grievances relating to issues involving the ADA.

#### 217.5 TRAINING

The ADA coordinator should work with the Training Lieutenant as appropriate, developing training regarding issues specifically related, but not limited to:

- (a) The requirements of Section 504 of the Rehabilitation Act (29 USC § 794).
- (b) Office policies and procedures relating to ADA requirements.

### **Fitness for Duty**

### 218.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure that all deputies of this office are fit for duty and able to perform their job functions upon hire, and remain fit for duty throughout their employment.

### **218.2 POLICY**

This policy requires all deputies to be free from any physical, emotional or mental condition that might adversely affect their ability to effectively perform their duties throughout their employment.

- (a) It shall be the responsibility of each employee of this office to maintain physical, emotional and mental conditions sufficient to safely and properly perform the essential duties of his/her job classification.
- (b) Each employee of this office shall perform his/her respective duties without physical, emotional and/or mental constraints.
- (c) During working hours, all employees are required to be alert, attentive and capable of performing the assigned responsibilities.
- (d) Any employee who feels unable to perform his/her duties shall promptly notify a supervisor. In the event that an employee believes another employee is unable to perform his/her duties, such observations and/or belief shall be promptly reported to a supervisor.

#### 218.3 SUPERVISOR RESPONSIBILITIES

- (a) A supervisor observing an employee or receiving a report of a employee who is perceived as being unable to safely perform his/her duties due to a physical, emotional or mental condition, shall take prompt and appropriate action to resolve the situation.
- (b) Whenever reasonably feasible, the supervisor shall attempt to ascertain the reason or source of the problem. In all cases a preliminary evaluation should be made to determine the employee's level of inability to perform his/her duties.
- (c) In the event the employee appears to be in need of immediate medical or mental health treatment, all reasonable efforts should be made to provide such care.
- (d) The employee's Shift Supervisor or the Facility Commander should determine whether the employee should be temporarily relieved of duty.
- (e) The Facility Commander shall be promptly notified in the event that any employee is relieved of duty.

### 218.4 NON-WORK RELATED CONDITIONS

Any employee suffering from a non-work related condition that warrants a temporary relief from duty may be required to use sick leave or other paid time off in order to obtain medical treatment or other reasonable relief from symptoms. If the condition is a serious health condition of the

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### Fitness for Duty

employee or a qualified family member, the employee's supervisor should facilitate the employee's contact with the appropriate person to initiate the leave process under the Family and Medical Leave Act.

### 218.5 WORK-RELATED CONDITIONS

Any employee suffering from a work-related condition that warrants temporary relief from duty shall comply with personnel rules and guidelines for processing such claims.

Upon the recommendation of the Shift Supervisor or supervisor, and with the concurrence of the Facility Commander, any employee whose actions or force option application result in death or serious injury to another may be temporarily removed from regularly assigned duties and/or placed on paid administrative leave for the well-being of the employee, and until such time as the following may be completed:

- (a) A preliminary determination indicates that the employee's conduct appears to be in compliance with policy and appropriate for the circumstances.
- (b) The employee has had the opportunity to receive necessary counseling and any necessary or required psychological or medical clearance to return to full duty.

### 218.6 PHYSICAL AND PSYCHOLOGICAL EXAMINATIONS

- (a) Whenever circumstances reasonably indicate that the employee may be unfit for duty, the Facility Commander or the authorized designee may serve that employee with a written order to undergo a physical and/or psychological examination in cooperation with office personnel to determine the level of the employee's fitness for duty. The order shall indicate the date, time and place for the examination.
- (b) The examining physician or therapist will provide the Office with a report indicating whether the employee is fit for duty. If the employee is not fit for duty, the report should list any functional limitations that restrict his/her ability to perform the job duties. If the employee places his/her condition at issue in any subsequent or related administrative action/grievance, the examining physician or therapist may be required to disclose any information that is relevant to such proceedings.
- (c) In order to facilitate the examination of any employee, the Office will provide all appropriate documents and available information to assist in the evaluation and/or treatment.
- (d) All reports and evaluations submitted by the treating physician or therapist shall be part of the employee's confidential personnel file.
- (e) Any employee ordered to receive a fitness-for-duty examination shall comply with the terms of the order and cooperate fully with the examining physician or therapist regarding any clinical interview, tests administered or other procedures. Any failure to comply with such an order and any failure to cooperate with the examining physician

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- or therapist, including signing of releases, may be deemed insubordination and shall be subject to discipline, up to and including termination.
- (f) Once an employee has been deemed fit for duty by the examining physician or therapist, the employee will be notified to resume his/her duties.

### **218.7 APPEALS**

An employee whose salary is reduced or withheld due to a fitness-for-duty exam shall be entitled to an administrative appeal.

### 218.8 MEDICAL RECORDS

All employee medical information and records shall be treated as confidential and stored in the employee's separate medical file.

### **Staffing Plan**

### 219.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a comprehensive staffing plan and analysis to identify staffing needs sufficient to maintain the safety and security of the facility, staff, visitors, inmates and the public.

### **219.2 POLICY**

It is the policy of the Tulare County Sheriff's Office to ensure the safety, security and efficient operation of this facility by assigning custody personnel according to a detailed staffing plan that is developed and maintained in accordance with law.

### 219.3 STAFFING PLAN REQUIREMENTS

The Facility Commander shall ensure that a staffing plan conforming to the class type and size of this facility is prepared and maintained as described in the following section. The plan should detail all custody personnel assignments, including work hours and weekly schedules, and should account for holidays, vacations, training schedules and other atypical situations (15 CCR 1027).

At minimum, the staffing plan will include the following:

- Facility administration and supervision
- Facility programs, including exercise and recreation
- Inmate supervision and custody
- Support services including medical, food services, maintenance and clerical
- Other jail-related functions such as escort and transportation of inmates

# **Employee Speech, Expression and Social Networking**

### 220.1 PURPOSE AND SCOPE

This policy is intended to address issues associated with employee use of social networking sites and to provide guidelines for the regulation and balancing of employee speech and expression with the legitimate needs of the Office.

Nothing in this policy is intended to prohibit or infringe upon any communication, speech or expression that is protected or privileged under law. This includes speech and expression protected under state or federal constitutions as well as labor or other applicable laws. For example, this policy does not limit an employee from speaking as a private citizen, including acting as an authorized member of a recognized bargaining unit, about matters of public concern, such as misconduct or corruption.

Employees are encouraged to consult with their supervisor regarding any questions arising from the application or potential application of this policy.

### 220.1.1 APPLICABILITY

This policy applies to all forms of communication including, but not limited to, film, video, print media, public or private speech, use of all Internet services, including the World Wide Web, email, file transfer, remote computer access, news services, social networking, social media, instant messaging, blogs, forums, video and other file-sharing sites.

### **220.2 POLICY**

Public employees occupy a trusted position in the community, and thus, their statements have the potential to contravene the policies and performance of this office. Due to the nature of the work and influence associated with the law enforcement profession, it is necessary that employees of this office be subject to certain reasonable limitations on their speech and expression. To achieve its mission and efficiently provide service to the public, the Tulare County Sheriff's Office will carefully balance the individual employee's rights against the Office's needs and interests when exercising a reasonable degree of control over its employees' speech and expression.

### **220.3 SAFETY**

Employees should consider carefully the implications of their speech or any other form of expression when using the Internet. Speech and expression that may negatively affect the safety of the Tulare County Sheriff's Office employees, such as posting personal information in a public forum, can result in compromising an employee's home address or family ties. Employees should therefore not disseminate or post any information on any forum or medium that could reasonably be anticipated to compromise the safety of any employee, an employee's family or associates. Examples of the type of information that could reasonably be expected to compromise safety include:

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### Employee Speech, Expression and Social Networking

- Disclosing a photograph and name or address of a deputy who is working undercover.
- Disclosing the address of a fellow deputy.
- Otherwise disclosing where another deputy can be located off-duty.

### 220.4 PROHIBITED SPEECH, EXPRESSION AND CONDUCT

To meet the office's safety, performance and public-trust needs, the following are prohibited unless the speech is otherwise protected (for example, an employee speaking as a private citizen, including acting as an authorized member of a recognized bargaining unit, on a matter of public concern):

- (a) Speech or expression made pursuant to an official duty that tends to compromise or damage the mission, function, reputation or professionalism of the Office or its employees.
- (b) Speech or expression that, while not made pursuant to an official duty, is significantly linked to, or related to, the Office and tends to compromise or damage the mission, function, reputation or professionalism of the Office or its employees. Examples may include:
  - 1. Statements that indicate disregard for the law or the state or U.S. Constitution.
  - 2. Expression that demonstrates support for criminal activity.
  - 3. Participating in sexually explicit photographs or videos for compensation or distribution.
- (c) Speech or expression that could reasonably be foreseen as having a negative impact on the credibility of the employee as a witness. For example, posting statements or expressions to a website that glorify or endorse dishonesty, unlawful discrimination or illegal behavior.
- (d) Speech or expression of any form that could reasonably be foreseen as having a negative impact on the safety of the employees of the detention facility. For example, a statement on a blog that provides specific details as to how and when prisoner transportations are made could reasonably be foreseen as potentially jeopardizing employees by informing criminals of details that could facilitate an escape or attempted escape.
- (e) Speech or expression that is contrary to this office's Code of Ethics.
- (f) Use or disclosure, through whatever means, of any information, photograph, video or other recording obtained or accessible as a result of employment with the detention facility for financial or personal gain, or any disclosure of such materials without the express authorization of the Sheriff or the authorized designee.
- (g) Posting, transmitting or disseminating any photographs, video or audio recordings, likenesses or images of office logos, emblems, uniforms, badges, patches, marked

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### Employee Speech, Expression and Social Networking

vehicles, equipment or other material that specifically identifies the Office on any personal or social networking or other website or web page, without the express authorization of the Sheriff.

- (h) Accessing websites for non-authorized purposes, or use of any personal communication device, game device or media device, whether personally or officeowned, for personal purposes while on-duty, except in the following circumstances:
  - 1. When brief personal communication may be warranted by the circumstances (e.g., inform family of extended hours).
  - During authorized breaks such usage should be limited as much as practicable to areas out of sight and sound of the public and shall not be disruptive to the work environment.

Employees must take reasonable and prompt action to remove any content, including content posted by others, that is in violation of this policy from any web page or website maintained by the employee (e.g., social or personal website).

#### 220.4.1 UNAUTHORIZED ENDORSEMENTS AND ADVERTISEMENTS

While employees are not restricted from engaging in the following activities as private citizens or as authorized members of a recognized bargaining unit, employees may not represent the Office or identify themselves in any way that could be reasonably perceived as representing the Office in order to do any of the following, unless specifically authorized by the Sheriff (Government Code § 3206; Government Code § 3302):

- (a) Endorse, support, oppose or contradict any political campaign or initiative.
- (b) Endorse, support, oppose or contradict any social issue, cause or religion.
- (c) Endorse, support or oppose any product, service, company or other commercial entity.
- (d) Appear in any commercial, social or nonprofit publication or any motion picture, film, video, public broadcast or on any website.

Additionally, when it can reasonably be construed that an employee, acting in his/her individual capacity or through an outside group or organization (e.g., bargaining group), is affiliated with this office, the employee shall give a specific disclaiming statement that any such speech or expression is not representative of the Office.

Employees retain their right to vote as they choose, to support candidates of their choice and to express their opinions as private citizens, including as authorized members of a recognized bargaining unit, on political subjects and candidates at all times while off-duty. However, employees may not use their official authority or influence to interfere with or affect the result of an election or a nomination for office. Employees are also prohibited from directly or indirectly using their official authority to coerce, command or advise another employee to pay, lend or contribute anything of value to a party, committee, organization, agency or person for political purposes (5 USC § 1502).

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Employee Speech, Expression and Social Networking

#### 220.5 PRIVACY EXPECTATION

Employees forfeit any expectation of privacy with regard to anything published or maintained through file-sharing software or any Internet site open to public view (e.g., Facebook, MySpace).

The Office also reserves the right to access, audit and disclose for whatever reason all messages, including attachments, and any information transmitted over any technology that is issued or maintained by the Office, including the office e-mail system, computer network or any information placed into storage on any office system or device.

All messages, pictures and attachments transmitted, accessed or received over office networks are considered office records and, therefore, are the property of the Office. The Office reserves the right to access, audit and disclose for whatever reason all messages, including attachments, that have been transmitted, accessed or received through any office system or device, or any such information placed into any office storage area or device. This includes records of all key strokes or web-browsing history made at any office computer or over any office network. The fact that access to a database, service or website requires a user name or password will not create an expectation of privacy if it is accessed through office computers or networks.

### 220.6 CONSIDERATIONS

In determining whether to grant authorization of any speech or conduct that is prohibited under this policy, the factors that the Sheriff or authorized designee should consider include:

- (a) Whether the speech or conduct would negatively affect the efficiency of delivering public services.
- (b) Whether the speech or conduct would be contrary to the good order of the Office or the efficiency or morale of its members.
- (c) Whether the speech or conduct would reflect unfavorably upon the Office.
- (d) Whether the speech or conduct would negatively affect the member's appearance of impartiality in the performance of his/her duties.
- (e) Whether similar speech or conduct has been previously authorized.
- (f) Whether the speech or conduct may be protected and outweighs any interest of the Office.

### 220.7 TRAINING

Subject to available resources, the Office should provide training regarding employee speech and the use of social networking to all members of the office.

### **Information Technology Use**

### 221.1 PURPOSE AND SCOPE

This purpose of this policy is to provide guidelines for the proper use of office information technology resources, including computers, electronic devices, hardware, software and systems.

### 221.1.1 DEFINITIONS

Definitions related to this policy include:

**Computer system** - All computers (on-site and portable), electronic devices, hardware, software, and resources owned, leased, rented or licensed by the Tulare County Sheriff's Office that are provided for official use by its members. This includes all access to, and use of, Internet Service Providers (ISP) or other service providers provided by or through the Office or office funding.

**Hardware** - Includes, but is not limited to, computers, computer terminals, network equipment, electronic devices, telephones including cellular and satellite, pagers, modems or any other tangible computer device generally understood to comprise hardware.

**Software** - Includes, but is not limited to, all computer programs, systems and applications including "shareware." This does not include files created by the individual user.

**Temporary file, permanent file or file** - Any electronic document, information or data residing or located, in whole or in part, on the system including, but not limited to, spreadsheets, calendar entries, appointments, tasks, notes, letters, reports, messages, photographs or videos.

#### **221.2 POLICY**

Tulare County Sheriff's Office members shall use information technology resources, including computers, software and systems, that are issued or maintained by the Office in a professional manner and in accordance with this policy.

### 221.3 PRIVACY EXPECTATION

Members forfeit any expectation of privacy with regard to emails, texts or anything published, shared, transmitted or maintained through file-sharing software or any Internet site that is accessed, transmitted, received or reviewed on any office technology system.

The Office reserves the right to access, audit and disclose, for whatever reason, any message, including attachments, and any information accessed, transmitted, received or reviewed over any technology that is issued or maintained by the Office, including the office e-mail system, computer network or any information placed into storage on any office system or device. This includes records of all key strokes or web-browsing history made at any office computer or over any office network. The fact that access to a database, service or website requires a user name or password will not create an expectation of privacy if it is accessed through office computers, electronic devices or networks.

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### Information Technology Use

#### 221.4 RESTRICTED USE

Members shall not access computers, devices, software or systems for which they have not received prior authorization or the required training. Members shall immediately report unauthorized access or use of computers, devices, software or systems by another member to the Shift Supervisor.

Members shall not use another person's access passwords, logon information and other individual security data, protocols and procedures unless directed to do so by the Shift Supervisor.

#### 221.4.1 SOFTWARE

Members shall not copy or duplicate any copyrighted or licensed software except for a single copy for backup purposes, in accordance with the software company's copyright and license agreement.

To reduce the risk of a computer virus or malicious software infection, members shall not install any unlicensed or unauthorized software on any office computer. Members shall not install personal copies of any software on any office computer. Any files or software that a member finds necessary to install on office computers or networks shall be installed only with the approval of office information systems technology (IT) staff and only after being properly scanned for malicious attachments.

When related to criminal investigations, software program files may be downloaded only with the approval of IT staff and with the authorization of the Sheriff or the authorized designee.

No member shall knowingly make, acquire or use unauthorized copies of computer software that is not licensed to the Office while on office premises, computer system or electronic device. Such unauthorized use of software exposes the Office and involved members to severe civil and criminal penalties.

Introduction of software by members should only occur as a part of the automated maintenance or update process of office- or county-approved or installed programs by the original manufacturer, producer or developer of the software. Any other introduction of software requires prior authorization from IT staff.

### **221.4.2 HARDWARE**

Access to technology resources provided by or through the Office shall be strictly limited to office-related activities. Data stored on or available through office computer systems shall only be accessed by authorized members who are engaged in an active investigation, assisting in an active investigation, or who otherwise have a legitimate law enforcement or office-related purpose to access such data. Any exceptions to this policy must be approved by the Shift Supervisor.

### 221.4.3 INTERNET USE

Internet access provided by or through the Office shall be strictly limited to office-related activities. Internet sites containing information that is not appropriate or applicable to office use and which shall not be intentionally accessed include, but are not limited to, adult forums, pornography, gambling, chat rooms, and similar or related Internet sites. Certain exceptions may be permitted with the express approval of the Shift Supervisor as a function of a member's assignment.

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### Information Technology Use

Downloaded information from the Internet shall be limited to messages, mail and data files.

#### 221.4.4 OFF-DUTY USE

Members shall only use technological resources related to their job while on-duty or in conjunction with specific on-call assignments unless specifically authorized by the Shift Supervisor. This includes the use of telephones, cell phones, texting, e-mail or any other "off-the-clock" work-related activities.

### 221.5 PROTECTIONS OF SYSTEMS AND FILES

All members have a duty to protect the computer system and related systems and devices from physical and environmental damage and are responsible for the correct use, operation, care and maintenance of the computer system.

Members shall ensure office computers and access terminals are not viewable by persons who are not authorized users. Computers and terminals should be secured, users logged off and password protections enabled whenever the user is not present. Access passwords, logon information and other individual security data, protocols and procedures are confidential information and are not to be shared. Password length, format, structure and content shall meet the prescribed standards required by the computer system or as directed by the Shift Supervisor and shall be changed at intervals as directed by IT staff or the Shift Supervisor.

It is prohibited for a member to allow an unauthorized user to access the computer system at any time or for any reason. Members shall promptly report any unauthorized access to the computer system or suspected intrusion from outside sources (including the Internet) to the Shift Supervisor.

### 221.6 INSPECTION OR REVIEW

The Shift Supervisor or the authorized designee has the express authority to inspect or review the computer system, all temporary or permanent files, related electronic systems or devices, and any contents thereof, whether such inspection or review is in the ordinary course of his/her duties or based on cause.

Reasons for inspection or review may include, but are not limited to, computer system malfunctions, problems or general computer system failure, a lawsuit against the Office involving one of its members or a member's duties, an alleged or suspected violation of any office policy, request for disclosure of data, or a need to perform or provide a service.

The IT staff may extract, download, or otherwise obtain any and all temporary or permanent files residing or located in or on the office computer system when requested by the Shift Supervisor or during the course of regular duties that require such information.

### 221.7 LAW ENFORCEMENT, DISTRICT ATTORNEY, PUBLIC DEFENDER, PROBATION

Electronic devices such as laptop computers, iPads, PCD (personal communication device) and electronic storage devices are being utilized by other law enforcement agencies, as well as, public and private attorneys and their agents during the scop of their employment. The Tulare County

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### Information Technology Use

Sheriff's Office will try and accommodate individuals entering our detention facilities but at no time will this policy interfere with the safety and security of any detention facility.

### **Laptop Computer or iPad:**

- A. The Public Defender's Office, District Attorney's Office, and Tulare County Probation are allowed to bring a laptop computer or iPad into any detention facility while on duty and related to their employment.
- B. Private attorneys, their agents or individuals requesting to use a laptop computer or iPad in any detention facility will need the facility commander's approval before the device will be allowed.

### **Personal Communication Devices:**

- A. The Public Defender's Office, District Attorney's Office, and Tulare County Probation are allowed to have their personal communication device while cuducting business within any county detention facility.
- B. Private attorneys, their agents, or individuals entering any detention facility will not be allowed to have a personnal communication device in their possession unless approved by the facility commander.

Chapter 3 -	Recruitment	<b>Selection</b>	and	<b>Plann</b>	ing
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### **Employee Orientation**

### 300.1 PURPOSE AND SCOPE

The purpose of this policy is to define the parameters for new employee orientation. The purpose of the orientation is to provide new employees with basic information about the facility and the environment in which they will be working. Orientation is not meant to supplant other basic training required by law, ordinance or regulations.

### 300.2 NEW EMPLOYEE ORIENTATION

Each new facility employee shall receive an orientation prior to assuming his/her duties. At a minimum, the orientation shall include:

- Working conditions
- Code of ethics
- Personnel policy manual
- Employee rights and responsibilities
- Tour of the facility
- Facility goals and objectives
- Facility organization
- Staff rules and regulations
- Program overview

### 300.3 EMPLOYEE ACKNOWLEDGEMENTS

Office personnel assigned to provide the new employee orientation will ensure that each new employee is given copies of work rules and regulations, office ethics, and any other office documents, for which the employee will be held accountable.

A staff member will collect a signature page from the employee, acknowledging receipt, review and understanding of the documents. A copy of the signature page shall be retained in the employee's personnel file in accordance with established records retention schedules.

### **Continuing Professional Education**

### 301.1 PURPOSE AND SCOPE

This policy is designed to support the ongoing professional education of office personnel at all levels. Continuing professional education provides a broad view of the world and by extension enhances the understanding of the correctional mission as it applies to the Office and the community.

#### 301.1.1 PHILOSOPHY

The Office seeks to encourage continuing education whenever practical. All continuing education programs will be within the framework of negotiated employee agreements and the availability of funds to provide ongoing efforts for self improvement. The Office encourages all personnel to participate in formal education on a continuing basis.

#### 301.2 REQUIRED TRAINING

With the exception of the year that the staff member is enrolled in a core training module, all staff members shall complete the annual required training specified in Section 184 of Title 15 CCR (15 CCR 1025).

### **Training for Managers and Supervisors**

### 302.1 PURPOSE AND SCOPE

This policy establishes training requirements and guidelines for supervisory and management staff, and encourages all personnel to participate in basic and continuing professional training.

### **302.2 POLICY**

It is the policy of this office to administer a training program that provides for the professional growth and continued development of its personnel in accordance with all laws, ordinances and regulations. All training is provided with the intent to improve the competency of staff within the confines of funding, the requirements of a given assignment, staffing levels and legal mandates (15 CCR 1021; 15 CCR 1023).

### 302.3 TRAINING OBJECTIVES

The objectives of the training program are to accomplish the following:

- (a) Improve the competency of staff at all levels.
- (b) Ensure that staff can carry out the mission of the Office through a thoroughly demonstrated knowledge of office policies and procedures.
- (c) Increase the technical expertise and overall effectiveness of personnel.
- (d) Provide for continued professional development of office personnel.

### 302.4 TRAINING FOR NEW MANAGERS AND SUPERVISORS

All Facility Commanders and supervisors (full- or part-time) are required to have 80 hours of management and supervision training as specified by the Commission on Peace Officer Standards and Training (POST) or the Standards and Training for Corrections Program (STC) within the first year of their appointment. Supervisors and managers shall thereafter receive a minimum of 24 hours of refresher training annually related to facility management and supervision (15 CCR 1021; 15 CCR 1023; 15 CCR 1025).

### 302.4.1 SUPERVISORY TRAINING

All supervisory personnel shall have completed core training as specified in the Training Policy, prior to assuming supervisory responsibilities (15 CCR 1021).

### 302.5 TRAINING RECORDS

The Office shall use training courses certified by a competent government or standards-setting organization whenever practicable. All training should include testing to identify and document the employee's knowledge of the subject matter.

It shall be the responsibility of the Training Lieutenant to ensure that the following is maintained on file for all training provided by the Office:

- The course outline or lesson plan
- A roster signed and dated by those in attendance

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### Training for Managers and Supervisors

The name of the person coordinating the training

It shall be the responsibility of the involved employee to provide his/her immediate supervisor or the Training Lieutenant with evidence of completed training or education in a timely manner. The Training Lieutenant shall ensure that copies of such training records are placed in the employee's training file and retained in accordance with established records retention schedules.

### **Detention Division Jail Training Officer Program**

### 303.1 PURPOSE AND SCOPE

The Detention Division Jail Training Officer Program is intended to provide a standardized program to facilitate the deputy's transition from the academic setting to the actual performance of general corrections duties.

It is the policy of this office to assign all new deputies to a structured Detention Division Jail Training Officer Program that is designed to prepare the new deputy to perform in a custody assignment, and to provide training on all skills needed to operate in a safe, productive and professional manner.

### 303.2 TRAINING OFFICER

The Jail Training Officer (JTO) is an experienced deputy trained in the art and science of supervising, training and evaluating entry-level deputies in the application of their previously acquired knowledge and skills.

### 303.2.1 SELECTION PROCESS

Training officers will be selected based on certain requirements, including:

- (a) A desire to perform the training mission.
- (b) A minimum of three years as a deputy.
- (c) A demonstrated ability to be a positive role model.
- (d) Successfully passed an internal oral interview selection process.
- (e) Evaluation by supervisors and current JTOs.
- (f) A certificate from the state's law enforcement certifying agency, where applicable.

### **303.2.2 TRAINING**

All JTOs shall successfully complete a 40-hour course of instruction prior to being assigned a trainee.

All JTOs must complete a 24-hour update course every three years while assigned to the position of JTO.

### 303.3 TRAINING OFFICER RESPONSIBILITIES

- (a) JTOs shall complete and submit a written evaluation on the performance of their assigned trainee to the JTO's immediate supervisor on a daily basis.
- (b) JTOs shall review the performance evaluations with the trainee each day.
- (c) A detailed end-of-phase performance evaluation on the assigned trainee shall be completed by the JTO at the end of each phase of training.

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### Detention Division Jail Training Officer Program

(d) JTOs shall be responsible for signing off all completed topics contained in the Training Manual, noting the methods of learning and evaluating the performance of the assigned trainee.

### 303.4 TRAINING OFFICER PROGRAM SUPERVISOR

The supervisor will be selected from the rank of sergeant or above by the Facility Commander or the authorized designee and shall possess supervisory credentials from the state's law enforcement certifying agency, where applicable. The supervisor's responsibilities include the following:

- (a) Assignment of trainees to JTOs.
- (b) Conduct JTO meetings.
- (c) Maintain and ensure JTO/trainee performance evaluations are completed in a timely manner.
- (d) Maintain, update and issue the training manual to each trainee.
- (e) Monitor individual JTO performance.
- (f) Monitor the overall JTO program.
- (g) Develop ongoing training for JTOs.

### **Training**

### 304.1 PURPOSE AND SCOPE

It is the policy of this office to assign all new deputies to a structured detention facility training program designed to prepare the new deputy to perform in a correctional assignment with the skills needed to operate in a safe, productive and professional manner.

### 304.2 MINIMUM TRAINING REQUIREMENTS

All deputies, full- or part-time, shall successfully complete the Adult Corrections Officer Core Course as described in 15 CCR 179 within one year from the date of assignment (15 CCR 1020(a)).

Custodial personnel who have successfully completed the course of instruction required by Penal Code § 832.3 shall successfully complete the Corrections Officer Basic Academy Supplemental Core Course as described in 15 CCR 180, within one year of the date of assignment (15 CCR 1020(b)).

Transfer courses may be utilized to meet Adult Corrections Officer Core Course requirements when the member has had the relevant probation or juvenile corrections training (15 CCR 179.1; 15 CCR 179.2).

### 304.3 DETENTION FACILITY TRAINING PROGRAM PHASES

The detention facility training program is designed to build upon the conceptual foundation taught in the Core Academy, whereupon the theoretical knowledge gained in the academy can be molded into a practical skill set.

### 304.4 PROBATIONARY PERIOD EVALUATION

Probationary employees will receive a written evaluation of their job skills and learning progress daily while in the Jail Training Program. These evaluations shall be in writing and discussed with the employee by his/her supervisor. The final evaluation shall be made a part of the employee's personnel record. Prior to being permanently appointed, each probationary employee will receive a final Performance Appraisal Form (PAF).

### **Specialized Training**

### 305.1 PURPOSE AND SCOPE

Deputies who are assigned to specialized response units will receive training commensurate with the complexity of their specialty and must be able to demonstrate proficiency in the specific skills related to their specialized function.

### 305.2 QUALIFICATIONS

To be eligible for assignment to a specialized emergency response unit, deputies are required to be off probation and to have at least one year of experience as a deputy.

### 305.3 TRAINING

The Specialized Emergency Response Lieutenant and the Training Lieutenant is responsible for ensuring that all personnel who are assigned to a specialized emergency unit will receive not less than 16 hours of specialized training as specified above or as a part of their annual training requirement.

The Office will use courses certified by a competent government or standards-setting organization whenever practicable.

It shall be the responsibility of the employee to provide the Training Lieutenant or immediate supervisor with evidence of completed training and education in a timely manner. The Training Lieutenant or supervisor shall ensure that copies of training records are placed in the employee's training file.

### **Firearms Training Refer to Operational Policy**

### 306.1 PURPOSE AND SCOPE

This policy is intended to ensure that all personnel legally assigned a firearm will develop proficiency in the use, care and safety of firearms through a regular training schedule in accordance with all laws and regulations.

### **Chemical Agents Training**

### 307.1 PURPOSE AND SCOPE

This policy establishes the required training for members to be authorized to carry and use chemical agents.

Refer to Operational Policy 304, Control Devices and Techniques

### **Prison Rape Elimination Act Training**

### 308.1 PURPOSE AND SCOPE

This policy establishes an education and training process related to implementation of the Prison Rape Elimination Act of 2003 (PREA) and the implementing regulation (PREA Rule) (28 CFR 115.5 et seq.).

### **308.2 POLICY**

The Tulare County Sheriff's Office endeavors to comply with the training standards in the PREA Rule and to ensure that all staff, volunteers and contractors are aware of their responsibilities and that staff, volunteers, contractors and inmates are aware of the policies and procedures of the facility as they relate to PREA.

### 308.3 MEMBER TRAINING

All staff, volunteers and contractors who may have contact with inmates shall receive office-approved training on the prevention and detection of sexual abuse and sexual harassment within this facility. The Training Lieutenant shall ensure that the staff receives training and testing in prevention and intervention techniques, that they have sufficient knowledge to answer any questions the arrestees and inmates may have regarding sexual assault or abuse, and that they are familiar enough with the reporting process to take an initial report of a sexual assault or abuse. The Training Lieutenant shall be responsible for developing and administering this training, covering at minimum (28 CFR 115.31; 28 CFR 115.32):

- (a) The zero-tolerance policy for sexual abuse and sexual harassment and how to report such incidents.
- (b) The dynamics of sexual abuse and sexual harassment in confinement.
- (c) The common reactions of sexual abuse and sexual harassment victims.
- (d) Prevention and intervention techniques to avoid sexual abuse and sexual harassment in the detention facility.
- (e) Procedures for the investigation of a report of sexual abuse and/or sexual harassment.
- (f) Individual responsibilities under sexual abuse and sexual harassment prevention, detection, reporting and response policies and procedures.
- (g) An individual's right to be free from sexual abuse and sexual harassment.
- (h) The right of inmates to be free from retaliation for reporting sexual abuse and sexual harassment.
- (i) How to detect and respond to signs of threatened and actual sexual abuse.
- (j) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex or gender non-conforming inmates.
- (k) How to comply with relevant laws related to mandatory reporting of sexual abuse and sexual harassment to outside authorities.

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### Prison Rape Elimination Act Training

(I) How to avoid inappropriate relationships with inmates.

Training shall be tailored according to the sex of the inmates at the facility. Staff should receive additional training on security measures and the separation of male and female populations in the same facility if inmates have been reassigned from a facility that houses only male or female inmates.

Training should include written testing to validate knowledge and understanding of the material. The Training Lieutenant shall document, through signature or electronic verification, that staff, volunteers and contractors have received and understand the training. The Training Unit will maintain training records on all those receiving training in accordance with procedures developed by the Training Lieutenant.

The Training Lieutenant shall ensure that members undergo annual refresher training that covers the office's sexual abuse and sexual harassment policies and related procedures (28 CFR 115.31)

### 308.4 SPECIALIZED MEDICAL TRAINING

All full- and part-time qualified health care and mental health professionals who work regularly in the facility shall receive all of the member training listed above, as well as training that includes (28 CFR 115.35):

- (a) Detecting and assessing signs of sexual abuse and sexual harassment.
- (b) Preserving physical evidence of sexual abuse.
- (c) Responding effectively and professionally to victims of sexual abuse and sexual harassment.
- (d) Reporting allegations or suspicions of sexual abuse and sexual harassment.

If the qualified health care and mental health professionals employed by this facility conduct forensic examinations, they shall receive the appropriate training to conduct such examinations.

The Training Lieutenant shall maintain documentation that the facility's health care and mental health professionals have received the training referenced above, either from this office or elsewhere.

### **Health Care Staff Orientation**

### 309.1 PURPOSE AND SCOPE

The purpose of this policy is to establish an orientation period for all new health care staff working in the facility, in cooperation with the health authority. The goal is to improve the competency of the health care staff and the effectiveness of the care delivered, as well as to maintain the safety and security of the custody environment and to comply with all applicable laws, regulations and national health care standards observed by the Office.

### 309.2 NEW HEALTH CARE STAFF ORIENTATION

All new health care staff shall complete an orientation program before independently working in their assignments. At a minimum, the orientation program will cover the following:

- (a) The purpose, goals, policies and procedures for the Tulare County Sheriff's Office
- (b) Security and contraband regulations
- (c) Access control to include use of keys
- (d) Appropriate conduct with inmates
- (e) Responsibilities and rights of facility employees and contractors
- (f) Universal and standard precautions
- (g) Occupational exposure
- (h) Personal protective equipment (PPE)
- (i) Biohazardous waste disposal
- (j) An overview of the correctional field as it relates to custody functions
- (k) Health care delivery protocols

### 309.3 HEALTH CARE STAFF REFRESHER TRAINING

All health care staff shall meet refresher-training requirements as established by the local public health entity or their minimum licensing requirements as established by the state licensing body.

### **Volunteer Program**

### 310.1 PURPOSE AND SCOPE

It is the policy of this office to use qualified volunteers to assist in the daily operation through their contribution of services to the inmates and the families of inmates, and to serve as a link between the facility and the community. Volunteers are intended to supplement and support, rather than supplant, deputies and other personnel. Volunteers can be an important part of any organization and are proven to be a valuable asset to corrections institutions.

### 310.1.1 DEFINITION OF VOLUNTEER

An individual who performs a service for the Office without promise, expectation or receipt of compensation for services rendered. This may include unpaid chaplains, unpaid reserve deputies, interns and persons providing administrative support.

#### 310.2 VOLUNTEER PROGRAM MANAGEMENT

### 310.2.1 PROGRAM MANAGER

The function of the program coordinator is to provide a central coordinating point for effective program management within the Office, and to direct and assist staff and volunteer efforts to provide more productive services. The program coordinator should work with other Office staff on an ongoing basis to assist in the development and implementation of volunteer positions.

The program coordinator or the authorized designee shall be responsible for:

- (a) Developing and maintaining a volunteer recruiting plan.
- (b) Developing and maintaining a handbook that minimally identifies expectations and the lines of authority, responsibility and accountability for the various volunteer assignments.
- (c) Recruiting, selecting and training qualified volunteers for various positions.
- (d) Facilitating the implementation of new volunteer activities and assignments.
- (e) Maintaining records for each volunteer.
- (f) Tracking and evaluating the contribution of volunteers.
- (g) Maintaining a record of volunteer schedules and work hours.
- (h) Completion and dissemination as appropriate of all necessary paperwork and information.
- (i) Planning periodic recognition events.
- (j) Administering discipline when warranted.
- (k) Maintaining liaison with other community programs that use volunteers and assisting in community efforts to recognize and promote volunteering.

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### Volunteer Program

#### 310.2.2 RECRUITMENT

Volunteers should be recruited on a continuous and ongoing basis in accordance with office policy on equal opportunity non-discriminatory employment. A primary qualification for participation should be an interest in, and an ability to assist the Office in serving the public.

Requests for volunteers should be submitted in writing by interested staff to the program manager through the requester's immediate supervisor. A complete position description, including when the volunteer would be needed, should be included in the request. All parties should understand that the recruitment of volunteers is enhanced by creative and interesting assignments. The program manager may withhold assignment of any volunteer until such time as the requesting unit is prepared to make effective use of volunteer resources.

### 310.2.3 SCREENING

All prospective volunteers should complete the volunteer application form. The program manager or the authorized designee should conduct a face-to-face interview with an applicant under consideration.

A documented background investigation shall be completed on each volunteer applicant and shall include, but not necessarily be limited to, the following:

- (a) Traffic and criminal background check; fingerprints shall be obtained from applicants and processed through the Criminal Information Index (CII).
- (b) Employment
- (c) References
- (d) Credit check

A polygraph exam may be required of each applicant depending on the type of assignment.

### 310.2.4 TRAINING

The program manager or the authorized designee shall be responsible for developing and maintaining training curriculum and any related forms specific to volunteer assignments.

The program manager or the authorized designee shall be responsible for ensuring that volunteers are provided with an orientation program to acquaint them with the Office, personnel, and policies and procedures that have a direct impact on their work assignment. The training/orientation will include, but not be limited to, the following topics:

- (a) Office policies and procedures
- (b) Rules related to contraband in the facility
- (c) Prohibition on carrying weapons in the facility
- (d) Volunteer/offender relationship and general rules of conduct
- (e) Safety and emergency information
- (f) An overview and history of the Office

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### Volunteer Program

The program manager shall be responsible for creating and maintaining records of all training provided to each volunteer.

Volunteers should receive position training by their immediate supervisor to ensure they have adequate knowledge and skills to complete tasks required by the position. They should receive periodic ongoing training as deemed appropriate by their supervisor or the coordinator.

Training should reinforce to volunteers that they may not intentionally represent themselves as, or by omission infer, that they are sworn deputies or other full-time members or employees of the Office. They shall always represent themselves as volunteers.

All volunteers shall comply with the rules of conduct and with all orders and directives, either oral or written, issued by the Office.

#### 310.2.5 FITNESS FOR DUTY

No volunteer shall report to work or be on-duty when his/her mental or physical condition has been impaired by alcohol, medication or other substances, or when the volunteer is experiencing illness or injury.

Volunteers shall report to their supervisor any changes in status that may affect their ability to fulfill their duties. This includes, but is not limited to, the following:

- (a) Driver's license status, if driving is part of the duties of the assignment
- (b) Any medical condition that might impair the volunteer's ability to perform the duties of the position
- (c) Arrests
- (d) Criminal investigations

All volunteers shall adhere to the guidelines set forth by this office regarding drug and alcohol use.

### 310.2.6 DRESS CODE

As representatives of the Office, volunteers should present a professional image to the community. Volunteers shall dress appropriately for the conditions and performance of their duties.

Volunteers shall conform to office-approved dress in accordance with their duty assignment. Uniforms authorized for volunteers should be readily distinguishable from those worn by deputies. The uniform or identifiable parts of the uniform shall not be worn while off-duty. However, volunteers may choose to wear the uniform while in transit to or from official office assignments or functions, provided an outer garment is worn over the uniform shirt to avoid bringing attention to the volunteer while he/she is off-duty.

Volunteers shall be required to return any issued uniform or office property at the termination of service.

#### 310.3 SUPERVISION OF VOLUNTEERS

Each volunteer who is accepted to a position with the Office and assigned to the detention facility must have a clearly identified supervisor who is responsible for direct management of that

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### Volunteer Program

volunteer. This supervisor will be responsible for day-to-day management and guidance of the work of the volunteer and should be available to the volunteer for consultation and assistance.

A volunteer may be assigned and act as a supervisor of other volunteers, provided that the supervising volunteer is under the direct supervision of a paid staff member.

Functional supervision of volunteers is the responsibility of the supervisor in charge of the unit where the volunteer is assigned. The following are some considerations to keep in mind while supervising volunteers:

- (a) Take the time to introduce volunteers to employees on all levels.
- (b) Ensure volunteers have work space and necessary office supplies.
- (c) Make sure the work is challenging. Do not hesitate to give them an assignment or task that will tap these valuable resources.

### 310.4 CONFIDENTIALITY

With appropriate security clearance, volunteers may have access to confidential information, such as criminal histories or investigative files. Unless otherwise directed by a supervisor or office policy, all information shall be considered confidential. Only that information specifically identified and approved by authorized personnel shall be released. Confidential information shall be given only to persons who have a need and a right to know, as determined by office policy and supervisory personnel.

Each volunteer will be required to sign a nondisclosure agreement before being given an assignment with the Office. Subsequent unauthorized disclosure of any confidential information, verbally, in writing or by any other means, by the volunteer is grounds for immediate dismissal and possible criminal prosecution.

Volunteers shall not address public gatherings, appear on radio or television, prepare any article for publication, act as correspondents to a newspaper or other periodical, release or divulge any information concerning the activities of the Office, or maintain that they represent the Office in such matters without permission from the proper office personnel.

### 310.5 PROPERTY AND EQUIPMENT

Volunteers will be issued an identification card that must be worn at all times while on-duty.

Any fixed and portable equipment issued by the Office shall be for official and authorized use only. Any property or equipment issued to a volunteer shall remain the property of the Office and shall be returned at the termination of service.

### 310.6 DISCIPLINARY PROCEDURES/TERMINATION

A volunteer may be removed from the volunteer program at the discretion of the Sheriff, Facility Commander or the program manager. Volunteers shall have no property interests in their continued appointment.

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### Volunteer Program

Volunteers may resign from volunteer service with the Office at any time. It is requested that volunteers who intend to resign provide advance notice of their departure and a reason for their decision.

### 310.6.1 EXIT INTERVIEWS

Exit interviews, when practicable, should be conducted with volunteers who are leaving their positions. The interview should attempt to ascertain the reason for leaving the position and solicit the volunteer's suggestions on improving the position. When appropriate, the interview should also include a discussion on the possibility of involvement in some other capacity with the Office.

**Chapter 4 - Emergency Planning** 

# **Fire Safety**

#### 400.1 PURPOSE AND SCOPE

The threat of fire and toxic smoke in the facility represents a significant risk to the safety and security of the community, the staff, inmates, volunteers, contractors, and visitors. The purpose of this policy is to clearly identify and conform to applicable federal, state, and/or local fire safety codes, and to establish a process of creating, disseminating, and training all individuals in the facility on the emergency plans for fire safety and evacuation.

#### 400.2 POLICY

It is the policy of this office that fire prevention strategies are a high priority.

The Facility Commander shall ensure that a fire alarm and detection and suppression system, as required by law, are installed, maintained, and periodically tested. Any variance, exception, or equivalency issues must be approved by the fire jurisdiction authorities and must not constitute a serious life-safety threat to the occupants of the facility (15 CCR 1029(a)(7)(A); 15 CCR 1032 et seq.).

#### 400.2.1 FIRE CODES

The Office shall conform to all federal, state, and local fire safety codes.

#### 400.2.2 FIRE PREVENTION RESPONSIBILITY

All staff, volunteers, and contractors who work in the facility are responsible for the prevention of fires. They should be trained and given the tools to carry out the tasks necessary to reduce the risk of fire.

#### 400.3 FIRE SUPPRESSION PRE-PLANNING

Pursuant to Penal Code § 6031.1, the Facility Commander shall, in cooperation with the local fire department or other qualified entity, develop a plan for responding to a fire. The plan shall include but is not limited to (15 CCR 1032):

- (a) A fire suppression pre-plan by the local fire department, to be included as part of this policy.
- (b) Fire prevention, safety inspection plans, and record retention schedules developed by designated staff or as required by applicable law.
- (c) Fire prevention inspections as required by Health and Safety Code § 13146.1(a) and (b), which requires inspections at least once every two years.
- (d) Documentation of all fire prevention inspections, all orders to correct, and all proofs of correction should be maintained for a minimum of two years or as otherwise required by law.
- (e) An evacuation plan (see the Evacuation Policy).
- (f) A plan for the emergency housing of inmates in case of fire.

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#### Fire Safety

(g) A plan for the cross-training of responders and facility staff via drills, which should occur at least quarterly, if practicable.

#### 400.4 FIRE PREVENTION EQUIPMENT

All required fire alarms, sprinklers, and detection devices shall be in good working order at all times.

Should such a device become inoperative, the Facility Commander or the authorized designee shall be responsible for ensuring that emergency repairs are undertaken as soon as possible and that staff is provided with an alternative emergency fire safety and evacuation plan.

Any time any fire prevention system is inoperative and poses a serious life-safety risk, that portion of the facility shall not be inhabited by inmates or staff.

#### **400.5 FIREFIGHTING EQUIPMENT**

The Facility Commander shall ensure that the facility is equipped with the necessary firefighting equipment (e.g., fire hoses, extinguishers) in an amount and in a location as recommended by the local fire authority or other qualified entity. The locations of firefighting equipment will be shown on the facility fire plan (schematic).

While the staff is not trained as fully qualified firefighters, the Facility Commander or the authorized designee will ensure that the staff is trained to initially respond to a fire with the purpose of facilitating the safety of the occupants, including evacuation, if necessary.

#### 400.6 INSPECTIONS

The Office shall be inspected by an appointed staff member who is qualified to perform fire and safety inspections on a monthly basis to ensure that fire safety standards are maintained. These inspections will be focused on, but not limited to, fire prevention, staff training and proficiency, firefighting equipment availability and functionality, alarms, fire detectors, fire safety equipment, and staff familiarity with prevention and suppression techniques, suppression pre-planning, SCBA use, emergency response, fire safety equipment use, and the evacuation plan.

The Facility Commander or the authorized designee shall ensure that staff conduct weekly fire and safety inspections of the facility and that all fire safety equipment is tested at least quarterly (15 CCR 1029(a)(7)(E)).

A staff member shall be assigned to coordinate with local or state fire officials for the inspections as required once every two years, pursuant to Health and Safety Code § 13146.1(a); and Health and Safety Code § 13146.1(b). The result of all fire inspections and fire equipment testing shall be provided to the Facility Commander and the Sheriff, and the records maintained for at least two years (15 CCR 1032(b)).

#### 400.6.1 FLAMMABLE, TOXIC AND CAUSTIC MATERIALS

The Facility Commander, and the Compliance Unit, in collaboration with the local environmental health expert, will review the type of materials introduced into the facility to ensure that flammable,

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#### Fire Safety

toxic and caustic materials are controlled and used safely. All such materials will be safely stored and only used by inmates under the direction of the staff.

#### **400.7 EMERGENCY HOUSING OF INMATES**

The Facility Commander or the authorized designee shall develop a plan for the emergency housing of inmates in the event of a fire (15 CCR 1032(e)). The plan should include procedures for continuing to house inmates in the facility, identification of alternate facilities and the potential capacity of those facilities, inmate transportation options, and contact information for allied agencies. This plan shall be reviewed annually and revised if necessary.

# **Facility Emergencies**

#### **401.1 PURPOSE AND SCOPE**

The purpose of this policy is to establish a plan to appropriately respond to emergencies within the facility and to ensure all affected personnel receive timely training regarding emergency response. This policy is intended to protect the community, employees, visitors, inmates, and all others who enter the detention facility, while allowing the facility to fulfill its primary purpose.

Facility emergencies related to fire will be addressed in the Fire Safety Policy.

#### 401.2 POLICY

It is the policy of this office to have emergency response plans in place to quickly and effectively respond to and minimize the severity of any emergency within the facility.

#### **401.3 PROCEDURE**

The Facility Commanders should develop, publish, and review emergency response plans that address the following (15 CCR 1029(a)):

- (a) Fires
- (b) Escapes
- (c) Disturbances/riots
- (d) Taking of hostages
- (e) Mass arrests
- (f) Natural disasters
- (g) Periodic testing of emergency equipment
- (h) Storage, issue, and use of weapons, ammunition, chemical agents, and related security devices
- (i) Other emergencies as needs are identified

The facility emergency response plans are intended to provide the staff with current methods, guidelines, and training for minimizing the number and severity of emergency events that may threaten the security of the facility or compromise the safety of staff, inmates, or the community.

The emergency response plans are intended to provide information on specific assignments and tasks for personnel. Where appropriate, the emergency response plans will include persons and emergency departments to be notified.

The emergency response plans should include procedures for continuing to house inmates in the facility; the identification of alternative facilities outside the boundaries of the disaster or threat and the potential capacity of those facilities; inmate transportation options; and contact information for allied agencies.

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#### Facility Emergencies

The emergency response plans shall be made available to the staff, volunteers, and contractors working in the facility as needed.

#### 401.4 LOCKDOWN

Upon detecting any significant incident that threatens the security of the facility, staff shall immediately notify Central Control and the Shift Supervisor. The Facility Commander shall be notified as soon as practicable.

If a lockdown is ordered, all inmates will be directed back to their housing units/cells. All inmates in transit within the facility will either be escorted back to their housing units/cells or to another secure location (holding cell). The Shift Supervisor should instruct any staff not directly involved in the lockdown to escort any visitors and nonessential contractors out of the facility.

A headcount shall be immediately conducted for all inmates, visitors, contractors, and staff. The Shift Supervisor shall be immediately notified of the status of the headcount. If any person is unaccounted for, the Shift Supervisor shall direct an immediate search of the facility and notify the Facility Commander of the situation as soon as practicable.

Lockdown is not to be used as a form of punishment. It may only be used to ensure order.

#### **401.5 HUNGER STRIKE**

Upon being made aware that one or more inmates is engaging in a hunger strike, the staff will notify the Shift Supervisor, who will notify the Facility Commander. The Facility Commander should evaluate the basis for the strike and seek an appropriate resolution.

Should the Facility Commander be unable to resolve the grievance leading to the strike, the Facility Commander will notify the Division Commander and provide updates on the status of the hunger strike.

#### 401.5.1 NOTIFICATION OF QUALIFIED HEALTH CARE PROFESSIONALS

The Facility Commander or the authorized designee should notify Medical Personnel to review, coordinate, and document any medical actions taken, based upon protocols and/or at the direction of qualified health care professionals, in response to a hunger strike.

Qualified health care professionals shall monitor the health of inmates involved in the hunger strike and make recommendations to the Facility Commander or the supervisory staff responsible for oversight of the incident.

If an inmate is engaging in a hunger strike due to a mental condition, the appropriate medical protocols for mental illness will be followed.

#### 401.5.2 RESPONSE TO HUNGER STRIKES

Beginning at the line staff level, a resolution to grievances should be sought at the lowest level. The Inmate Grievances Policy shall guide staff on resolving inmate grievances.

If the hunger strike remains unresolved, the Facility Commander may direct the appropriate staff to examine the inmate commissary purchases made in advance of the hunger strike, and to

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#### Facility Emergencies

monitor commissary purchases made during the hunger strike. Additional staff should be directed to observe the cell area, including trash containers, of the inmates involved for evidence of food items purchased from the commissary and of food hoarding.

#### **401.6 RESPONSE TO DISTURBANCES**

The staff shall attempt to minimize the disruption to normal facility operations caused by a disturbance by attempting to isolate the disturbance to the extent possible. The staff shall immediately notify the Shift Supervisor or the Facility Commander of the incident. The Shift Supervisor or Facility Commander may direct additional staff as needed to resolve the disturbance (15 CCR 1029(a)(7)(B)).

#### 401.6.1 NOTIFICATIONS

The Shift Supervisor shall notify the Facility Commander of the disturbance as soon as practicable. Based on the seriousness of the event, the Facility Commander shall notify the Division Commander as soon as practicable.

#### 401.6.2 NOTIFICATION OF QUALIFIED HEALTH CARE PROFESSIONALS

The Facility Commander or the authorized designee should notify the appropriate qualified health care professionals in order to review, coordinate, and document medical actions based upon protocols and/or at the direction of the Responsible Physician.

#### 401.6.3 REPORTING

The Shift Supervisor or Facility Commander should direct that an incident report be completed containing the details of the disturbance no later than the end of the shift. If appropriate, a crime report shall be initiated and prosecution sought.

#### **401.7 RIOTS**

Riots occur when inmates forcibly and/or violently take control or attempt to take control of any area within the confines of the detention facility.

Staff should make reasonable attempts to prevent inmate-on-inmate violence but should take measures to avoid being engulfed in the problem, thereby exacerbating the situation.

#### 401.7.1 RESPONSE TO RIOTS

Once the area of the disturbance is secured and isolated from other areas of the facility, time is generally on the side of staff. If possible, the process of quelling the disturbance should slow down in order for staff to develop response plans, to ensure there are adequate facility personnel to effectively take the required actions, and to ensure that responding staff are appropriately equipped with protective gear.

Staff should evaluate their response given the totality of circumstances in any situation, but generally should not enter the space where a riot is occurring until sufficient staff members are present to safely suppress the riot. Nothing in this policy shall prohibit any staff member from assisting staff members who are being assaulted.

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#### Facility Emergencies

All inmates who have participated in a riot shall be separated and secured as soon as practicable. If necessary, injured inmates shall receive a medical evaluation and treatment. If the injured inmate is medically cleared to remain in the detention facility, he/she will be reclassified and moved to appropriate housing.

Other housing units shall be secured, with sufficient staff remaining at their posts to continue to supervise the unaffected units.

#### 401.7.2 QUALIFIED HEALTH CARE PROFESSIONALS RESPONSE

A supervisor or the authorized designee should notify the appropriate qualified health care professionals and identify a staging area for medical emergency responders and for medical triage should it appear to be necessary.

The Responsible Physician or the authorized designee should be included in developing the response plan as it relates to the potential for a medical response, medical triage and treatment activities, and the safety and security of medical personnel during the incident.

#### 401.7.3 NOTIFICATIONS

As soon as practicable, the Shift Supervisor or a responsible staff member shall notify the Facility Commander, who in turn, shall notify the Division Commander..

#### 401.7.4 DEBRIEFING

All responding staff, including medical responders, should be debriefed on the incident as soon as practicable after the conclusion of the emergency incident. The staff should examine the incident from the perspective of what worked, what actions were less than optimal, and how the response to a future incident might be improved.

If appropriate, the details of the incident will be used to develop a training course for responding to facility disturbances. The goal of any debriefing process is continuous improvement. The debriefing should be focused on the incident and an improved response.

#### **401.8 HOSTAGES**

The Office does not recognize the taking of hostages as a reason to relinquish control of the detention facility environment.

It is the policy of the Tulare County Sheriff's Office to use all available resources necessary to bring about a successful end to a hostage situation (15 CCR 1029(a)(7)(B)).

#### 401.8.1 RESPONSE TO HOSTAGE INCIDENT

Central Control should immediately be notified at the earliest sign of a hostage incident. Central Control shall notify the Shift Supervisor and Facility Commander. The Facility Commandershall notify the Division Commander as soon as practicable.

The Shift Supervisor or Facility Commander shall make every effort to ensure that the hostage incident remains confined to the smallest area possible. Emergency exits that lead outside the secure perimeter shall be guarded.

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#### Facility Emergencies

#### 401.8.2 NOTIFICATION OF QUALIFIED HEALTH CARE PROFESSIONALS

At the direction of the Shift Supervisor or the authorized designee, the qualified health care professionals should be notified in order to identify a location and form a logistical plan for medical triage. The location also shall serve as a medical staging area for other medical emergency responders.

#### 401.8.3 HOSTAGE RESCUE

Communications with the hostage-taker should be established as soon as practicable. Hostage-taker demands for the staff to open doors will not be met. A hostage rescue team should be immediately summoned and the established protocols for resolving the situation shall be implemented. The Facility Commander and Division Commander should be consulted regarding decisions faced by the hostage rescue team.

#### 401.8.4 REPORTING AND DEBRIEFING

Following the conclusion of a hostage incident, the Facility Commander should direct that an incident report be completed by the end of the shift. All aspects of the incident should be reviewed, focusing on the incident and the outcome, with the intent of using the incident as an opportunity for continuous improvement and to identify additional training or systemic changes that may be required.

#### **401.9 ESCAPES**

Upon being made aware that an escape may have occurred, or did in fact occur, the staff member should immediately notify Central Control. Central Control shall notify the Shift Supervisor or Facility Commander. As soon as practicable, the Facility Commander should notify the Division Commander.

Once the escape is verified and immediate actions taken inside the facility (lockdown, etc.), the Shift Supervisor should notify dispatch..

#### 401.9.1 INMATE COUNTS

As soon as the facility is fully locked down, a physical body count shall be taken.

All inmates who are outside of the secure perimeter of the facility (e.g., court, work details) should be located and identified. Any missing inmate shall have his/her identity disclosed and his/her facility record should be accessed by the Facility Commander (15 CCR 1029(a)(6)).

#### 401.9.2 SEARCH

Concurrent with the lockdown, the area surrounding the facility should be searched for the escapee. Areas where an inmate may be hiding or may have discarded detention facility clothing should be searched first. Any witnesses should be interviewed.

Classification officers will develop a flyer with the inmate's name, description, latest picture, classification status, and charges, and supply it to dispatch, custody staff, and local law enforcement. Local law enforcement should also be given the inmate's last known address and a list of his/her associates.

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#### Facility Emergencies

#### 401.9.3 REPORTING

The Shift Supervisor or a designated staff member should submit an incident report to the Facility Commander. A crime report should also be written regarding the escape. The Facility Commander should conduct a critical incident review.

#### 401.10 CIVIL DISTURBANCES OUTSIDE OF THE JAIL

Upon being notified that jail space will be needed in response to a civil disturbance involving mass arrests, the Shift Supervisor should notify the Facility Commander. The Facility Commander should make the determination regarding the magnitude of the event and whether it warrants notification of the Sheriff.

The size of the event may also require a lockdown, suspension of any programs that are not critical to detention facility operations, and/or implementation of alternate staffing plans. To accommodate the influx of inmates, the Shift Supervisor shall develop a housing plan that will not adversely affect the safety and security of the facility. Program spaces, such as exercise yards, classrooms, and dayrooms, may be used to temporarily house a limited number of additional inmates.

In the event that the detention facility can no longer accept additional inmates without compromising the safety and security of the facility, mutual aid may be requested from allied counties. Title 15 CCR standards may be temporarily suspended. The Facility Commander shall notify the California Board of State and Community Corrections (BSCC) in writing in the event that such a suspension lasts longer than three days. Suspensions lasting for more than 15 days require approval of the chairperson of the BSCC (15 CCR 1012).

#### **401.11 REVIEW OF EMERGENCY PROCEDURES**

The Facility Commander shall ensure that there is a review of emergency response plans at least annually. At a minimum, the review should include:

- (a) Assignments of persons to specific tasks in emergency situations.
- (b) Instructions in the use of the alarm systems and signals.
- (c) Systems for the notification of appropriate persons outside of the facility.
- (d) Information on the location and use of emergency equipment in the facility.
- (e) Specification of evacuation routes and procedures.

#### **401.12 NATURAL DISASTERS**

In the event that a(n) escape, disturbance, taking of hostage(s), civil disturbance, or natural disaster occurs, all inmates will be transported from the affected facility or facilities and house these inmates at the remaining unaffected facilities. In the event the remaining unaffected facilities are unable to properly house the inmate population, the Sheriff or his designee will contact the surrounding counties or state agencies with which Tulare County has an MOU or verbal understanding and request assistance with the temporary housing of these inmates.

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### Facility Emergencies

In extreme cases, when the scope of the disaster exceeds the ability of local resources, the established procedures call for the Office of Emergency Services (OES) to contact the National/State incident Management System (NIMS)SIMS) and their protocol will be followed.

# **Emergency Staffing**

#### **402.1 PURPOSE AND SCOPE**

The facility must operate at all times as a safe and secure environment, regardless of staffing levels. Consequently, contingency plans must be made in advance for any staffing emergency or planned job action, regardless of the length of the staffing deficit.

The purpose of this policy is to establish roles and responsibilities for creating and implementing emergency staffing plans, providing appropriate emergency staffing training to supervisory and management personnel, and identifying an update schedule and distribution list for the plan, as identified by the Sheriff or the authorized designee.

#### 402.2 POLICY

It is the policy of this office to be prepared to operate a safe and secure facility in the event of a work staffing emergency. Staffing emergencies that could negatively affect the good order the facility may include, but are not limited to, an outbreak of infectious disease, a work stoppage, a natural disaster or other disruption. The Sheriff or the authorized designee shall be responsible for ensuring that an appropriate emergency staffing plan exists.

#### 402.2.1 EMERGENCY STAFFING

In the event the Facility Commander becomes aware that a staffing emergency exists or may occur, staff members who are present may be ordered to remain at their posts. The Facility Commander will notify the Detention Captain. Plans should include measures to achieve minimum staffing for the facility within four hours of a staffing emergency and may include the following operational adjustments:

- The facility may go to a lockdown. Minimum activities, including visiting, exercise and other programs will be suspended only if necessary. Meals, cleaning, medical services, court transportation and attorney visits will continue. Other activities will be assessed by the Facility Commander on a case-by-case basis.
- Supervisory and management personnel may have time-off cancelled or rescheduled for the duration of the staffing emergency.
- Staff from other detention facilities may be used to fill vacancies in the facility.
- Assistance from allied agencies may be requested to help management and supervisors in safely staffing the facility.
- Contracting with surrounding facilities may be necessary if adequate staffing cannot be obtained to safely operate the facility.
- In the event of a health-related staffing emergency, the office Exposure Control Officer and medical staff shall be notified in accordance with the Communicable Diseases Policy.

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#### **Emergency Staffing**

#### 402.2.2 LEGAL ASSISTANCE

In cases where the Facility Commander becomes aware that a work stoppage is planned or has occurred, legal counsel should be consulted for assistance in preparing the necessary legal action to either prevent the work stoppage or to cause it to cease. Immediate contact with the employees' representatives may also be necessary to prevent or conclude the job action.

#### **402.2.3 TRAINING**

The Facility Commander or the authorized designee should be responsible for:

- (a) Establishing a distribution list for the contingency plan.
- (b) Establishing a periodic review and update of the plan.
- (c) Ensuring that all supervisors and managers are periodically trained on the plan.
- (d) Ensuring that all supervisors and managers are provided a copy of the plan and/or a means to access it in the event of an emergency.
- (e) Documenting all training.
- (f) Maintaining training records for each supervisor and manager and ensuring that those personnel periodically receive appropriate update training on the plan.

# **Emergency Power and Communications**

#### 403.1 PURPOSE AND SCOPE

The Tulare County Sheriff's Office facility must continue to operate as a safe and secure environment regardless of emergencies, including electrical outages. The purpose of this policy is to establish guidelines regarding back-up power and communication systems, and the inspection, preventive maintenance and testing of the systems to ensure a seamless transition in the event of a loss of power.

#### 403.2 POLICY

It is the policy of this office to ensure that power to critical systems and communications continues to operate within the facility in the event of a loss of power.

#### 403.2.1 PREVENTIVE MAINTENANCE

It is the responsibility of the Sheriff and Facility Commander to ensure that there is sufficient emergency power to operate all essential lighting, security equipment, safety equipment and communications systems. The emergency power system should have sufficient fuel to allow the facility to operate continuously for a three-day period, if necessary, without external resources.

The emergency power system should be inspected, tested and maintained as necessary. In the event that the system fails, the Facility Commander or Shift Supervisor should contact the designated maintenance authority or repair company to obtain necessary repairs as soon as practicable. If the emergency power system cannot be repaired within eight hours, portable emergency generators should be secured as a temporary emergency power source until the repair or replacement of the primary system occurs.

#### 403.2.2 SAFETY AND SECURITY

All safety and security equipment will be repaired or replaced in an expedited manner by qualified personnel. In the event that safety and security equipment become inoperable or damaged and it is not safe to operate a secure portion of the facility, that portion of the facility should be vacated and the inmates housed elsewhere. Staffing should be increased sufficiently for the area to remain safe and secure until the repair can be completed.

#### 403,2.3 INSPECTION AND TESTING

The Facility Commander or the authorized designee is responsible for scheduled testing of emergency power systems (15 CCR 1029). The power system manufacturer should be contacted for the required testing intervals and load information. The emergency power system should be load-tested in accordance with the manufacturer's recommendations or at least quarterly.

All emergency equipment and systems should be inspected and tested by a qualified individual at least quarterly.

Power generators should be inspected and tested by a qualified individual at least weekly.

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All testing and inspections shall be documented and the results included in a report to the Facility Commander.

## **Evacuation**

#### 404.1 PURPOSE AND SCOPE

The purpose of this policy is to promote planning and to establish procedures, responsibilities, and training requirements for the staff of the Detention Divisionin case of fire and other emergency evacuations.

#### **404.2 POLICY**

All custody staff should be knowledgeable about the evacuation plan, policy, and procedures.

#### **404.3 EVACUATION PLAN**

The Tulare County Sheriff's Office maintains an evacuation plan to be implemented in the event of a fire, natural disaster, or other emergency (15 CCR 1032(d)). At a minimum the evacuation plan should address the following:

- Location of facility building and floor plans
- Procedures on how inmates are to be released from locked areas
- Relocation areas to be used for housing inmates in the event of a full or partial evacuation
- Notifications
- Training and drill requirements for staff
- Reporting requirements

The Facility Commander shall ensure that the evacuation plan is maintained and updated as needed.

A current copy of the evacuation plan shall be maintained in the Administration office and in the command area of each annex facility.

#### 404.3.1 EXITS

All facility exits should be marked with signs that clearly indicate the direction of traffic.

Except for temporary reasons, such as maintenance or repairs, all exits to the facility shall remain free from obstacles at all times regardless of the frequency of use. It is the duty of all staff to remove any obstructions that block, either partially or completely, staff's ability to observe or use any exit.

All housing areas and places of assembly that are designed for occupancy of 50 individuals or more shall have two available exits.

#### 404.3.2 EVACUATION PLANS AND ROUTES

Plans for evacuation routes will be posted in all public areas of the facility. All custody staff will be familiar with evacuation routes for inmates.

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#### Evacuation

#### 404.3.3 EMERGENCY HOUSING OF INMATES

The Facility Commander or the authorized designee shall develop a plan on the emergency housing of inmates in the event of a full or partial evacuation of the facility. The plan will address when inmates should be housed in place, identification of alternate facilities, and the potential capacity of those facilities, inmate transportation options, and contact information for allied agencies. This plan shall be reviewed at least annually and revised if necessary.

**Chapter 5 - Inmate Management** 

## **Inmate Counts**

#### 500.1 PURPOSE AND SCOPE

Inmate counts are vital to the security of the facility, the safety of the staff, and the welfare of the inmates. This policy establishes guidelines for the frequency of inmate counts, which ensures that all inmates and their status can be accounted for at any time.

#### 500.2 POLICY

It is the policy of this office to account for all inmates within and under the control of this facility through scheduled and other counts as needed (15 CCR 1029(a)(6)).

#### 500.3 PROCEDURE

The Facility Commander or the authorized designee shall be responsible for creating and maintaining a written procedure establishing the process and frequency of counts. Inmate counts shall be conducted at least once every eight hours. Emergency counts may be conducted at the direction of the Shift Supervisor as needed. Electronic counts shall not be substituted for direct staff observation.

All counts shall be documented on the daily activity log and reviewed by the Shift Supervisor. Counts shall include all inmates in custody, including those on work assignments, furlough, education release, and those who are off-site, such as at the hospital or court.

Any discrepancy in the count should immediately be reported to the Facility Commander and resolved prior to the release of the shift personnel responsible for the count. A formal count in which all inmates are personally identified by a deputy should be conducted once a day at a time established by the Facility Commander. The result of the formal count will be used to calculate the average daily population statistics for the facility.

In the event that an escape is discovered during the inmate count, the Shift Supervisor will initiate action to investigate the escape by promptly notifying dispatch and the Facility Commander, initiating a search, and complying with other procedures as needed in accordance with the Facility Emergencies Policy.

A complete report of the incident will be prepared and provided to the Facility Commander and Division Commander as soon as practicable.

All count sheets shall be signed by the Shift Supervisor and saved.

## **Inmate Reception**

#### **501.1 PURPOSE AND SCOPE**

The Tulare County Sheriff's Office has a legal and methodical process for the reception of arrestees into booking facilities. This policy establishes guidelines for security needs, the classification process, identification of medical/mental health issues and the seizure and storage of personal property.

#### **501.2 POLICY**

This office shall use the following standardized policies when receiving arrestees to be booked into booking facilities.. This is to ensure security within the facility and that arrestees are properly booked and afforded their applicable rights.

#### 501.3 PRE-BOOKING SCREENING

All arrestees shall be screened prior to booking to ensure the arrestee is medically acceptable for admission and that all arrest or commitment paperwork is present to qualify the arrestee for booking. Required paperwork may include the following:

- (a) Arrest reports
- (b) Probable cause declarations
- (c) Warrants or court orders
- (d) Victim notification information
- (e) Special needs related to religious practices, such as diet, clothing and appearance (see the Religious Programs Policy)
- (f) Accommodation requests related to disabilities (see the Inmates with Disabilities Policy)
- (g) Information regarding suicidal statements or actions

Any discrepancies or missing paperwork should be resolved before accepting the arrestee for booking from the arresting or transporting deputy.

Prior to accepting custody of an arrestee who claims to have been arrested due to a mistake of the arrestee's true identity or an arrestee who claims that identity theft led to the issuance of a warrant in the arrestee's name, staff shall make reasonable efforts to investigate the arrestee's claim of identity fraud or mistake. Staff shall notify a supervisor when an arrestee makes a claim of mistaken identity or identity fraud.

Arrestees who can post bail or qualify for a release on their Own Recognizance (O.R.), citation, or Penal Code § 849(b) will be processed and released (15 CCR 1029(a)(5)).

#### 501.3.1 IMMIGRATION DETAINERS

No individual should be held based solely on a federal immigration detainer under 8 CFR 287.7 (Government Code § 7284.6).

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#### Inmate Reception

Notification to a federal authority may be made prior to release of an individual who is the subject of a notification request only if the person meets at least one the following (Government Code § 7282.5; Government Code § 7284.6):

- (a) Has been arrested and had a judicial probable cause determination for a serious or violent felony identified in Penal Code § 667.5(c) or Penal Code § 1192.7(c)
- (b) Has been arrested and had a judicial probable cause determination for a felony punishable by time in a state penitentiary
- (c) Has been convicted of an offense as identified in Government Code § 7282.5(a)
- (d) Is a current registrant on the California Sex and Arson Registry
- (e) Is identified by the U.S. Department of Homeland Security's (DHS) Immigration and Customs Enforcement (ICE) as the subject of an outstanding federal felony arrest warrant signed by a Federal Magistrate.

#### **Refer to Immigration Policy**

#### 501.3.2 NOTICE TO INDIVIDUALS

Individuals in custody shall be given a copy of documentation received from ICE regarding a hold, notification or transfer request along with information as to whether the Office intends to comply with the request (Government Code § 7283.1).

If the Office provides ICE with notification that an individual is being, or will be, released on a certain date, the same notification shall be provided in writing to the individual and to his/her attorney or to one additional person whom the individual may designate (Government Code § 7283.1).

#### 501.3.3 ICE INTERVIEWS

Before any interview between ICE personnel and an individual in custody for civil immigration violations, the office shall provide the individual with a written consent form that explains the purpose of the interview, that the interview is voluntary, and that he/she may decline to be interviewed or may choose to be interviewed only with his/her attorney present. The consent form must be available in the languages specified in Government Code § 7283.1.

#### 501.3.4 IMMIGRATION INQUIRIES PROHIBITED

Deputies shall not inquire into an individual's immigration status for immigration enforcement purposes (Government Code § 7284.6).

#### **501.4 SEARCHES BEFORE ADMISSION**

All arrestees and their property shall be searched for contraband by the booking deputy before being accepted for booking. All contraband items will be handled according to facility policy. Items of possible evidentiary value may be turned over to the arresting or transporting deputy for processing or processed according to the facility's rules for handling evidence. Approved personal property and clothing will be accepted. Items not approved will be returned to the arresting or transporting deputy prior to the arrestee being accepted for booking. A description of the items

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#### Inmate Reception

returned to the arresting or transporting deputy shall be documented on the arrestee's booking record.

Strip searches shall be conducted in accordance with the Searches Policy.

#### 501.5 ADMISSION PROCESS

A unique booking number shall be obtained specific to the current admission. Photographs and fingerprints shall be taken.

The admission process should include an attempt to gather a comprehensive record of each arrestee, including the following:

- Identifying information, including name and any known aliases or monikers
- Current or last known address and telephone number
- Date and time of arrest
- Date and time of admission
- Name, rank, agency, and signature of the arresting deputy and transporting deputy, if different
- Legal authority for confinement, including specific charges, arrest warrant information, and court of jurisdiction
- Sex
- Age
- Date and place of birth
- Race
- Height and weight
- Occupation and current or most recent employment
- Preferred emergency contact, including name, address, telephone number, and relationship to inmate
- Driver's license number and state where issued, state identification number, or passport number
- Social Security number
- Additional information concerning special custody requirements or special needs
- Local, state, and federal criminal history records
- Photographs, fingerprints, and notation of any marks or physical characteristics unique to the inmate, such as scars, birthmarks, deformities, or tattoos
- Medical, dental, and mental health screening records, including suicide risk
- Inventory of all personal property including clothing, jewelry, and money

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 A record of personal telephone calls made at the time of booking or the time the opportunity was provided to place calls if the calls were not made

The inmate shall be asked if he/she served in the U.S. military. The response shall be documented and made available to the inmate, the inmate's counsel, and the District Attorney (Penal Code § 4001.2).

Inventoried items of rare or unusual value should be brought to the attention of a supervisor. The inmate's signature should be obtained on the booking record and on any forms used to record money and property.

Inmate photos may be released by the Departmental Public Information Officer or by jail staff with supervisor's approval. Only the official identification photo (Mug Shot) may be released.

• Prior to releasing an inmate photo, staff shall inspect the automated and manual record for the inmate and search for indication that the arresting agency, or any other agency or officer, has requested that the photo not be released. In the event that such a comment exists, the photo shall not be released and the person requesting the photo shall be referred to the agency and/or officer entering the comment. Photo shall only be released if the inmate is in custody.

#### 501.5.1 LEGAL BASIS FOR DETENTION

Arrestees admitted to the facility shall be notified of the official charge for their detention or legal basis of confinement in a language they understand.

#### 501.5.2 ADMISSION OF SEX OFFENDER REGISTRANTS

When inmates are required to register address changes under Penal Code § 290.013 have been admitted into the detention facility, authorized personnel will notify the Department of Justice (California Sexual and Arson Registry, CSAR) within 15 days of the admission (Penal Code § 290.013).

#### 501.6 TRANSITION FROM RECEPTION TO GENERAL POPULATION

The Shift Supervisor is responsible for ensuring only arrestees who qualify are placed into general population cells or housing. Those who will not be placed into general population include:

- (a) Arrestees who are eligible for release following citation.
- (b) Arrestees who are intoxicated or under the influence of any chemical substance.
- (c) Arrestees who are arranging bail. They shall be permitted a reasonable amount of time, at the discretion of the Shift Supervisor, to make telephone calls before being placed in general population.

#### 501.6.1 MONITORING FOR SIGNS OF INTOXICATION AND WITHDRAWAL

Staff shall respond promptly to medical symptoms presented by inmates to lessen the risk of a lifethreatening medical emergency and to promote the safety and security of all persons in the facility.

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#### Inmate Reception

Custody staff should remain alert to signs of drug and alcohol overdose and withdrawal, which include but are not limited to sweating, nausea, abdominal cramps, anxiety, agitation, tremors, hallucinations, rapid breathing, and generalized aches and pains. Any staff member who suspects that an inmate may be suffering from overdose or experiencing withdrawal symptoms shall promptly notify the supervisor, who shall ensure that the appropriate medical staff is notified.

#### 501.6.2 INMATE SEPARATION

Inmates should be kept separate from the general population during the admission process. Newly admitted inmates should be separated according to the facility's classification plan.

#### 501.7 INMATE PROPERTY CONTROL

All property received from inmates at the time of booking shall be inventoried. A receipt should be signed by the inmate and the booking deputy and referenced to the booking number before the admission is completed. The original copy of the property receipt will be retained and placed in the inmate's file and/or with the property. A second copy will be presented to the inmate at the time of booking.

Excess personal clothing shall be mailed to, picked up by, or transported to designated family members or to a person of the inmate's choosing, or stored in containers designed for this purpose.

#### 501.7.1 VERIFICATION OF INMATE'S MONEY

All monies belonging to the inmate will be logged into Money-Kiosk by the arresting or transporting agency.

Negotiable checks or other instruments and foreign currency should also be sealed in an envelope with the amount indicated but not added to the cash total. Jewelry and other small property should also be sealed in an envelope. All envelopes should clearly indicate the contents on the front. The person sealing it should initial across the sealed flap.

#### 501.7.2 PROPERTY STORAGE

All inmate property should be stored in a secure storage area. Only authorized personnel may access the storage area and only for the purpose of depositing or retrieving property, or to conduct duly authorized work, including maintenance and other duties as directed by the Facility Commander.

#### **501.8 INMATE TELEPHONE CALLS**

Every inmate detained in this facility shall be entitled to at least three completed telephone calls immediately upon being admitted and no later than three hours after arrest. Either the arresting or booking deputy must ask the inmate if he/she is a custodial parent with responsibility for a minor child as soon as practicable, but no later than three hours after the arrest, except when physically impossible. If the inmate is a custodial parent with responsibility for a minor child, the inmate shall be entitled to make two additional telephone calls to arrange care for the minor child (Penal Code § 851.5).

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The calls may be of a duration that reasonably allows the inmate to make necessary arrangements for matters that he/she may be unable to complete as a result of being arrested. The calls are not intended to be lengthy conversations and the custody staff may use their judgment in determining the reasonable duration of the calls.

There is no obligation for the custody staff to make a telephone call on an inmate's behalf, for example in the case of a person who is so intoxicated that he/she cannot make a call. The custody staff is not required to wake an intoxicated person so that the person may complete a call. An intoxicated person should be provided the opportunity to make the telephone calls once the person awakes.

#### 501.8.1 TELEPHONE CALL PROCEDURES

The Office will pay the cost of local calls. Long distance calls will be paid by the inmate, using calling cards or by calling collect.

Calls between the inmate and his/her attorney shall be deemed confidential, and shall not be monitored, eavesdropped upon or recorded.

A sign containing the information as required in Penal Code § 851.5 in bold block type shall be posted in a conspicuous place where the inmates make their booking telephone calls and within the custody facility.

The public defender's telephone number shall be posted with the sign.

The signs shall be in English, Spanish, and any other language spoken by a substantial number of the public, as specified in Government Code § 7296.2, who are served by this agency (Penal Code § 851.5).

#### 501.8.2 ONGOING TELEPHONE ACCESS

Ongoing telephone access for inmates who are housed at this facility will be in accordance with the Inmate Telephone Access Policy.

#### 501.9 SHOWERING AND CLOTHING EXCHANGE

Inmates should be allowed to shower before being dressed in clean jail clothing. Showering should occur before an inmate is transferred from the temporary holding area to general population housing (see the Inmate Hygiene Policy).

#### **501.10 JUVENILE DETAINEES**

Juveniles are not eligible for admission to these detention facilities. A juvenile may be held only for the length of time needed for release to a parent or guardian or transfer to an appropriate facility, and in any case, for a maximum of six hours (Welfare and Institutions Code § 207.1). Detention is subject to the following conditions:

(a) The juvenile shall be held in an unlocked area that is not used for housing and is outside the secure perimeter of the detention facility, such as an interview room, lobby, or office.

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- (b) The juvenile shall not be physically secured to a cuffing rail or other stationary object.
- (c) The juvenile shall be under continuous visual supervision by a law enforcement officer, a facility employee, or a designated youth attendant. Continuous visual monitoring may be by an audio/video system. The juvenile shall have constant auditory access to the staff.
- (d) Separation by sight and sound shall be maintained between all juveniles and adults in custody (34 USC § 11133). There should also be sight and sound separation between non-offender juveniles, such as those who may be in protective custody, and juveniles and status offenders.

## **Inmate Property**

#### 502.1 GENERAL

The purpose of this policy is to establish and maintain a consistent method of handling inmate property.

#### 502.1.1 PROCEDURES

The booking officer will be responsible for completing a Tulare County Detention Division property bag for each arrestee.

- •The large and small property bag will be filled out completely.
- •All property will be verified by the booking officer in the presence of the arrestee.
- •All unauthorized property items will be returned to the transporting officer or deputy for proper processing.
- •The small property bag will be sealed and signed by the booking officer and the inmate's name and ID number written on the bag.
- •Large property bags will also include the arrestee's name and ID on the bag.
- •Property too big will not be accepted. Examples of this would be purses, bags, or items too big to fit into a small property bag.

#### 502.1.2 INMATE PROPERTY BAGS

The booking officer will ensure all information related to the inmates property is properly noted and described in ADSI.

- •A signed copy of the inmates property receipt will be placed in his or her booking jacket.
- •Additional property bags can be utilized if property will not fit in a single bag with a max of two small property bags
- •Inmate small property bags will not be opened unless inmate is being released or authorized by a supervisor.
- •If small property bag opened, document why the property bag was opened in ADSI.
- •Property bags will be filed by property number and secured in the inmate property storage room.

#### **502.2 RELEASE OF PROPERTY**

#### **Property Release to another individual**

- •If an inmate wishes to release property small property, all property will be released at the same time.
- •The inmate must request in writing, to release his or her property to another individual. The inmate must provide a name and relationship of the person receiving the property.

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#### Inmate Property

- •The receiving person must show identification and will be required to sign for all property he or she is receiving.
- •The releasing officer will then document the release of small property in ADSI. The signed property receipt will be placed in the inmate's booking jacket.

#### **502.3 INMATE TRANSFER WITHIN COUNTY**

When property is missing during the transfer of an inmate to another county facility, the following procedure will be followed:

- •The transporting deputy will contact the facility and brief the supervisor of the situation. Staff will immediately look for the missing property.
- •If the property cannot be located, the supervisor can accept the inmate. The releasing facility will write an incident reports and document in ADSI.
- •The facility which misplaced the inmate property will continue to look for the property and the sergeant will brief the facility commander as soon as practical.

#### **502.4 INMATES TO STATE CUSTODY**

When an inmate is released to State custody, all large and small property shall be released to a family member or individual chosen by the inmate. In no case shall the property be stored longer than 120 days after the inmate is released.

## **Handbook and Orientation**

#### **503.1 PURPOSE AND SCOPE**

This policy provides for the orientation of incarcerated persons booked into the Tulare County Sheriff's Office facility. The purpose of the orientation is to inform incarcerated persons of the detention facility routine, rules, incarcerated persons' rights, and services.

#### 503.2 POLICY

The Facility Commander shall provide an effective method of orienting all incoming incarcerated persons that includes an inmate handbook. The orientation should take place within 24 hours of an incarcerated person's admission and in any event prior to the inmate being moved to general population housing and should be an ongoing process in the housing area so that the information is available to the incarcerated persons throughout their entire time in custody.

#### **503.3 INITIAL ORIENTATION**

To assist with the incarcerated person's transition into a custody environment, the orientation will be both written and verbal (including video orientation if available) and include the following topics, supplemented by a more detailed incarcerated person handbook that will be provided to each incarcerated person (15 CCR 1069):

- (a) Facility rules and disciplinary actions
- (b) Correspondence, visiting, and telephone rules
- (c) Incarcerated person grievance procedure
- (d) Co-pays, fees, and charges
- (e) Medical, dental, and mental health services
- (f) Possibilities for pretrial release
- (g) Programs and activities, including application procedures
- (h) Classification/housing assignments and appeal procedures
- (i) Court appearance, where scheduled, if known
- (j) Availability of personal care items and opportunities for personal hygiene
- (k) Emergency procedures (e.g., fires, evacuations)
- (I) Sexual abuse and sexual harassment information, including the following (28 CFR 115.33):
  - 1. Facility's zero-tolerance policy
  - 2. Prevention and intervention
  - 3. Instruction on how incarcerated persons can avoid being victims of sexual abuse and sexual harassment through self-protection techniques
  - 4. Treatment and counseling for victims of sexual abuse or sexual harassment

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#### Handbook and Orientation

- 5. Reporting sexual abuse or sexual harassment incidents, including how to report such incidents anonymously
- 6. Mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, state, or national victim advocacy or rape crisis organizations, and, for persons detained solely for civil immigration purposes, immigrant services agencies (28 CFR 115.53)
- 7. Information regarding confidentiality, monitoring, and mandatory reporting
- (m) Contacting foreign consuls
- (n) Requests for religious accommodations
- (o) Voting, including registering to vote
- (p) Direction for pregnant incarcerated persons, including the information required in Penal Code § 3407(e) and 15 CCR 1058.5
- (q) The right to be taken before a magistrate in this county if held on an out-of-county warrant (Penal Code § 821; Penal Code § 822)

In addition to English, orientation information will be provided in the most commonly used languages for the incarcerated person population.

The Facility Commander should consider enlisting the assistance of volunteers who are qualified and proficient in both English and the language in which they are providing translation assistance to translate the orientation information. Use of outside translation sources may also be considered.

Interpretive services will be provided to incarcerated persons who do not speak English or any of the other languages in which the orientation information is available.

A written and signed acknowledgment of the orientation and receipt of the handbook should be maintained in the incarcerated person's permanent file (28 CFR 115.33).

# 503.4 ORIENTATION FOR INCARCERATED PERSONS WHO ARE NON-READERS, VISUALLY IMPAIRED, OR HAVE A HEARING DISABILITY

Incarcerated persons who cannot read, are visually impaired, or have intellectual, psychiatric, or speech disabilities, or limited reading skills shall have the materials read to them by a staff member or presented to them using audible recorded media (28 CFR 115.16).

Incarcerated persons who have hearing disabilities shall be provided with interpretation services. Reasonable efforts should be made by the staff to assist the incarcerated person in understanding the information.

## **Safety Checks**

#### **504.1 PURPOSE AND SCOPE**

The purpose of this policy is to establish a requirement for conducting visual safety checks for all incarcerated persons, and for creating and maintaining a log to document all safety checks.

#### 504.2 POLICY

It is the policy of the Tulare County Sheriff's Office that all correctional staff shall conduct safety checks on all incarcerated persons, at a frequency determined by custody status, housing classification, and applicable state law.

#### **504.3 SAFETY CHECKS**

The staff shall adhere to the following procedures when conducting safety checks (15 CCR 1027; 15 CCR 1027.5):

- (a) Safety checks shall be conducted at least once every 30 minutes and more frequently if necessary.
- (b) Safety checks shall be conducted on an irregular schedule (staggered) so that incarcerated persons cannot predict when the checks will occur.
- (c) Safety checks shall be done by personal observation of the deputy and shall be sufficient to determine whether the incarcerated person is experiencing any stress or trauma.
- (d) Cameras and monitors may supplement the required visual observation safety checks, but they shall not replace the need for direct visual observation.
- (e) Safety checks will be clearly documented on permanent logs in accordance with the office Daily Activity Logs and Shift Reports Policy.
- (f) Actual times of the checks and notations should be recorded on the daily activity logs.
- (g) Log entries shall never be made in advance of the actual check. Log entries made in this manner do not represent factual information and are prohibited.
- (h) Special management incarcerated persons shall be checked more frequently as detailed in the Special Management Incarcerated Persons Policy.

#### 504.3.1 SAFETY CHECK DOCUMENTATION

All safety checks shall be documented. Documentation shall include (15 CCR 1027.5):

- (a) The actual time when each safety check occurred.
- (b) The location where each safety check occurred, such as a cell, module, or dormitory number.
- (c) Initials or member identification number of staff who completed the safety check.

Safety check documentation shall be reviewed at regular, defined intervals by the Facility Commander or supervisor. The review shall include any noted inconsistent documentation or any untimely completion of safety checks (15 CCR 1027.5).

# **Staffing Levels**

#### 505.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure the safety and security of the facility through the application of appropriate staffing levels.

#### 505.1.1 POLICY

It is the policy of this department to provide for the safety and security of citizens, staff and inmates through appropriate staffing levels that are sufficient to operate the facility and perform functions related to the safety, security, custody and supervision of inmates.

#### **505.2 SUPERVISION OF INMATES**

There shall be, at all times, sufficient staff designated to remain in the facility for the supervision and welfare of all inmates, and to ensure the implementation and operation of all programs and activities as required by Title 15.Staff must not leave the facilities while inmate are present and should not be assigned duties which could conflict with the supervision of inmates (Title 15 1027).There should be enough staff on duty at all times to respond to emergencies.

When both male and female inmates are held at a detention facility, a minimum of one male and one female deputy should be on-duty in the detention facility at all times.

Staff members shall not be placed in positions of responsibility for the supervision and welfare of inmates of the opposite sex in circumstances that can be described as an invasion of privacy or be considered degrading or humiliating to the inmates. Staff used as program resource personnel with inmates should be of the same sex as the inmates when reasonably available. However, at least one staff member of the same sex as the inmates should be on-duty and available to the inmates during all such activities.

To the extent reasonably practicable, inmate bathrooms will contain modesty screens to preserve privacy without creating areas which cannot be properly supervised. Inmates shall be permitted to shower, perform bodily functions and change clothing without non-medical staff of the opposite sex viewing their breast, buttocks or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Staff of the opposite sex shall announce their presence when entering an inmate housing unit (28 CFR 115.15) (Hygiene Policy 808.9).

The Facility Commander or the authorized designee shall be responsible for developing staffing plans to comply with this policy. Records of staff assignments should be maintained in accordance with established records retention schedules (Penal Code 4021; 15 CCR1027)

# **Special Management Inmates**

#### **506.1 PURPOSE AND SCOPE**

Inmates who pose a heightened risk to themselves or others require special management, including frequent interaction and increased supervision by staff. Interaction with special management inmates is essential to maintaining a safe, secure, and humane environment. This policy establishes guidelines and procedures for interacting with special management inmates in the custody of the Tulare County Sheriff's Office.

#### 506.1.1 DEFINITIONS

Definitions related to this policy include:

**Administrative segregation** - The physical separation of an inmate who is prone to (15 CCR 1053):

- (a) Promote activity or behavior that is criminal in nature or disruptive to facility operations.
- (b) Demonstrate influence over other inmates, including influence to promote or direct action or behavior that is criminal in nature or disruptive to the safety and security of other inmates or facility staff, as well as to the safe operation of the facility.
- (c) Escape.
- (d) Assault staff or other inmates, or participate in a conspiracy to assault or harm them.
- (e) Need protection from other inmates.

This is a non-punitive classification process.

**Protective Custody** - A level of custody either requested or required for an inmate's protection from others.

**Medical Separation** - Inmates deemed to need long term care that may require being separated from other inmates.

#### 506.2 POLICY

This office shall provide for the secure and segregated housing of any special management inmate but shall not impose more deprivation of privileges than is necessary to obtain the objective of protecting the inmate, staff, or the public (15 CCR 1053).

#### 506.3 SPECIAL MANAGEMENT INMATES HOUSING CRITERIA

The safety and security of this facility is dependent on a classification system that identifies inmates who pose a risk to themselves or to others. Inmates who pose such a risk must be promptly and appropriately segregated from the general inmate population until such time that they no longer pose a risk. Staff must have the ability to promptly segregate these inmates pending further review.

Individuals who may be classified as special management inmates include but are not limited to inmates who are:

In protective custody or court-requested segregation.

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#### Special Management Inmates

- Exhibiting mental health concerns.
- An escape threat.
- A serious violence threat.
- Known to have gang affiliation.
- A known management problem.
- A suicide risk.
- Exhibiting medical issues.
- Physically impaired.

#### 506.4 CIRCUMSTANCES REQUIRING IMMEDIATE SEGREGATION

Inmates will generally be assigned to segregation through the classification process. The Facility Commander or the Shift Supervisor has the authority to immediately place any inmate into segregation when it reasonably appears necessary to protect the inmate or others (See Disciplinary Separation Policy) (15 CCR 1081(d)).

Reasons that an inmate may be placed into segregation include the following:

- (a) The inmate requests protection or is under court-request protection, or the staff has determined that the inmate requires protection.
- (b) There is reason to believe the inmate poses a danger to him/herself or others.
- (c) The inmate poses an escape risk.
- (d) The inmate requires immediate mental health evaluation and medical housing is not reasonably available.
- (e) The inmate is charged with a disciplinary infraction and is awaiting a disciplinary hearing and in the judgment of the staff, the inmate may become disruptive or dangerous if left in general population.
- (f) The inmate is in the process of being transferred to a higher security classification.
- (g) Other circumstances where, in the judgment of the staff, the inmate may pose a threat to him/herself, others, or the security of the facility.

#### 506.4.1 REVIEW PROCESS

The Facility Commander shall be notified when any inmate is placed into segregation and shall be informed of the circumstances leading to the order to segregate.

- (a) The inmate is designated for administrative segregation.
- (b) The inmate remains segregated pending a disciplinary hearing.

#### **506.5 PROTECTIVE CUSTODY**

The deputy responsible for assigning classifications to incoming inmates shall clearly document the reason an inmate should be placed into protective custody.

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#### Special Management Inmates

Inmates who are in protective custody shall receive all services and programs that are available to inmates in general population and that are deemed a privilege.

#### 506.6 MAINTENANCE OF PROGRAMS AND SERVICES

Administrative segregation and protective custody shall consist of separate and secure housing but shall not involve any deprivation of privileges other than what is necessary to protect the inmates or staff (15 CCR 1053).

Inmates who are classified for housing in administrative segregation or protective custody shall, at a minimum, be allowed access to programs and services including but not limited to:

- Inmate telephones.
- Visitation.
- Educational programming appropriate to the inmate classification.
- Commissary services.
- Library and law library services.
- Social services.
- Faith-based guidance, counseling, and religious services.
- Recreation activities and exercise.
- Professional visits.

Nothing in this policy prohibits changing the delivery of programs or services to segregated inmates in order to provide for the safety and security of other inmates and staff.

#### **506.7 REVIEW OF STATUS**

The Facility Commander or appointed designee shall review the status of all inmates who are housed in segregation units and designated for administrative segregation. This review shall occur every 30 days. The review should include information about these inmates to determine whether their status in administrative segregation and is still warranted.

If other reasonable housing options exist that will provide for the safety of the inmate and the facility, the inmate should be moved out of segregation.

In reviewing an alternative housing decision for an inmate in protective custody, the safety of the inmate should receive the utmost consideration.

#### **506.8 HEALTH EVALUATION REQUIREMENTS**

After notification from staff that an inmate is being placed in segregation, the Shift Supervisor shall ensure that the following occurs:

(a) A qualified health care professional shall assess the inmate's health needs.

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#### Special Management Inmates

(b) If contraindications or special accommodations are noted, the qualified health care professional shall inform the Shift Supervisor and assist the appropriate plan for the inmate based on the safety needs of the facility and the medical needs of the inmate.

#### 506.8.1 HEALTH CONSIDERATIONS

Due to the possibility of self-inflicted injury and depression during periods of segregation, medical and mental health evaluations should by conducted by medical staff. If self-inflicted injuries are found a supervisor shall be notified as soon as practicable.

(a) Unless medical attention is needed more frequently, each inmate in segregation should receive a weekly visit by medical staff. A medical assessment should be documented in the inmate's medical file.

When an inmate is classified as a special management inmate due to the presence of a serious mental illness and is placed in a segregation setting, the staff shall document this in the inmate's file and notify the qualified health care professional. When an inmate is expected to remain in segregation for more than 30 days, the qualified health care professional shall be notified.

Where reasonably practicable, a qualified health care professional should provide screening for suicide risk during the week following admission to the segregation unit.

#### **506.9 SAFETY CHECKS**

A staff member shall conduct a safety check of all special management inmates, including those housed in administrative segregation or protective custody, at least twice per hour not to exceed 30 minutes on an irregular schedule. Inmates who are violent, have mental health problems, at risk of suicide, or demonstrate behavior that is easily identified as out of the ordinary in nature should be personally observed by the staff twice every half hour at irregular intervals.

Special management inmates shall receive increased monitoring to include, at a minimum:

- (a) A daily visit by the Facility Commander or the authorized designee.
- (b) Visits by members of the program staff, upon request.

All management, program staff, and qualified health care professional visits shall be documented in the appropriate records and logs and retained in accordance with established records retention schedules.

## **Civil Detainees**

#### **507.1 PURPOSE AND SCOPE**

This policy provides safeguards to ensure that persons held under a civil detainee are afforded appropriate standards of custody.

Nothing in this policy prevents application of discipline under the Inmate Discipline Policy.

#### 507.1.1 DEFINITIONS

Definitions related to this policy include:

Civil detainee - Any person in custody held for a reason other than for criminal matters.

**Enhanced security concern** - A status applicable to a civil detainee that indicates the person poses an enhanced threat to staff or others due to the person's past criminal behavior, criminal sophistication or other actions.

#### 507.2 POLICY

It is the policy of the Tulare County Sheriff's Office that any restrictions placed on civil detainees must be for legitimate, non-punitive purposes that cannot be reasonably accomplished through less restrictive means.

#### **507.3 LESS RESTRICTIVE CONDITIONS**

The Facility Commander or the authorized designee is responsible for monitoring the accommodations of civil detainees and taking steps to keep those accommodations above the level of non-sentenced, general population inmates. The Facility Commander or the authorized designee should institute alternative and less harsh confinement methods for civil detainees, while still maintaining security and effective management of the facility.

#### 507.4 SCREENING

Civil detainees should undergo the same screening process as inmates, including attention to whether the person poses an enhanced security concern. Any reason for departure from the standard treatment of civil detainees as defined in this policy or in related procedures should be documented with specific recommendations included addressing the risks.

The Facility Commander or the authorized designee should review the screening documents to ensure any enhanced safety concerns are appropriately addressed and part of the detainee's record.

#### 507.5 CONDITIONS OF CONFINEMENT IN HOUSING

All civil detainees should be housed separately from other inmates.

#### 507.5.1 CLOTHING

Civil detainees should be provided more clothing exchanges than non-sentenced inmates receive and be provided an extra set of undergarments and socks that they may retain in their housing area.

Custody Custody

### Civil Detainees

#### 507.5.2 RECREATION

Civil detainees should receive more recreation time (indoor and outdoor) than non-sentenced inmates in the general population receive. The recreation may be increased by the Facility Commander as resources allow.

#### 507.5.3 **VISITING**

Civil detainees should be allowed to receive more visitation than non-sentenced inmates in the general population receive.

#### 507.5.4 MENTAL HEALTH CARE

Civil detainees who are detained due to issues related to their mental health should be provided with:

- (a) An interview with the civil detainee's established mental health care provider and/or a review of the civil detainee's records by the assigned office mental health professional.
- (b) A review of the reasonable options available to address the civil detainee's continued mental health care. The office's mental health professional and the Facility Commander or the authorized designee should identify benefits or restrictions that may advance the purpose of the civil detainee's confinement. Examples include:
  - 1. Restricting or providing special access to books, periodicals or Internet sites as part of the civil detainee's treatment.
  - 2. Providing special access to mental health care professionals or other visitors.
- (c) A conference with the civil detainee's mental health care provider prior to the decision to discipline the civil detainee.

### 507.6 SEARCHES

Strip searches of civil detainees must be justified by probable cause, unless the Facility Commander specifies otherwise based upon an enhanced security concern. The specified concern shall be documented in the civil detainee's record. Modified strip searches may be conducted when a civil detainee has entered an environment where contraband or weapons may be accessed (see the Searches Policy).

Absent an enhanced security concern or reasonable suspicion where contraband may be found, there should be no unscheduled cell searches of a civil detainee's personal effects or a cell search when the civil detainee is not present. Non-invasive cell inspections for security purposes may still be conducted.

## **Management of Weapons and Control Devices**

### **509.1 PURPOSE AND SCOPE**

This policy will address the availability and control of weapons.

### 509.2 POLICY

It is the policy of the Tulare County Sheriff's Office that the presence and the use of weapons in the detention facility will be tightly controlled and supervised to reduce the potential for injury. Staff will only carry and use those weapons for which they have been trained in and are qualified to use.

### 509.3 FIREARMS

With the exception described below, armed personnel shall secure all firearms in gun lockers located at the entry points prior to entering the secure perimeter. Firearms shall not be stored inside the secure perimeter at any time.

Firearms shall only be allowed in the secure perimeter of the facility when it is necessary to protect the safety and security of staff, inmates, contractors, volunteers or the public.

Firearms shall only be allowed inside the secure perimeter with the approval of the Sheriff or authorized designee and under the direct supervision of a supervisor(PC 4573).

### 509.4 OTHER WEAPONS, TOOLS AND CHEMICAL AGENTS

Office-approved weapons, tools and chemical agents, including, but not limited to, batons, TASER devices, impact weapons, weapon-fired projectiles, stinger grenades and similar devices, may be possessed and used only by custody staff members who have received office-authorized training and are qualified to use them.

Office-approved weapons, tools and chemical agents shall only be allowed inside the secure perimeter with the approval of the Facility Commander or the authorized designee.

### 509.5 STORAGE OF WEAPONS, CHEMICAL AGENTS AND CONTROL DEVICES

The armory shall be located in a secure and readily accessible repository outside of inmate housing and activity areas. It shall be secured at all times. Access to the armory shall be limited to the Facility Commander and the Shift Supervisor or the authorized designee. Only personnel who have received office-approved training in the maintenance of the stored equipment and who have been designated by the Facility Commander are authorized to be inside the armory.

The following equipment shall be stored and secured in the armory:

- (a) All office-approved weapons
- (b) All office-approved control devices and associated supplies, with the exception of the TASER device
- (c) All security equipment, such as helmets, face shields, stab or protective vests and handheld shields

Custody Custody

### Management of Weapons and Control Devices

### (d) All office-approved chemical agents

Explosive materials will be stored in a safe approved by the Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF) and in compliance with 27 CFR 555.201 et seq.

### 509.5.1 WEAPONS LOCKER

There should be a secure weapons locker located outside of the secure perimeter of the detention facility.

### 509.5.2 INVENTORY

The Facility Commander should designate one or more properly trained staff to be responsible for maintaining all weapons, chemical agents and control devices in a safe and secure manner, and to inventory and report the condition and availability of the facility's weapons and control devices on a monthly basis.

To facilitate the inventory, all weapons, chemical agents and control devices shall be stored in assigned locations inside the armory. A log sheet shall be maintained within the armory at all times, detailing the exact location of each item. The removal of any weapon, chemical agent or control device shall be documented on the log sheet, showing who removed the item, the date and time of removal and the reason for removal. An additional log entry shall be made indicating the date and time of the item's return.

The Shift Supervisor and the Facility Commander shall be immediately notified in the event that any weapon, chemical agent or control device is determined to be missing. An immediate and thorough search of the facility shall take place in order to locate the item.

### 509.5.3 REVIEW, INSPECTION AND APPROVAL

Every control device and chemical agent will be periodically inspected for serviceability and expiration dates by the Rangemaster or the instructor designated to train on the use of a particular control device or chemical agent. The Rangemaster or the designated instructor is responsible to ensure replacement of outdated or unserviceable items.

## **Full Body Scanner**

### 510.1 SCANNING INMATES AND PROPERTY

- 1. Inmate searches are necessary to ensure the safety of staff, inmates, and visitors. Body scanning, strip, and visual body cavity searches shall be conducted in a reasonable manner, balancing the security interests of the detention facility against the invasion of an inmate's personal rights.
- 2. The introduction of contraband, intoxicants, or weapons into the jail poses a serious risk to the safety and security of staff, inmates, volunteers, contractors, and the public. Restricting the flow of contraband into the jail can only be achieved by thorough searches of inmates and their environment.
- 3. Any person that is arrested and taken into custody, that person may be subjected to a bodyscan search in order to discover and retrieve concealed weapons and contraband substances prior to being placed in a booking cell.
- 4. The body scanner may be used to scan any item belonging to an arrestee or inmate who is booked within the facility. Scanning of a new arrestee's property may be conducted when articulable facts exist to believe the contents of the property may pose a risk to the safety or security of the facility. Use of the body scanner to inspect the contents of packages or articles not belonging to an arrestee, or items that will not be stored inside the jail property room will not be conducted absent clear legal authority to do so. The purpose of the body scanner is to prevent contraband from entering the facility, and to detect weapons, drugs and contraband possessed by inmates within the facility or hidden within their property.
- 5. Any staff member within sight of the visual display of a body scanner depicting the body during a scan shall be of the same sex as the person being scanned, except for physicians or licensed medical personnel.

### 510.2 PACEMAKERS, MEDICAL DEVICES, AND RADIATION THERAPY

There is no FDA published material indicating the use of the body scanner will adversely affect implanted medical devices, such as a pacemeker. A person who claims to have such a device should first be examined by medical staff prior to a scan. However, the presence of such a device should not preclude the use of the body scanner, unless other circumstance known to medical or correctional staff indicate otherwise.

Any inmate receiving any type of radiation treatment will not be body scanned. Any inmate unable to be scanned due to medical concerns must be documented in ADSI.

### **510.3 PREGNANT INMATES**

1. Prior to scanning an arrestee or inmate, the operator performing the scan shall ask the arrestee or inmate if they are pregnant.

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### Full Body Scanner

- 2. The body scan device shall not be used to scan arrestees or inmates who are known to be pregnant or think they could be pregnant under any circumstances. A statement by the arrested person or inmate that she is pregnant is sufficient for correctional deputies until verification can be made.
- 3. If pregnancy is not obvious and there is suspicion the inmate is alleging pregnancy to avoid being scanned the pregnancy can be verified. Pregnancy tests will be conducted by medical staff.

This test normally occurs before the female is housed. If medical staff advises an arrestee claiming to be pregnant has tested negative (not pregnant), the arrestee may be scanned with the body scan device. This will only occur if the negative test result is revealed before the arrestee is housed.

#### 510.4 INTOXICATED ARRESTEES

Care should be exercised when scanning persons who demonstrate an acute level of intoxication to such an extent that standing or remaining still for the duration of the scan might not be possible. If the person demonstrates objective symptoms of intoxication to an extent that his or her safety may be compromised by the moving scanner platform, then the scan should be delayed to a later time, or deferred completely if the person will be released when sober.

### 510.5 INMATES OR ARRESTEES WITH DISABILITIES

The body scanner will not be used on any inmate who has any disibility preventing him or her from standing. The body scanner will not be used on anyone confined to a wheelchair. Any inmate able to stand with the assistance of a cane or crutches may be scanned, if he or she can remain stationary for 10 seconds and has the ability to grab the side handrail if needed for balance.

### 510.6 NEW ARRESTS

New arrestees will be scanned using the following procedures:

- 1. A thorough pat-down search will be completed at the time each arrestee is received in Pre-Trial Holding.
- 2. Individuals arrested and booked on any charge who have an expectation of immediate release on a written promise to appear or by posting bail, regardless of the nature of the offense, shall not be subject to a body scan or strip and visual body cavity search unless a peace officer has determined there is reasonable suspicion, based on specific and articulable facts, to believe the inmate is concealing a weapon or contraband and that a bodyscan and/or strip search and visual body cavity search will result in the discovery of the weapon or contrband.
- 3. The body scanand/or strip search authorization (on fresh arrestees) shall only be given after reasonable suspicion has been determined by a peace officer. A Strip Search Authorization form shall be completed by the requesting agency prior to thebody scan and/or strip and visual body cavity search. The shift sergeqant must authorize the body scan search. The arrestee will be subject to a pat-down search followed by removal of all property from his or her clothing.
- 4. Following removal of all property, the arestee will escorted to the body scanner for processing.
- 5. The body scan will be documented in ADSI on all fresh scanned arestees.

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### Full Body Scanner

6. The intake process will continue if no weapons or contraband is detected.

#### 510.7 DETECTION OF CONTRABAND FOR NEW ARRESTEES

- 1. If the scanned image clearly shows a possible weapon or suspected drug, appropriate officer safety practices will be utilized and the arrestee will be secured with restraints and placed under constant supervision.
- 2. The sergeant will be advised of the detection.
- 3. The arrestee's clothing will be searched in the approximate area where the object appeared to be located. Search policy will be followed. Refer to Search Policy 516.

### 510.8 REFUSAL BY ARRESTEES OR COMBATIVE INMATES

- 1. Due to the nature of the scanning process, scanning a combative arrestee or inmate will not produce a usable image. Arrestees or inmates who refuse to cooperate with the scanning process will be, at a minimum, placed into a cell where his or her activities can be monitored. If the arrestee's charges, history or behavior would otherwise qualify him or her for a strip search, the arrestee will be strip searched and given jail clothing while housed in the cell.
- 2. If the arrestee would not otherwise be qualified for a strip search, his or her refusal to submit to a scan may be considered with other factors such as behavior, symptoms of drug use or observations that would seem to indicate an attempt to conceal a weapon or drugs. Refer to Search Policy 516.
- 3. The arrestee may be accepted into custody and booked without being body scanned, but will remain in a cell until he or she has been scanned or a strip search conducted for weapons, drugs or contraband. Refer to Search Policy 516.
- 4. If an inmate is housed in a cell for observation due to a refusal to submit to a scan, medical staff will be notified and a Close Watch Assessment Log will be started.

#### 510.9 PRESERVATION OF IMAGES

In the event weapons, drugs or contraband items are detected in a body scan, the image will be flagged as a "positive" and noted in ADSI. The sergeant will be notified of the detection and appropriate steps will be taken to preserve the image. Only selected sergeants and IT users will be allowed to download images and add users to the system.

- 1. When contraband is recovered or detected as a result of the body scan, an Incident Report will be generated, if no criminal report is written.
- 2. All body scans will be documented using the inmate's name and an identification number. If no identification number available, the inmate' name and date of birth (example 01231984, two digits for month and day and four digits for year). All scans will be documented in ADSI.

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### Full Body Scanner

### 510.10 INMATE PROPERTY

- 1. Inmates have traditionally used a variety of methods to conceal weapons, drugs and contraband. Methods have involved concealing prohibited items inside inmate commissary containers, issued bedding and within envelopes used for legal materials.
- 2. Any property located in inmate housing may be scanned at any time, and for any reason.
- 3. Inmate property located in a jail property bag may be scanned when staff has information to believe articles within the property bag may contain illegal property, weapons, drugs or contraband that if not recovered from the bag would pose a risk to this facility, a risk to another institution if the inmate is transferred, or a risk to the general safety of the public if the inmate is released.

### 510.11 RADIATION SAFETY AND PROTECTION

The Tulare County Sheriff's Department is dedicated to all components of workplace safety. This written program establishes procedures to safeguard the health of Sheriff's employees, volunteers, visitors, and inmates in the vicinity of a body scan device and to ensure compliance with the applicable federal and state regulations.

This policy is intended to provide an effective Radiation Safety and Protection Program which will reduce the risk of exposure related to the operation of x-ray based body scan devices. All personnel operating the full body scan device will ensure that radiation safety procedures and guidelines are followed to ensure the safe operation of the unit.

### DEFINITION(S):

- **Body Scan:** X-ray technology used to produce an image revealing the presence of contraband concealed on or inside of a subject.
- Body Scan Device: A stationary system for obtaining full height radiographic images of a person to detect any kind of weapons, explosives, drugs, and precious stones and metals either concealed under the clothes, swallowed, or hidden in anatomical cavities of the human body (for example, drugs in capsules) without causing harm to the scanned person. (i.e., Canon RadPRO Securpass System)
- X-Ray: Also referred to as x-radiation, is a form of electromagnetic radiation similar to light but of shorter wavelength and capable of penetrating solids and of ionizing gases.
- Radiation: Radiation is the process in which energetic particles or waves travel through a medium or space. There are two distinct types of radiation; ionizing and non-ionizing. X-radiation is an ionizing radiation.
- Radiation Survey: Measurement of the X-radiation equivalent dose rate at the external surfaces of the body scan device, the personnel work station(s), the boundaries of the working zone, and in adjacent rooms if applicable.
- **Exposure:** A term defining the amount of ionizing radiation that strikes living or inanimate material. The Federal Drug Administration (FDA) definition is found at 21 CFR 1020.40(b)(5).
- **Dose:** The quantity of radiation or energy absorbed.

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### Full Body Scanner

RSO: Radiation Safety Officer.

The following provisions shall be adhered to by all staff:

- Upon becoming aware of any safety issues related to a body scan device, staff shall immediately report their concerns to their supervisor, who will forward them to the compliance sergeant. The compliance sergeant will notify the Radiation Safety Officer.
- Operators of a body scan device shall use it in a responsible manner, in accordance with this policy, and in accordance with the manufacturer's operating instructions.
- The operator's manual for the body scan device shall not be removed from the officer's work station.
- No employee shall operate a body scan device without first successfully completing proper training.
- All female employees trained to operate the Full Body Scanner will not operate the Full Body Scanning equipment if you are pregnant or think you might be pregnant. Any other changes in your regular duty assignments will be based on your doctor's recommendations or orders. All employees or any female who is pregnant or think they might be pregnant will not enter the Full Body Scanning Room while the X-Ray equipment is operating.
- During operation of the body scan device, unauthorized persons (other than service personnel) are not allowed within the working zone, approximately 2 meters (Approximately 6.5 feet) out from each side of the base of the unit. The working zone shall be clearly marked on the floor around the unit. The device shall be considered operational while the red light on the unit is on.
- Pregnant inmates shall not be scanned with a body scan device.

Each body scan device shall be marked with the following symbols:



Attention! Refer to the operation documents!



Caution! Dangerous voltage.



Caution! Radiation danger.

 All part removal and installation of the body scan device components shall be completed by a service engineer of the Virtual Imaging representative company and/or additional service contractors.

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### Full Body Scanner

- Body scan device operator training consists of the following subject matter:
- Design of the Scanner: purpose of the basic components, principles of the Scanner operation.
- Radiation and overall Scanner operation safety principles. History of X-ray, nature of X-rays, the X-ray Tube, Penetration and Absorption, Security X-ray Machines, X-ray scanners Features, Prohibited Items, Limitations of X-ray, Operating Procedures, and Health and Safety.
- · Control of the Scanner: switching on, testing, data input, scanning and switching off.
- · Principles of investigation of digital images: analysis (determination) of objects on the human body, using the mathematical filters, scaling, etc.
- Malfunction diagnostics.
- · Practice and knowledge testing.

Procedure A: Duties of the Radiation Safety Officer

The Compliance Lieutenant or Designee shall serve as the Sheriff's Office Radiation Safety Officer (RSO).

The Radiation Safety Officer (RSO) will:

- Maintain the Radiation Safety and Protection Program and coordinate the safe operation of x-ray based body scan devices in compliance with applicable State and Federal regulations.
- Ensure all new or relocated radiation sourcing equipment operated by the Sheriff's Department within the Detention Division is registered with the Radiologic Health Branch of the California Department of Public Health.
- Ensure all radiation sourcing equipment operated by the Sheriff's Department within the Detention Division is maintained and serviced in compliance with applicable State and Federal requirements.
- Arrange and schedule any needed repair or service for a body scan device upon being advised of any damage or malfunction.
- Ensure that the annual fee for each Body Scan Device is paid to the Radiologic Health Branch of the California Department of Public Health prior to the anniversary of the effective date of the license.

Note: <u>Title 17 of the California Code of Regulations</u>, <u>Section 30231</u>, requires theabove payment and mandates that failure to do so requires all usage of the BodyScan Device to immediately cease until such time that the fee and any late feeshave been paid.

• Retain any survey, service, inspection, and instrument calibration records for the lifetime of each body scan device.

### Procedure B: Duties of Compliance Sergeant

In the facility containing the body scan device, the compliance sergeant or designee, with the assistance and coordination of the Radiation Safety Officer, will:

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### Full Body Scanner

- Report new x-ray emitting equipment to the RSO prior to its arrival at the facility.
- Report any movement or relocation of any x-ray emitting equipment to the RSO.
- Receive authorization from the RSO prior to allowing staff to operate any new x- ray emitting equipment.
- Notify the RSO upon becoming aware of any maintenance issues related to a body scan device.
- Notify the RSO immediately upon becoming aware of any safety issues related to a body scan device.

Procedure C: Canon RadPRO Securpass Body Scan Device Safety Features Numerous safety features are built into the body scan device, which help minimize the exposure doses to which the personnel and persons being scanned could be exposed:

- X-ray generator enclosed in the X-ray protection case.
- System of slit diaphragms in the X-ray protection case, which provides a narrow fan-shaped X-radiation beam.
- X-ray protection shutter shutting off output of the X-radiation from the generator.
- Permanently connected additional X-ray filter.
- High-sensitivity digital X-ray converter.
- Built-in dosimeter for monitoring the stability of the operation of the X-ray generator.
- The Stop button (Emergency Stop), a red mushroom-shaped button mounted at the operators station, stops X-radiation output from the generator and halts movement of the platform.
- Red signal lanterns (on the device and at the operator's station), when ON indicates the generation of X-radiation and the beginning of platform movement.
- In case of Scanner malfunction, the X-ray protection shutter shuts off X-radiation output from the generator.
- If the X-ray protection shutter fails, high voltage to the X-ray tube shuts off.

The SECURPASS software tests the Scanner when it is turned ON and during the scanning process. Error messages are displayed on the operator's monitor screen.

Note: When the scanning cycle completes, the X-ray protection shutter shuts off the output of X-radiation from the generator.

### Directive C-1: Failure of Safety Features / Vendor Repair

The above safety features are required to be functioning to operate the system. Should any of these features become inoperable, the operator of the body scan device will:

- Shut down the body scan device. Immediately notify on duty sergeant.
- The supervisor will:

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- Notify the compliance sergeant or designee. Place an out of service sign on the door entering the body scanning room and on the body scanner. Remove body scanner keys. Note date and time body scanner when body scanner taken out of service in intake Red Book. Document again when body scanner is back in service.
- Notify the Radiation Safety Officer, who will contact a contracted vendor to make any repairs as necessary.

### Note: Facility staff shall not attempt any repair on a body scan device.

Procedure D: Annual Servicing and Survey of Body Scan Devices

To ensure that Canon/RadPRO Securpass x-ray based body scan devices are operating within manufacturer specifications, the following calibration, maintenance, service, and survey shall be performed annually by a service engineer of the Virtual Imaging representative company and/or additional service contractors.

### Calibration:

The x-ray system instruments will be calibrated to manufacturer guidelines which shall comply with State and Federal standards.

• The body scan device shall be calibrated during each annual service, survey, and after any other servicing.

The following components shall be calibrated:

- · The X-ray digital converter.
- · Scanner operation modes.

### Inspections and Checks:

- Inspecting the exterior of the scanner, removing the dust and contaminants from the movable platform mechanisms and components, adjusting and restoring mechanical connections.
- Checking the condition of the system's interconnections, insulation of the main wires and high-voltage cables, and the resistance of the earth circuits.
- Opening the cases, inspecting the printed-circuit boards of the Scanner electronic components, rinsing the contacts of the boards' plugs (with alcohol), assembling and sealing of cases.
- Checking the serviceability of the operator's workstation personal computer.
- Checking the operation of the movable platform mechanisms and beam-limiting device shutter drive.
- Checking the Scanner operation.

#### Servicing:

- Tuning and testing the network protocols.
- Adjusting the Scanner.
- Controlling the Scanner resolution.

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- Controlling the radiation dose rate at the personnel's workplaces.
- Servicing the X-ray generator.
- Servicing the operator's workstation personal computer.

### **Annual Radiation Survey**

A radiation survey that checks to ensure no radiation exposure to operators shall be performed on each body scan device:

- Upon installation of a new unit;
- At intervals not exceeding one year;
- Upon relocation of an existing unit;
- Immediately following any service that could potentially increase the systems output.

Procedure E: Radiation Doses and Dosimetry Program Safety of the Persons Scanned The radiation dose, to which a scanned inmate or arrestee is exposed per scanning session is:

- 1. Weight Approximately 75-175 lbs.: .25 μSv and not to exceed 1000 scans per year.
- 2. Weight approximately 175-275 lbs: .50 µSv and not to exceed 500 scans per year.
- 3. Weight approximately 275-400 lbs: .75 µSv, and not to exceed 325 scans per year.

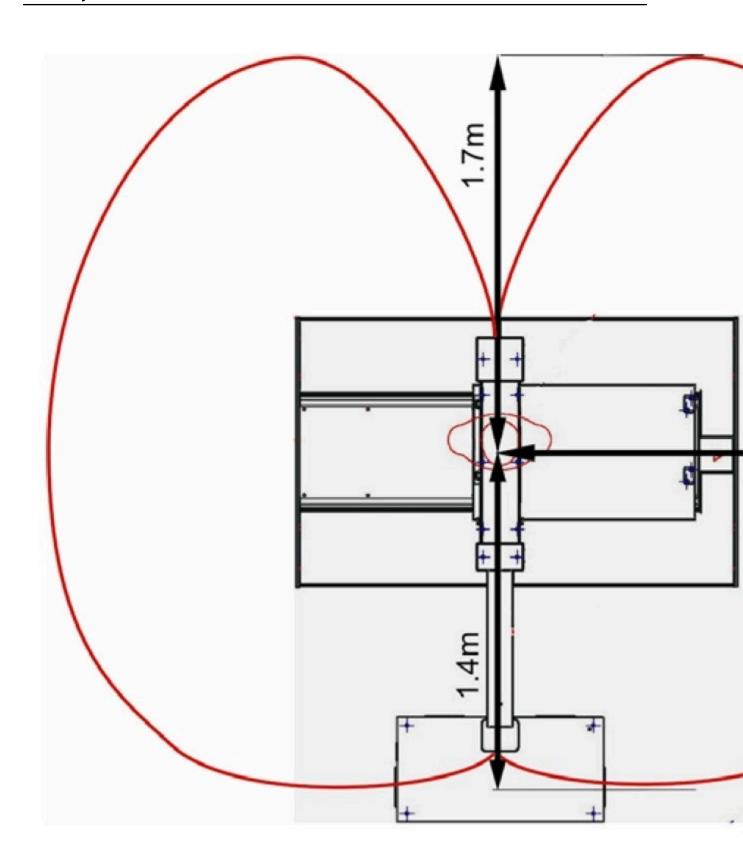
An inmate will not be scanned more than twice in a 24 hour period.

### Safety for Bystanders

For incidental or occasional bystanders, the level of exposure per day and year is negligibly low. However, based on vendor recommendations, the scanning/working zone, approximately 2 meters (6.5 feet) out from each side of the base of the scanner, shall be clearly marked on the floor around the unit.

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### Full Body Scanner

### Dose Per Screening

### No single scan on anyone will exceed 0.75 µSv.

### Procedure F: Daily System Check

<u>During each shift, any staff member assigned to operate a body scan device willconduct a system check of the device prior to use.</u>

### System Check

The assigned operator of a body scan device for <u>each shift</u> will complete an initial status equipment and safety check prior to operating the device.

Staff completing a status equipment and safety check will:

- Inspect the device for obvious damage;
- Ensure all access panels are securely in place;
- Ensure all accessible (external) cable connections are secure;
- If the system is not already on, turn it on using the key switch (clockwise);
- Verify that the "POWER ON" light is lighted;
- Record the check in the post log book.

### If any damage or malfunction is found during a system check, staff will:

- Power the unit off;
- Notify their supervisor who will notify the Facility Commander; The Facility Commander will:
- Advise the RSO that unit may need service or repair;
- Ensure that unit is not operated until appropriate service or repairs have been completed;
- If it is believed that the damage or malfunction may compromise the safety of any persons in the immediate vicinity of the device, the emergency procedures outlined in Procedure G will be followed.

### Procedure G: Emergency Procedures

Should an emergency situation occur, the body scan device shall be powered off and the appropriate personnel shall be notified in accordance with Procedure F.

Note: If the control panel is not accessible or functioning, the main power breaker for the system must be shut off and/or the unit should be unplugged immediately.

If a situation occurs in which staff suspect possible exposure to excessive or dangerous levels of radiation while operating the body scan device, the operator will immediately notify the shift supervisor. The shift supervisor will assess the situation. If the shift supervisor determines there is a risk of exposure, he or she will immediately contact the facility manager and the RSO.

If it is suspected that there was a potential exposure to excessive or dangerous levels of radiation, the facility manager will:

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• Ensure that the use of the body scan device is immediately shut down.

### The RSO will:

• Schedule any needed service and place an out of service sign on the door entering the body scanning room and one on the body scanner. Remove body scanner keys.

The RSO or on duty sergeant will note the date and time the body scanner was taken out of service and again when the body scanner is fully operational.

• Only clear the body scan device to return to normal operations if it is determined to be safe to do so by a service engineer of the Virtual Imaging representative company and/or other qualified service contractors:

### Classification

### 511.1 PURPOSE AND SCOPE

This policy describes the Tulare County Sheriff's Office's classification process, which is designed to identify security and health issues so that incarcerated persons may be held and housed in such a way as to foster a safe and secure facility (15 CCR 1050).

### 511.1.1 DEFINITIONS

Definitions related to this policy include:

Civil detainee - Any person held in custody for a reason other than for criminal matters.

### **511.2 POLICY**

It is the policy of this Office to process all arrestees and detainees entering this facility to determine whether they will be housed in the facility.

Anyone housed in the facility shall be properly classified according to security and health risks so that appropriate supervision, temporary holding, and housing assignments may be made.

### 511.3 RELEASE AT OR FOLLOWING CLASSIFICATION

Individuals arrested for intoxication only, with no further proceedings anticipated, should be released as soon as custodial staff reasonably determine they are no longer impaired to the extent that they cannot care for their own safety.

Misdemeanor incarcerated persons who meet criterion established by local courts may be cited and released on O.R. by the Sheriff or the authorized designee. Incarcerated persons who meet the established criteria will be interviewed by classification personnel and a determination will be made whether there is good cause to release the incarcerated person on O.R. (15 CCR 1029(a) (5)).

### 511.4 CLASSIFICATION PLAN

The Facility Commander or the authorized designee should create and maintain a classification plan to guide staff in the processing of individuals brought into the facility.

The plan should include an initial screening process, as well as a process for determining appropriate housing assignments (28 CFR 115.42). The plan should include use of an objective screening instrument, procedures for making decisions about classification and housing assignments, intake and housing forms, and a process to ensure that all classification and housing records are maintained in each incarcerated person's permanent file. The plan should include an evaluation of the following criteria (15 CCR 1050):

- Age
- Gender identity
- Current charges

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- Behavior during arrest and intake process
- Criminal and incarceration history
- Emotional and mental condition
- Potential risk of safety to others or self
- Special management status
- Special needs assessment for vulnerable incarcerated persons
- Behavioral or physical limitations or disabilities and physical/mental health needs
- Medical condition
- Level of sobriety at booking
- Suicidal ideation
- Escape history and degree of escape risk
- Prior assaultive or violent behavior
- The need to be separated from other classifications of incarcerated persons (e.g., gang affiliation, confidential informant, former law enforcement, sexual orientation)
- Prior convictions for sex offenses against an adult or child
- Whether the incarcerated person is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming (see the Prison Rape Elimination Act Policy for transgender and intersex definitions)
- Previous sexual victimization
- The incarcerated person's own perceptions of vulnerability
- Whether the incarcerated person is detained solely for civil immigration purposes
- Whether the incarcerated person is a foreign national and, if so, from what country (see the Foreign Nationals and Diplomats Policy)
- Prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the Office (28 CFR 115.41)
- Any other criteria as deemed appropriate by the Sheriff or the authorized designee
- Any other requirements for a classification plan under 15 CCR 1050

The plan should include a methodology for evaluating the classification process and a periodic review for the purpose of continuous quality improvement.

Information obtained in response to screening questions shall be considered confidential and shall only be made available to those who have a legitimate need to know (28 CFR 115.41).

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#### 511.4.1 INCARCERATED PERSON RESPONSE TO SCREENING

Incarcerated persons may not be compelled by threat of discipline to provide information or answers regarding (28 CFR 115.41):

- (a) Whether the incarcerated person has a mental, physical, or developmental disability.
- (b) Whether the incarcerated person is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming.
- (c) Whether the incarcerated person has previously experienced sexual victimization.
- (d) The incarcerated person's own perception of vulnerability.

### 511.5 INITIAL CLASSIFICATION

The initial classification process is intended to identify predatory, violent, and at-risk incarcerated persons. It should occur early in the intake process to allow for appropriate supervision while an incarcerated person is being temporarily held in this facility and until a decision is made to place the individual into a more permanent housing assignment.

Incarcerated persons should be interviewed by an intake deputy as soon as possible in the booking process. The intake deputy shall complete the initial classification form. The initial classification form should include a place for the intake deputy to make a housing recommendation. This recommendation should be based on the initial classification form, an assessment of the incarcerated person's condition, and the incarcerated person's interview.

The initial classification form shall be placed in the incarcerated person's file and provided to the classification deputy, who will, within the limits of available resources, determine the appropriate temporary housing location.

### 511.6 CLASSIFICATION UPON HOUSING

Once it has been determined that the person arrested will not be released from custody on bail or O.R., a more in-depth classification of the incarcerated person will be conducted as soon as possible but no later than 24 hours after the person's arrival at the facility, after which the person will be moved to more permanent housing.

### **511.6.1 INTERVIEW**

The comprehensive classification process begins with a review of any initial classification information obtained during the reception and booking process, as well as an interview by the classification deputy. The review of initial classification documents and the questions, answers and observations from the inmate's interview will be documented.

Individualized determinations shall be made about how to ensure the safety of each inmate (28 CFR 115.42; 15 CCR 1050).

### 511.7 REVIEWS AND APPEALS

Once an incarcerated person is classified and housed, the person may appeal the decision of the classification deputy. The appeal process shall begin at the first-line supervisor level. The decision

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by the supervisor may be appealed to the Facility Commander or the authorized designee. The decision by the Facility Commander or the authorized designee is final.

#### 511.7.1 STAFF REQUESTED REVIEW

At any point during an incarcerated person's incarceration, a staff member may request a review of the incarcerated person's classification. The reason for the review, the review itself, and the outcome of the review shall be documented in the incarcerated person's permanent file. Nothing in this section shall prohibit staff from immediately moving an incarcerated person to another location in the facility based on exigent circumstances. Under such circumstances, the staff member moving the incarcerated person must immediately document the action and notify the classification deputy.

### 511.7.2 INCARCERATED PERSON REQUESTED REVIEW

Incarcerated persons may request a review of their classification plan no more often than 30 days from their last review (15 CCR 1050).

### 511.8 HOUSING ASSIGNMENTS

Incarcerated persons should be housed based upon the following criteria:

- Classification level
- Age
- Incarcerated persons will be housed in separate units based on gender
- Legal status (e.g., pretrial, sentenced)
- Need for protection or separation
- Criminal sophistication
- Special problems or needs
- Behavior
- Any other criteria identified by the Facility Commander

### 511.8.1 SEPARATION

Incarcerated persons shall be housed to ensure visual and physical separation based on gender.

Civil detainees shall be housed separately from pretrial and sentenced incarcerated persons.

#### 511.9 SINGLE-OCCUPANCY CELLS

Single-occupancy cells may be used to house the following categories of incarcerated persons:

- Maximum security
- Administrative separation
- Medical condition or disabilities (upon consultation with medical staff and the availability of medical beds)

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- Mental condition (upon consultation with mental health staff and the availability of mental health beds)
- Sexual predators
- Any incarcerated person with an elevated risk of being taken advantage of, being mistreated, or becoming a victim of sexual abuse or harassment
- Any other condition or status for single-occupancy housing

The classification supervisor shall notify the Facility Commander or the authorized designee when single-occupancy cells are not available for housing the above described incarcerated persons. In such cases, a risk assessment shall be used to identify incarcerated persons in the above categories who may be safely housed together.

### 511.10 PRISON RAPE ELIMINATION ACT (PREA) CONSIDERATIONS

Housing, bed, work, and program assignments should be made to separate incarcerated persons at high risk of being sexually victimized from those at high risk of being sexually abusive (28 CFR 115.42). Incarcerated persons identified as being at high risk for sexually aggressive behavior will be monitored and housed in an area that will minimize the risk to other incarcerated persons and staff. All incarcerated persons identified as being at risk of victimization shall be monitored and housed in an area to minimize the risk to their safety. However, incarcerated persons at high risk for sexual victimization shall not be placed in involuntary protective custody unless an assessment of all available alternatives has been made and it has been determined that there is no available alternative means of separation from likely abusers (28 CFR 115.43; 28 CFR 115.68).

Housing and program assignments of a transgender or an intersex incarcerated person shall include individualized consideration for the incarcerated person's health and safety and any related supervisory, management, or facility security concerns (15 CCR 1050). A transgender or an intersex incarcerated person's views with respect to their own safety shall be given serious consideration.

Lesbian, gay, bisexual, transgender, or intersex incarcerated persons shall not be placed in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is pursuant to a consent decree, legal settlement, or legal judgment (28 CFR 115.42).

### 511.11 EDUCATION, WORK, AND OTHER RELEASE

Unless a person is incarcerated for an offense for which release is prohibited by law or otherwise prohibited by court order, an incarcerated person in the detention facility may be released for a period reasonable and necessary for the following reasons:

- To seek or maintain employment
- To attend education classes
- To obtain medical treatment
- Any other reasonable purpose as determined by the Facility Commander or the authorized designee

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Education and work-release incarcerated persons who leave the secure perimeter of the detention facility to complete programs should be housed separately from incarcerated persons in general population.

There should be no contact between the incarcerated persons in general population and those authorized for education, work, or other release. This is to minimize the risk of introducing contraband into the detention facility and to maintain facility security.

# **Conducted Energy Device**

### 512.1 PURPOSE AND SCOPE

This policy provides guidelines for the issuance and use of the TASER® device.

### Refer to Operational Policy 305, Conducted Energy Device

### **512.2 POLICY**

It is the policy of the Tulare County Sheriff's Office to use the TASER device to control violent or potentially violent inmates. The appropriate use of such a device should result in fewer serious injuries to staff and inmates.

### **Control of Inmate Movement**

### 513.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process for the safe and secure movement of inmates between areas within the facility and transportation from the facility to court, medical appointments, or other jurisdictions.

### **513.2 POLICY**

The staff should be vigilant in the control and movement of inmates between areas within the facility and when transporting inmates outside the secure confines of the facility (15 CCR 1029(a) (6)). Control may be by direct or indirect visual observation. All staff should consider all inmate movement as a high-risk activity. The staff should be aware of their surroundings at all times and take necessary steps to prevent the possession and exchange of contraband.

#### 513.3 MOVEMENT OF INMATES

Movement of one or more inmates in the facility should be done in an orderly manner with inmates walking in a single-file line. Staff members should have situational awareness during the movement of inmates and should consider the design of the facility, areas of poor visibility, and the presence of other inmates being moved. The staff should avoid areas where inmates may have access to contraband items.

### 513.4 MOVEMENT OF SPECIAL MANAGEMENT INMATES

Inmates should be restrained during movement based upon individual security classification, with higher risk inmates in handcuffs, waist chains, and leg irons. An exception to this procedure is when an inmate has a physical disability where restraint devices may cause serious injury. Pregnant inmates shall be moved in accordance with the Use of Restraints Policy.

Whenever a high-security inmate is not able to be restrained, the staff should compensate by utilizing wheelchairs and should secure the inmate to the chair. It may also be necessary to increase the number of staff present to ensure the safe movement of high-security inmates.

The staff should be watchful in and around passageways and ensure that sallyport doors are secured to prevent escape.

## **Force Options**

### 514.1 PURPOSE AND SCOPE

This policy provides guidelines on the reasonable use of force options. While there is no way to specify the exact amount or type of reasonable force to be applied in any situation, every member of this office is expected to use these guidelines to make such decisions in a professional, impartial, and reasonable manner (Government Code § 7286; 15 CCR 1029(a)(3)).

In addition to those methods, techniques, and tools set forth below, the guidelines for the reasonable application of force contained in this policy shall apply to all policies addressing the potential use of force, including but not limited to the Conducted Energy Device, Use of Restraints, and Electronic Restraints policies.

Refer to Law Enforcement policies - Force Options, Control Devices and Techniques, and Conducted Energy Devices.

### 514.1.1 DEFINITIONS

Definitions related to this policy include:

**Deadly force** - Any use of force that creates a substantial risk of causing death or serious bodily injury, including but not limited to the discharge of a firearm (Penal Code § 835a).

**Feasible** - Reasonably capable of being done or carried out under the circumstances to successfully achieve the arrest or lawful objective without increasing risk to the deputy or another person (Government Code § 7286(a)).

**Force** - The application of physical techniques or tactics, chemical agents, or weapons to another person. It is not a use of force when a person allows him/herself to be searched, escorted, handcuffed, or restrained.

**Force team technique** - The force team technique ordinarily involves trained members clothed in protective gear who enter the inmate's area in tandem, each with a specific task, to achieve immediate control of the inmate.

**Serious bodily injury** - A serious impairment of physical condition, including but not limited to the following: loss of consciousness; concussion; bone fracture; protracted loss or impairment of function of any bodily member or organ; a wound requiring extensive suturing; and serious disfigurement (Penal Code § 243(f)(4)).

**Totality of the circumstances** - All facts known to the deputy at the time, including the conduct of the officer and the individual leading up to the use of force (Penal Code § 835a).

### **514.2 POLICY**

The use of force options is a matter of critical concern, both to the public and to the public safety community. Members are involved on a daily basis in numerous and varied interactions and, when warranted, may use reasonable force options in carrying out their duties.

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Members must have an understanding of, and true appreciation for, their authority and limitations. This is especially true with respect to overcoming resistance while engaged in the performance of public safety duties.

The Tulare County Sheriff's Office recognizes and respects the value of all human life and dignity without prejudice to anyone. Vesting members with the authority to use reasonable force options and to protect the public welfare requires monitoring, evaluation, and a careful balancing of all interests.

### 514.2.1 FAIR AND UNBIASED USE OF FORCE

Deputies are expected to carry out their duties, including the use of force options, in a manner that is fair and unbiased (Government Code § 7286(b)).

### 514.3 USE OF FORCE OPTIONS

Authorized members shall use only that amount of force that reasonably appears necessary given the facts and totality of the circumstances known to or perceived by the member at the time of the event to accomplish a legitimate government purpose such as to gain control of the individual; protect and ensure the safety of inmates, members, and others; prevent serious property damage; prevent escape; obtain compliance with facility rules and member orders; or to ensure the institution's security and good order (Penal Code § 835a).

The reasonableness of force will be judged from the perspective of a reasonable member on the scene at the time of the incident. Any evaluation of reasonableness must allow for the fact that members are often forced to make split-second decisions about the amount of force that reasonably appears necessary in a particular situation, with limited information and in circumstances that are tense, uncertain, and rapidly evolving.

Given that no policy can realistically predict every possible situation a member might encounter, members are entrusted to use well-reasoned discretion in determining the appropriate force option in each incident. Members may only use a level of force that they reasonably believe is proportional to the seriousness of the suspected offense or the reasonably perceived level of actual or threatened resistance (Government Code § 7286(b)).

It is also recognized that circumstances may arise in which members reasonably believe that it would be impractical or ineffective to use any of the approved or authorized tools, weapons, or methods provided by this office. Members may find it more effective or reasonable to improvise their response to rapidly unfolding conditions that they are confronting. In such circumstances, the use of any improvised device or method must nonetheless be objectively reasonable and utilized only to the degree that reasonably appears necessary to accomplish a legitimate government purpose.

While the ultimate objective of every encounter is to avoid or minimize injury, nothing in this policy requires a member to retreat or be exposed to possible physical injury before applying reasonable force PC835a(d).

Force shall never be used as punishment.

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### 514.3.1 FACTORS USED TO DETERMINE THE REASONABLENESS OF FORCE

When determining whether to apply force and evaluating whether a member has used reasonable force, a number of factors should be taken into consideration, as time and circumstances permit (Government Code § 7286(b)). These factors include but are not limited to:

- (a) The apparent immediacy and severity of the threat to members or others (Penal Code § 835a).
- (b) The conduct of the individual being confronted, as reasonably perceived by the member at the time (Penal Code § 835a).
- (c) Member/individual factors (e.g., age, size, relative strength, skill level, injuries sustained, level of exhaustion or fatigue, the number of members available vs. individuals).
- (d) The conduct of the involved member leading up to the use of force (Penal Code § 835a).
- (e) The effects of suspected drug or alcohol use.
- (f) The individual's apparent mental state or capacity (Penal Code § 835a).
- (g) The individual's apparent ability to understand and comply with deputy commands (Penal Code § 835a).
- (h) The proximity of weapons or dangerous improvised devices.
- (i) The degree to which the individual has been effectively restrained and his/her ability to resist despite being restrained.
- (j) The availability of other reasonable and feasible options and their possible effectiveness (Penal Code § 835a).
- (k) The seriousness of the suspected offense or reason for contact with the individual prior to and at the time force is used.
- (I) The training and experience of the member.
- (m) The potential for injury to members, inmates, bystanders, and others.
- (n) Whether the individual appears to be resisting, attempting to evade arrest by flight, or is attacking the member.
- (o) The risk and reasonably foreseeable consequences of escape.
- (p) The apparent need for immediate control of the individual or a prompt resolution of the situation to maintain or restore order.
- (q) Whether the conduct of the individual being confronted no longer reasonably appears to pose an imminent threat to the member or others.
- (r) Prior contacts with the individual or awareness of any propensity for violence.
- (s) Any other exigent circumstances.

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### 514.3.2 DUTY TO INTERCEDE

Any deputy present and observing another law enforcement officer or member using force that is clearly beyond that which is necessary, as determined by an objectively reasonable deputy under the circumstances, shall, when in a position to do so, intercede (as defined by Government Code § 7286) to prevent the use of unreasonable force.

When observing or reporting force used by a law enforcement officer, each deputy should take into account the totality of the circumstances and the possibility that other law enforcement officers may have additional information regarding the threat posed by the subject (Government Code § 7286(b)).

### 514.3.3 ALTERNATIVE TACTICS - DE-ESCALATION

As time and circumstances reasonably permit, and when community and deputy safety would not be compromised, deputies should consider actions that may increase deputy safety and may decrease the need for using force:

- (a) Summoning additional resources that are able to respond in a reasonably timely manner.
- (b) Formulating a plan with responding deputies before entering an unstable situation that does not reasonably appear to require immediate intervention.
- (c) Employing other tactics that do not unreasonably increase deputy jeopardy.

In addition, when reasonable, deputies should evaluate the totality of circumstances presented at the time in each situation and, when feasible, consider and utilize reasonably available alternative tactics and techniques that may persuade an individual to voluntarily comply or may mitigate the need to use a higher level of force to resolve the situation before applying force (Government Code § 7286(b)). Such alternatives may include but are not limited to:

- (a) Attempts to de-escalate a situation.
- (b) If reasonably available, the use of crisis intervention techniques by properly trained personnel.

### 514.3.4 DUTY TO REPORT EXCESSIVE FORCE

Any deputy who observes a law enforcement officer or a member use force that potentially exceeds what the deputy reasonably believes to be necessary shall immediately report these observations to a supervisor (Government Code § 7286(b)).

As used in this section, "immediately" means as soon as it is safe and feasible to do so.

### 514.3.5 PAIN COMPLIANCE TECHNIQUES

Pain compliance techniques may be effective in controlling a physically or actively resisting individual. Members may only apply those pain compliance techniques for which they have successfully completed office-approved training. Members utilizing any pain compliance technique should consider:

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- (a) The degree to which the application of the technique may be controlled given the level of resistance.
- (b) Whether the individual can comply with the direction or orders of the member.
- (c) Whether the individual has been given sufficient opportunity to comply.

The application of any pain compliance technique shall be discontinued once the member determines that compliance has been achieved.

### 514.3.6 RESTRICTIONS ON THE USE OF CAROTID CONTROL HOLD

Deputies of this office are not authorized to use a carotid restraint hold. A carotid restraint means a vascular neck restraint or any similar restraint, hold, or other defensive tactic in which pressure is applied to the sides of a person's neck that involves a substantial risk of restricting blood flow and may render the person unconscious in order to subdue or control the person (Government Code § 7286.5).

### 514.3.7 RESTRICTIONS ON THE USE OF A CHOKE HOLD

Deputies of this office are not authorized to use a choke hold. A choke hold means any defensive tactic or force option in which direct pressure is applied to a person's trachea or windpipe (Government Code § 7286.5). This provision is not intended to limit the general right to self-defense or defense of others against great bodily injury or death, which is available to all people, including law enforcement officers.

### 514.3.8 USE OF FORCE TO SEIZE EVIDENCE

In general, members may use reasonable force to lawfully seize evidence and to prevent the destruction of evidence. However, members are discouraged from using force solely to prevent a person from swallowing evidence or contraband. In the instance when force is used, members should not intentionally use any technique that restricts blood flow to the head, restricts respiration, or creates a reasonable likelihood that blood flow to the head or respiration would be restricted. Members are encouraged to use techniques and methods taught by the Tulare County Sheriff's Office for this specific purpose.

### 514.3.9 MEDICAL CONSIDERATION

Once it is reasonably safe to do so, properly trained members should promptly provide or procure medical assistance for any individual injured or claiming to have been injured in a use of force incident (Government Code § 7286(b)).

### 514.3.10 FAILURE TO INTERCEDE

A deputy who has received the required training on the duty to intercede and then fails to act to intercede when required by law may be disciplined in the same manner as the deputy who used force beyond that which is necessary (Government Code § 7286(b)).

### 514.3.11 NOTIFICATION TO SUPERVISORS REGARDING USE OF FORCE

Any use of force by a deputy shall be reported immediately to a supervisor (Penal Code § 832.13).

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As used in this section, "immediately" means as soon as it is safe and feasible to do so.

#### 514.3.12 ADDITIONAL RESTRICTIONS

As it pertains to terms such as "positional asphyxia," "restraint asphyxia," and "excited delirium," it is impractical to restrict a deputy's use of reasonable control methods when attempting to restrain a combative individual. However, deputies are not authorized to use any restraint or transportation method which might unreasonably impair an individual's breathing or respiratory capacity for a period beyond the point when the individual has been adequately and safely controlled. Once controlled, the individual should be placed into a recovery position (e.g., supine or seated) and monitored for signs of medical distress (Government Code § 7286.5).

### 514.4 USE OF OTHER WEAPONS, TOOLS, AND CHEMICAL AGENTS ON INMATES

Refer to Law Enforcement policies on use of other weapons and tools.

### 514.4.1 ELECTRONIC CONTROL DEVICES -

The use of the TASER® device shall be in accordance with the office's Conducted Energy Device Policy found in the Law Enforcement policy manual.

#### 514.4.2 CHEMICAL AGENTS

Chemical agents shall only be used in the facility as authorized by the Facility Commander or the authorized designee and in accordance with the office's Chemical Agents Training Policy. Oleoresin capsicum (OC) spray should not be used in the medical unit or other designated areas where inmates are assigned to respiratory isolation or on any inmate who is under control with or without restraints.

Inmates who have been affected by the use of chemical agents shall be promptly provided with the proper solution to decontaminate the affected areas.

If the inmate refuses to decontaminate, such a refusal shall be documented. If an inmate has been exposed in a cell and not removed from the cell where the exposure occurred, in-cell decontamination shall be afforded to the inmate, including:

- (a) Health-trained custody member advising the inmate how to decontaminate in the cell.
- (b) Clean clothing if the inmate's clothing was contaminated.
- (c) Monitoring of the in-cell inmate at least every 15 minutes on an irregular schedule, for a period of not less than 45 minutes, by health-trained custody member.

### 514.4.3 PROJECTILE CHEMICAL AGENTS

Pepper projectile systems are plastic spheres filled with a derivative of OC powder. A compressed gas launcher delivers the projectiles with enough force to burst the projectiles on impact, releasing the OC powder. The potential exists for the projectiles to inflict injury if they strike the head, neck, spine, or groin. Therefore, members deploying the pepper projectile system should not intentionally target those areas except when the member reasonably believes the inmate may cause serious bodily injury or death to the member or others. The use of the pepper projectile system is subject to the following requirements:

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- (a) Office-approved projectile chemical agents may only be used by members who have received office-authorized training in their use.
- (b) Members encountering a situation that requires the use of the pepper projectile system shall notify a supervisor as soon as practicable. The supervisor shall respond to all such deployments. The supervisor shall ensure that all notifications and reports are completed as required by this policy.

Each deployment of a pepper projectile system shall be documented and, if reasonably practicable, recorded on video. This includes situations where the launcher was directed toward the inmate, regardless of whether the launcher was used. Only non-incident deployments are exempt from the reporting requirement (e.g., training, product demonstrations).

### 514.4.4 CHEMICAL AGENTS AND PREGNANT INMATES

Pregnant inmates shall not be pepper sprayed or exposed to other chemical weapons (PC 4023.8(h)).

### 514.4.5 IMPACT WEAPONS

The need to immediately control a suspect must be weighed against the risk of causing serious injury. The head, neck, throat, spine, heart, kidneys and groin should not be intentionally targeted except when the deputy reasonably believes the suspect poses an imminent threat of serious bodily injury or death to the deputy or others.

When carrying a baton, uniformed personnel shall carry the baton in its authorized holder on the equipment belt. Plainclothes and non-field personnel may carry the baton as authorized and in accordance with the needs of their assignment or at the direction of their supervisor.

### 514.4.6 KINETIC ENERGY PROJECTILES

This office is committed to reducing the potential for violent confrontations. Kinetic energy projectiles, when used properly, are less likely to result in death or serious physical injury and can be used only by a trained and qualified member in an attempt to de-escalate a potentially deadly situation.

### 514.4.7 CHEMICAL AGENTS AND PREGNANT INMATES

Pregnant inmates shall not be pepper sprayed or exposed to other chemical weapons (Penal Code § 4023.8).

### 514.5 REPORTING THE USE OF FORCE

Every member application of force is an incident that shall be reported on the appropriate report form.

The documentation will reflect the actions and responses of each member participating in the incident, as witnessed by the reporting member.

The report should include:

(a) A clear, detailed description of the incident, including any application of weapons or restraints.

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- (b) The identity of all individuals involved in the incident (e.g., inmates, members, others).
- (c) The member should articulate the factors perceived and why he/she believed the use of force was reasonable under the circumstances.
- (d) Efforts made to temper the severity of a forceful response, and if there were none, the reasons why.
- (e) Description of any injuries to anyone involved in the incident, including the result of any medical checks that show the presence or absence of injury.

Any member directly observing the incident shall make a verbal report to a supervisor as soon as practicable and include as much of the aforementioned information as is known by the member.

Members shall submit the appropriate documentation prior to going off-duty, unless directed otherwise by a supervisor.

A video recording is required for all calculated use of force incidents and should include the introduction of all members participating in the process. The recording and documentation will be part of the investigation package. The supervisor should ensure the recording is properly processed for retention and a copy is forwarded with the report to the Facility Commander within three working days.

The supervisor that is responsible for gathering the reports may allow a reasonable delay in preparation of a report in consideration of the immediate psychological and/or physical condition of the involved member.

The Shift Supervisor shall promptly notify the Facility Commander of any incident involving a member employing deadly force, or any incident where a death or serious bodily injury may have been caused by a member.

### 514.5.1 REPORTING TO CALIFORNIA DEPARTMENT OF JUSTICE

Statistical data regarding all officer-involved shootings and incidents involving use of force resulting in serious bodily injury is to be reported to the California Department of Justice as required by Government Code § 12525.2.

### 514.6 SUPERVISOR RESPONSIBILITIES

A supervisor should respond to a reported application of force resulting in visible injury, if reasonably available. When a supervisor is able to respond to an incident in which there has been a reported use of force, the supervisor is expected to (Government Code § 7286(b)):

- (a) Ensure a crime scene is established to preserve and protect evidence, if appropriate.
- (b) Ensure that the chain of command is notified and that all necessary health and safety and security measures are initiated.
- (c) Obtain the basic facts from the involved members. Absent an allegation of misconduct or excessive force, this will be considered a routine contact in the normal course of duties.
- (d) Ensure that the appropriate investigation authority is notified, if appropriate.

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- (e) Ensure that any parties involved in an application of force situation are examined by medical staff, regardless of whether any injuries are reported or detectable, and afforded medical treatment as appropriate.
- (f) When possible, separately obtain a recorded interview with all individuals upon whom force was used. If this interview is conducted without the person having voluntarily waived his/her *Miranda* rights, the following should apply:
  - The content of the interview should not be summarized or included in any related criminal charges.
  - 2. The fact that a recorded interview was conducted should be documented in a report.
  - 3. The recording of the interview should be distinctly marked for retention until all potential for civil litigation has expired.
- (g) Once any initial medical assessment has been completed or first aid has been rendered, ensure that photographs have been taken of any areas involving visible injury or complaint of pain, as well as overall photographs of uninjured areas.
  - 1. These photographs should be retained until all potential for civil litigation has expired.
- (h) Identify any witnesses not already included in related reports.
- (i) Review and approve all related reports.
- (j) Determine if there is any indication that the individual may pursue civil litigation.
  - 1. If there is an indication of potential civil litigation, the supervisor should complete and route a notification of a potential claim through the appropriate channels.
- (k) Evaluate the circumstances surrounding the incident and initiate an administrative investigation if there is a question of policy noncompliance or if for any reason further investigation may be appropriate.

In the event that a supervisor is unable to respond to the scene of an incident involving a reported application of force, the supervisor is still expected to complete as many of the above items as circumstances permit.

### 514.6.1 LIEUTENANT RESPONSIBILITY

The Lieutenant shall review each force option application by any personnel within his/her command to ensure compliance with this policy and to address any training issues.

### 514.7 USE OF DEADLY FORCE

Where feasible, the deputy shall, prior to the use of deadly force, make reasonable efforts to identify him/herself as a peace officer and to warn that deadly force may be used, unless the deputy has objectively reasonable grounds to believe the person is aware of those facts (Penal Code 835a).

If an objectively reasonable deputy would consider it safe and feasible to do so under the totality of the circumstances, deputies shall evaluate and use other reasonably available resources and

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techniques when determining whether to use deadly force. To the extent that it is reasonably practical, deputies should consider their surroundings and any potential risks to bystanders prior to discharging a firearm (Government Code § 7286(b)).

The use of deadly force is only justified when the deputy reasonably believes it is necessary in the following circumstances (Penal Code § 835a):

- (a) A deputy may use deadly force to protect him/herself or others from what he/she reasonably believes is an imminent threat of death or serious bodily injury to the deputy or another person.
- (b) A deputy may use deadly force to stop an escaping inmate, or stop a fleeing individual, when the deputy has probable cause to believe that the individual has committed, or intends to commit, a felony involving the infliction or threatened infliction of serious bodily injury or death, and the deputy reasonably believes that there is an imminent or future potential risk of serious bodily injury or death to any other person if the individual is not immediately apprehended.

Deputies shall not use deadly force against an inmate based on the danger that inmate poses to him/herself, if an objectively reasonable deputy would believe the inmate does not pose an imminent threat of death or serious bodily injury to the deputy or to another person (Penal Code § 835a).

An "imminent" threat of death or serious bodily injury exists when, based on the totality of the circumstances, a reasonable deputy in the same situation would believe that an inmate has the present ability, opportunity, and apparent intent to immediately cause death or serious bodily injury to the deputy or another person. A deputy's subjective fear of future harm alone is insufficient as an imminent threat. An imminent threat is one that from appearances is reasonably believed to require instant attention (Penal Code § 835a).

#### 514.8 USE OF FORCE COMPLAINTS

The receipt, processing, and investigation of public complaints involving use of force incidents should be handled in accordance with the Personnel Complaints Policy (Government Code § 7286(b)).

#### 514.9 POLICY REVIEW

The Sheriff or the authorized designee should regularly review and update this policy to reflect developing practices and procedures (Government Code § 7286(b)).

### 514.10 POLICY AVAILABILITY

The Sheriff or the authorized designee should ensure this policy is accessible to the public (Government Code § 7286(c)).

### 514.11 PUBLIC RECORDS REQUESTS

Requests for public records involving a deputy's personnel records shall be processed in accordance with Penal Code § 832.7 and the Personnel Records and Records and Data policies (Government Code § 7286(b)).

### **Use of Restraints**

### 515.1 PURPOSE AND SCOPE

This policy establishes guidelines for the application, supervisory oversight, and restrictions on the use of restraints on persons incarcerated in this facility.

This policy shall apply to the use of specific types of restraints, such as four/five-point restraints, restraint chairs, ambulatory restraints, and similar restraint systems, as well as all other restraints, including handcuffs, waist chains, and leg irons when such restraints are used to restrain any incarcerated person for prolonged periods.

This policy does not apply to the use of electrical restraints (see the Electronic Restraints Policy).

### 515.1.1 DEFINITIONS

Definitions related to this policy include:

**Clinical restraints** - Restraints applied when an incarcerated person's disruptive, assaultive, and/ or self-injurious behavior is related to a medical or mental illness. Clinical restraints can include leather, rubber, or canvas hand and leg restraints with contact points on a specialized bed (four/ five-point restraints) or a portable restraint chair.

**Therapeutic seclusion** - Segregated confinement of an agitated, vulnerable, and/or severely anxious incarcerated person with a serious mental illness as part of treatment when clinically indicated for preventive therapeutic purposes.

#### **515.2 POLICY**

It is the policy of this office that restraints shall be used only to prevent self-injury, injury to others, or property damage. Restraints may also be applied according to an incarcerated person's classification, such as maximum security, to control the behavior of a high-risk incarcerated person while the person is being moved outside the cell or housing unit.

Restraints shall never be used for retaliation or as punishment. Restraints shall not be utilized any longer than is reasonably necessary to control the incarcerated person. Restraints are to be applied only when less restrictive methods, including verbal de-escalation techniques, have been attempted and are deemed ineffective in controlling the dangerous behavior of an incarcerated person (15 CCR 1029(a)(4); 15 CCR 1058). Each incident where restraints are used shall be documented by the handling staff member and placed in the appropriate file prior to the end of the staff member's shift.

This policy does not apply to the temporary use of restraints, such as handcuffing or the use of leg irons to control an incarcerated person during movement and transportation inside or outside the facility.

### 515.3 USE OF RESTRAINTS - CONTROL

Supervisors shall proactively oversee the use of restraints on any incarcerated person. Whenever feasible, the use of restraints, other than routine use during transfer, shall require the approval of

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the Shift Supervisor prior to application. In instances where prior approval is not feasible, the Shift Supervisor shall be apprised of the use of restraints as soon as practicable.

Restraint devices, such as restraint chairs, shall only be used on an incarcerated person when it reasonably appears necessary to overcome resistance, prevent escape, or bring an incident under control, thereby preventing injury to the incarcerated person or others, or eliminating the possibility of property damage. Restraints shall not be utilized any longer than is reasonably necessary to achieve the above goals.

Excluding short-term use to gain immediate control, placing an incarcerated person in a restraint chair or other restraints for extended periods requires approval from the Facility Commander or the authorized designee prior to taking action. The medical staff shall be called to observe the application of the restraints, when feasible, prior to the application or as soon as practicable after the application, and to check the incarcerated person for adequate circulation.

The use of restraints for purposes other than for the controlled movement or transportation of an incarcerated person shall be documented on appropriate logs and shall be video recorded unless exigent circumstances prevent staff from doing so. The documentation shall include, at a minimum, the type of restraint used, when it was applied, a detailed description of why the restraint was needed, the name of the person authorizing placement, names of staff involved in the placement, any injuries sustained, when the restraints were removed and the duration of placement (15 CCR 1058).

The following provisions shall be followed when utilizing restraints to control an incarcerated person (15 CCR 1058):

- (a) Restraints shall not be used as punishment, placed around a person's neck, or applied in a way that is likely to cause undue physical discomfort or restrict blood flow or breathing (e.g., hog-tying).
- (b) Restrained incarcerated persons shall not be placed facedown or in a position that inhibits breathing.
- (c) Restraints shall not be used to secure a person to a fixed object except as a temporary emergency measure. A person who is being transported shall not be locked in any manner to any part of the transporting vehicle except for items installed for passenger safety, such as seat belts.
- (d) Incarcerated persons in restraints shall be housed either alone or in an area designated for restrained persons.
- (e) Restraints shall be applied for no longer than is reasonably necessary to protect the incarcerated person or others from harm.
- (f) Staff members shall conduct continuous direct face-to-face observation at least twice every 30 minutes on an irregular schedule to check the incarcerated person's physical well-being and behavior. Restraints shall be checked to verify correct application and to ensure they do not compromise circulation. All checks shall be documented, with the actual time recorded by the person doing the observation, along with a description of the incarcerated person's behavior. Any actions taken should also be noted in the log.

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- (g) The specific reasons for the continued need for restraints shall be reviewed, documented, and approved by the Facility Commander or the Shift Supervisor at least every hour.
- (h) Continuous direct visual observation shall be maintained until a medical opinion can be obtained.
- (i) Within one hour of placement in restraints, a qualified health care professional shall document an opinion regarding the placement and retention of the restraints.
- (j) As soon as practicable, but within four hours of placement in restraints, the incarcerated person shall be medically assessed to determine whether the person has a serious medical condition that is being masked by the aggressive behavior. The medical assessment shall be a face-to-face evaluation by a qualified health care professional.
- (k) As soon as practicable, but within eight hours of placement in restraints, the incarcerated person must be evaluated by a mental health professional to assess whether the incarcerated person needs immediate and/or long-term mental health treatment. If the Facility Commander, or the authorized designee, in consultation with responsible health care staff determines that the incarcerated person cannot be safely removed from restraints after eight hours, the person shall be taken to a medical facility for further evaluation.
- (I) Where applicable, the Facility Commander shall use the restraint device manufacturer's recommended maximum time limits for placement.

### 515.4 RANGE OF MOTION

Incarcerated persons placed in restraints for longer than two hours should receive a range-of-motion procedure that will allow for the movement of the extremities. Range-of-motion exercise will consist of alternate movement of the extremities (i.e., right arm and left leg) for a minimum of 10 minutes every two hours.

### 515.5 FOOD, HYDRATION, AND SANITATION

Incarcerated persons who are confined in restraints shall be given food and fluids. Provisions shall be made to accommodate any toileting needs at least once every two hours. Food shall be provided during normal meal periods. Hydration (water or juices) will be provided no less than once every two hours or when requested by the incarcerated person.

Offering food and hydration to incarcerated persons will be documented to include the time, the name of the person offering the food or water/juices, and the incarcerated person's response (receptive, rejected). Incarcerated persons shall be provided the opportunity to clean themselves or their clothing while they are in restraints.

### 515.6 RESTRAINED INCARCERATED PERSON HOLDING

Restrained incarcerated persons should be protected from abuse by other incarcerated persons. Under no circumstances will restrained incarcerated persons be housed with incarcerated persons who are not in restraints. In most instances, restrained incarcerated persons are housed alone or in an area designated for restrained persons (15 CCR 1058).

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#### 515.7 PREGNANT INCARCERATED PERSONS

Restraints will not be used on incarcerated persons who are known to be pregnant unless based on an individualized determination that restraints are reasonably necessary for the legitimate safety and security needs of the incarcerated person, the staff, or the public. Should restraints be necessary, the restraints shall be the least restrictive available and the most reasonable under the circumstances.

Incarcerated persons who are known to be pregnant will not be handcuffed behind their backs or placed in waist restraints or leg irons.

Once pregnancy has been confirmed, a pregnant incarcerated person should be advised of the policies and procedures regarding the restraint of pregnant persons (Penal Code § 3407; 15 CCR 1058.5).

#### 515.7.1 INCARCERATED PERSONS IN LABOR

No incarcerated person who is in labor, delivery, or recovery from a birth shall be restrained by the use of leg restraints/irons, waist restraints/chains, or handcuffs behind the body (Penal Code § 3407; 15 CCR 1058.5).

No incarcerated person who is in labor, delivering, or recovering from a birth shall be otherwise restrained except when all of the following exist (Penal Code § 3407; 15 CCR 1058.5):

- (a) There is a substantial flight risk or some other extraordinary medical or security circumstance that dictates restraints be used to ensure the safety and security of the incarcerated person, the staff of this or the medical facility, other incarcerated persons, or the public.
- (b) A supervisor has made an individualized determination that such restraints are necessary to prevent escape or injury.
- (c) There is no objection from the treating medical care provider.
- (d) The restraints used are the least restrictive type and are used in the least restrictive manner.

Restraints shall be removed when medical staff responsible for the medical care of the pregnant incarcerated person determines that the removal of restraints is medically necessary (Penal Code § 3407).

The supervisor should, within 10 days, make written findings specifically describing the type of restraints used, the justification, and the underlying extraordinary circumstances.

515.7.2 INCARCERATED PERSONS IN RECOVERY AFTER TERMINATED PREGNANCY Incarcerated persons recovering from a termination of pregnancy shall not be restrained using leg restraints/irons, waist restraints/chains, or handcuffs behind the body unless an exception identified in the Incarcerated Persons in Labor subsection of this policy applies (15 CCR 1058.5).

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#### Use of Restraints

Restraints shall be removed when medical staff responsible for the medical care of the incarcerated person determines that the removal of restraints is medically necessary (15 CCR 1058.5).

# 515.8 RESTRAINT WRAP DEFINITION:

The WRAP provides a safe method of controlling and restraining a violent/combative subject who has been taken into custody. It is a restraint device that is wrapped around the inmates' legs and secured with Velcro straps to immobilize the lower body without restricting breathing.

#### **GENERAL:**

The WRAP will be made available for use under the following guidelines:

Documented training, by the training division, in the use of the WRAP is mandatory before use by staff. Only staff who have received training can use the WRAP.

Approval of the Shift Supervisor will be made prior to the application of the WRAP and the Shift Supervisor will be present when the WRAP is applied.

All usage of the WRAP will be documented in an incident report.

The Wrap will only be used on inmates who display behavior that results in the destruction of property or reveal an intent to cause physical harm to oneself or others.

An inmate placed in the WRAP requires proper supervision and will not be left in the restraints for more time than is necessary.

While in the WRAP restraint, the inmate will be housed alone.

Medical staff will be notified immediately should an injury occur to an inmate as a result of using the WRAP.

Always inspect the WRAP after each use for sign of wear or fatigue. All belts should be free from tears or fraying. Fasteners and stitching should not be worn or damaged.

The WRAP will not be used as a punishment.

#### **PROCEDURES:**

The Shift Supervisor may approve the use of the WRAP on inmates for combative, restive, or violent behavior.

Due to the inmate's behavior, several deputies may have to restrain the inmate so the WRAP can be applied. The officer applying the WRAP will have received training on the restraint device prior. The Shift Supervisor will be present when the WRAP is applied.

Once a subject is properly restrained in the WRAP, a soft helmet may be applied to protect the head of the inmate.

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#### Use of Restraints

The Applying Deputies will document the inmate's behavior, assisting officers and any injuries to the inmate, both prior to and during the application of the WRAP Restraint.

Inmates placed in the WRAP will be observed by intermittent direct visual supervision, a minimum of twice every thirty minutes to assure the safety and well being of the inmate and insure the WRAP is still properly employed. Officers will document observations on the Safety Assessment Sheet.

The off hand of an inmate in the WRAP will be released to allow the inmate the opportunity to eat meals and have access to the toilet (i.e. if the inmate if right-handed, it would be the left hand). An officer will be in attendance at all times when the inmate has the WRAP removed.

Deputies with the assistance of medical staff, will exercise the inmate's extremities every two (2) hours for at least ten (10) minutes:

- 1. Legs:
- a) Extend and bend one leg at a time.
- 2. Arms:
- a) Straighten and bend one arm at a time.

If exercising the inmate's extremities is not possible, the deputy must consult the medical staff to discuss whether there are any other available options, and document the attempt and reason it was not completed on the Safety Assessment Sheet.

A Safety Assessment Sheet MUST be completed for each inmate which this device had been used.

## **Searches**

#### 516.1 PURPOSE AND SCOPE

The purpose of this policy is to provide clear direction on maintaining the safety and security of the facility by conducting searches, in balance with protecting the rights afforded by the United States Constitution.

The introduction of contraband, intoxicants or weapons into the Tulare County Sheriff's Office facility poses a serious risk to the safety and security of staff, inmates, volunteers, contractors and the public. Any item that is not available to all inmates may be used as currency by those who possess the item, and will allow those in possession of the item to have control over other inmates. Any item that may be used to disengage a lock, other electronic security devices or the physical plant itself, seriously jeopardizes the safety and security of this facility. Carefully restricting the flow of contraband into the facility can only be achieved by thorough searches of inmates and their environment.

Nothing in this policy is intended to prohibit the otherwise lawful collection of trace evidence from an inmate/arrestee.

#### 516.1.1 DEFINITIONS

Definitions related to this policy include:

**Contraband** - Anything unauthorized for inmates to possess or anything authorized to possess but in an unauthorized quantity.

**Pat-down search** - The normal type of search used by deputies within this facility to check an individual for weapons or contraband. It involves a thorough patting down of clothing to locate any weapons or dangerous items that could pose a danger to the deputy, the inmate or other inmates.

**Physical body cavity search** - A search that includes a visual inspection and may include physical intrusion into a body cavity. Body cavity means the stomach or rectal cavity of a person, and the vagina of a female person.

**Strip search** - A search that requires a person to remove or rearrange some or all of his/ her clothing to permit a visual inspection of the underclothing, breasts, buttocks, anus or outer genitalia of the person. This includes monitoring of a person showering or changing clothes where the person's underclothing, buttocks, genitalia or female breasts are visible to the monitoring employee.

#### **516.2 POLICY**

It is the policy of this office to ensure the safety of staff, inmates and visitors by conducting effective and appropriate searches of inmates and areas within the facility in accordance with applicable laws (15 CCR 1029(a)(6)).

Searches shall not be used for intimidation, harassment, punishment or retaliation.

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#### 516.3 PAT-DOWN SEARCHES

Pat-down searches will be performed on all inmates/arrestees upon entering the secure booking area of the facility. Additionally, pat-down searches should occur frequently within the facility. At a minimum, the staff shall conduct pat-down searches in circumstances that include:

- (a) When inmates leave their housing units to participate in activities elsewhere in the facility (e.g., exercise yard, medical, program, visiting) and when they return.
- (b) During physical plant searches of entire housing units.
- (c) When inmates come into contact with other inmates housed outside of their housing units, such as work details.
- (d) Any time the staff believes the inmates may have contraband on their persons.

Except in emergencies, male staff may not pat down female inmates and female staff may not pat down male inmates. Absent the availability of a same sex staff member, it is recommended that a witnessing staff member be present during any pat-down search of an individual of the opposite sex. All cross-gender pat-down searches shall be documented (28 CFR 115.15).

#### 516.4 STRIP SEARCHES AND PHYSICAL BODY CAVITY SEARCHES

Deputies will generally consider the reason for the search, the scope, intrusion, manner and location of the search, and will utilize the least invasive search method to meet the need for the search.

# 516.4.1 STRIP SEARCHES PRIOR TO PLACEMENT IN A HOUSING UNIT Strip searches prior to placement in a housing unit shall be conducted as follows:

- (a) No person held prior to placement in a housing unit shall be subjected to a strip search unless there is reasonable suspicion based upon specific and articulable facts to believe the person has a health condition requiring immediate medical attention or is concealing a weapon or contraband. Factors to be considered in determining reasonable suspicion include, but are not limited to:
  - The detection of an object during a pat-down search that may be a weapon or contraband and cannot be safely retrieved without a modified strip search or strip search.
  - Circumstances of a current arrest that specifically indicate the person may be concealing a weapon or contraband. A felony arrest charge or being under the influence of a controlled substance should not suffice as reasonable suspicion absent other facts.
  - 3. Custody history (past possession of contraband while in custody, assaults on staff, escape attempts, etc.).
  - 4. The person's actions or demeanor.
  - 5. Criminal history (level of experience in a custody setting, etc.).
- (b) No strip search of an inmate shall be conducted prior to admittance to a housing unit without prior authorization from the Shift Supervisor.

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- (c) The staff member conducting the modified strip search or strip search shall:
  - 1. Document the name and sex of the person subjected to the strip search.
  - 2. Document the facts that led to the decision to perform a strip search of the inmate.
  - 3. Document the reasons less intrusive methods of searching were not used or were insufficient.
  - 4. Document the supervisor's approval.
  - 5. Document the time, date and location of the search.
  - 6. Document the names, sex and roles of any staff present.
  - 7. Itemize in writing all contraband and weapons discovered by the search.
  - 8. Process all contraband and weapons in accordance with the office's current evidence procedures.
  - 9. If appropriate, complete a crime report and/or disciplinary report.
  - 10. Ensure the documentation is placed in the inmate's file. A copy of the written authorization shall be retained and made available to the inmate or other authorized representative upon request.

#### 516.4.2 STRIP SEARCHES UPON ENTRY INTO A HOUSING UNIT

Strip searches will be conducted on all inmates upon admission into a housing unit.

Arrestees who are eligible for release or who will be released when they are no longer intoxicated will not be placed into a housing unit or have unmonitored or unsupervised contact with previously housed inmates.

Arrestees who are arranging bail shall be permitted a reasonable period of time, not less than 12 hours, before being placed in a housing unit.

#### 516.4.3 STRIP SEARCHES OF INMATES IN A HOUSING UNIT

A strip search of an inmate in a housing unit should be conducted when the inmate has entered an environment where contraband or weapons may be accessed. This includes, but is not limited to, the following:

- (a) Upon return from contact visits
- (b) Upon leaving the kitchen, shop, farm, etc.
- (c) Upon return to the housing unit from outside the confines of the facility (court, work-release, work detail, medical visits)

Inmates returning from court with release orders shall not be subject to strip searches or modified strip searches unless the reasonable suspicion exists based on specific and articulable facts that the person is concealing a weapon or contraband. The inmate should not be returned to the housing unit, except for retrieving his/her personal property under the direct visual supervision of staff.

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Staff members may conduct strip searches of inmates outside the above listed circumstances only with supervisor approval. Staff members and supervisors must make a determination to conduct a strip search by balancing the scope of the particular search, intrusion, the manner in which it is conducted, the justification for initiating it and the place in which it is conducted. Less invasive searches should be used if they would meet the need for the search. For example, a pat-down or modified strip search may be sufficient as an initial effort to locate a larger item, such as a cell phone.

The staff member conducting a modified strip or strip search outside the above listed circumstances shall:

- Document in writing the facts that led to the decision to perform a strip search of the inmate.
- Document the reasons less intrusive methods of searching were not used or were insufficient.
- Document the supervisor's approval.
- Document the time, date and location of the search.
- Document the names of staff present, their sex and their roles.
- Itemize in writing all contraband and weapons discovered by the search.
- Process all contraband and weapons in accordance with the office's current evidence procedures.
- If appropriate, complete a crime report and/or disciplinary report.
- Ensure the completed documentation is placed in the inmate's file. A copy of the written
  authorization shall be retained and made available to the inmate or other authorized
  representative upon request.

#### 516.4.4 MODIFIED STRIP SEARCH AND STRIP SEARCH PROCEDURES

All modified strip searches and strip searches shall be conducted in a professional manner under sanitary conditions and in an area of privacy so that the search cannot be observed by persons not participating in the search.

Unless conducted by a qualified health care professional or in case of an emergency, a modified strip search or strip search shall be conducted by staff members of the same sex as the person being searched (Penal Code § 4030). Any cross-gender modified strip searches and cross-gender strip searches shall be documented (28 CFR 115.15).

Whenever possible, a second staff member of the same sex should be present during the search for security purposes and to witness the discovery of evidence.

The staff member conducting a strip search shall not touch the breasts, buttocks or genitalia of the person being searched. These areas may be touched through the clothing during a modified strip search.

(a) The searching staff member will instruct the inmate to:

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- Remove his/her clothing.
- 2. Raise his/her arms above the head and turn 360 degrees.
- 3. Bend forward and run his/her hands through his/her hair.
- 4. Turn his/her head first to the left and then to the right so the searching deputy can inspect the inmate's ear orifices.
- 5. Open his/her mouth and run a finger over the upper and lower gum areas, then raise the tongue so the deputy can inspect the interior of the inmate's mouth. Remove dentures if applicable.
- 6. Turn around and raise one foot first, then the other so the deputy can check the bottom of each foot.
- 7. For a visual cavity search, turn around, bend forward and spread the buttocks if necessary to view the anus.
- (b) At the completion of the search, the inmate should be instructed to dress in either his/ her street clothes or detention facility-supplied clothing, as appropriate.

#### 516.4.5 PHYSICAL BODY CAVITY SEARCH

Physical body cavity searches shall be completed as follows:

- (a) No person shall be subjected to a physical body cavity search without the approval of the Facility Commander or the authorized designee and only with the issuance of a search warrant. A copy of any search warrant and the results of the physical body cavity search shall be included with the related reports and made available, upon request, to the inmate or authorized representative (except for those portions of the warrant ordered sealed by a court).
- (b) Only a physician may conduct a physical body cavity search. Except in exigent circumstances, only a physician who is not responsible for providing ongoing care to the inmate may conduct the search (15 CCR 1206(o)).
- (c) Except for the physician conducting the search, persons present must be of the same sex as the person being searched. Only the necessary staff needed to maintain the safety and security of the medical personnel shall be present (Penal Code § 4030).
- (d) Privacy requirements, including restricted touching of body parts and sanitary condition requirements are the same as required for a strip search.
- (e) All such searches shall be documented including:
  - 1. The facts that led to the decision to perform a physical body cavity search of the inmate.
  - 2. The reasons less intrusive methods of searching were not used or were insufficient.

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- 3. The Facility Commander's approval.
- 4. A copy of the search warrant.
- 5. The time, date and location of the search.
- 6. The medical personnel present.
- 7. The names, sex and roles of any staff present.
- 8. Any contraband or weapons discovered by the search.
- (f) Completed documentation should be placed in the inmate's file. A copy of the written authorization shall be retained and made available to the inmate or other authorized representative upon request.
- (g) All contraband and weapons should be processed in accordance with the office's current evidence procedures.
- (h) If appropriate, the staff member shall complete a crime report and/or disciplinary report.

#### 516.4.6 BODY SCANNER SEARCH

When a scanner is reasonably available, a body scanner should be performed on all inmates/arrestees upon entering the secure booking area of the facility.

If a body scanner is used, members (Penal Code § 4030):

- (a) Within sight of the visual display of a body scanner depicting the body during a scan shall be of the same sex as the person being scanned, except for physicians or licensed medical personnel.
- (b) Should ask female inmates if they are pregnant prior to a body scan and should not knowingly use a body scanner on a woman who is pregnant.

The body scanner should generally be used whenever reasonably practicable in place of a modified strip search, strip search or body cavity search of an inmate in housing unless one of those searches is reasonably necessary after the scan.

#### 516.5 TRANSGENDER SEARCHES

Staff shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining genital status (see Prison Rape Elimination Act Policy for transgender and intersex definitions). If genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records or, if necessary, by obtaining that information as part of a broader medical examination conducted in private by a qualified health care professional (28 CFR 115.15).

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#### 516.6 CONTRABAND SEARCHES

The staff shall always be alert to the possible presence of contraband and shall take immediate action to seize the contraband when practicable. There are several types of searches that contribute to contraband control and to maintaining a safe and secure environment.

#### 516.7 HOUSING UNIT SEARCHES

Housing unit searches shall occur as directed by a supervisor. These searches should include all of the living spaces occupied by inmates. Housing unit searches should be scheduled in a manner that does not create a pattern where the inmates can predict such searches. During a housing unit search:

- (a) All inmates shall vacate their living areas and be searched by staff.
- (b) Inmates should be escorted to a separate holding area, such as the recreation yard.
- (c) Staff shall search the living areas of the inmates, including bedding, personal storage areas, bunks and other areas with inmate access.
- (d) Any weapons or contraband located shall be processed in accordance with the current evidence procedures.
- (e) The staff shall attempt to identify the inmate who possessed the contraband and file appropriate inmate discipline and/or crime reports.
- (f) Any alcoholic beverage possessed by inmates shall be seized and the appropriate inmate disciplined and/or criminal charges filed.
- (g) Any authorized item found in excess of the limited quantity (e.g., food items, newspapers) shall be seized and discarded.

At the conclusion of the housing unit search, closely supervised inmate workers should clean the unit. All authorized inmate personal property shall be respected and living areas should be returned to an orderly condition.

#### 516.8 PHYSICAL PLANT SEARCHES

The following areas of this facility shall be periodically searched for contraband:

- (a) Exercise yards shall be searched for contraband prior to and after each inmate group occupies the yard.
- (b) Holding cells shall be searched prior to and after each inmate occupies the cell.
- (c) Program areas, such as classrooms and multipurpose rooms shall be searched after each use by an inmate or inmate group.
- (d) Laundry areas shall be searched before and after each inmate group occupies the area.
- (e) Kitchen areas shall be frequently searched for contraband and to account for tools, knives and food items.

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- (f) Inmate visiting and public areas shall be frequently inspected for contraband.
- (g) The facility perimeter shall be searched at least once each shift for contraband.

#### 516.8.1 CANINE-ASSISTED SEARCHES

It is the policy of this facility to use canines to assist the staff in searching for contraband. Such searches shall occur only with the approval of a supervisor. Only canines trained in the detection of contraband, such as drugs, alcohol and weapons, will be allowed within the secure perimeter of the facility. Canines trained solely in crowd control or to assist in physically subduing individuals will not be used in the facility.

Canines will generally be used to assist the staff in general physical plant or living area searches. Contact between inmates and canines should be kept to a minimum (see the Canines Policy).

#### 516.9 CRIMINAL EVIDENCE SEARCHES

The Facility Commander or the authorized designee shall be notified, as soon as practicable, any time it is suspected that a crime has been committed in the facility or other area controlled by the facility staff, and there is a need to search for evidence related to the crime.

Any evidence collected in connection with an alleged crime shall be reported, documented and stored to protect it from contamination, loss or tampering, and to establish the appropriate chain of custody. A search for evidence may be conducted by staff whenever there is a need for such action.

#### **516.10 TRAINING**

The Training Lieutenant shall provide training for staff in how to conduct pat-downs, modified strip searches and strip searches in a professional and respectful manner and in the least intrusive manner possible, consistent with facility security needs. This training shall include cross-gender pat downs and searches, as well as searches of transgender and intersex inmates (28 CFR 115.15).

# **Reporting In-Custody Deaths**

#### 517.1 PURPOSE AND SCOPE

This policy provides direction on how in-custody deaths shall be reported.

#### 517.1.1 DEFINITIONS

Definitions related to this policy include:

**In-custody death** - The death of any person, for whatever reason (natural, suicide, homicide, accident), who is in the process of being booked or is incarcerated at any facility of this office.

#### **517.2 POLICY**

It is the policy of this office to follow state and local guidelines for reporting in-custody deaths (15 CCR 1046).

#### 517.3 MANDATORY REPORTING

All in-custody deaths shall be reported within 10 days of the death to the state Attorney General's office, in accordance with reporting guidelines and statutory requirements (Government Code § 12525).

If the decedent is a boarder for another agency, the Facility Commander shall notify that agency so that agency will assume responsibility for the notification of the decedent's family.

Pursuant to Article 37 of the Vienna Convention on Consular Relations 1963, in the case of the death of a foreign national, telephonic notification to the appropriate consulate post should be made without unreasonable delay and confirmatory written notification shall be made within 72 hours of the death to the appropriate consulate post. The notification shall include the incarcerated person's name, identification number, date and time of death, and the attending physician's name.

In the event that a juvenile dies while in custody, the Facility Commander or the authorized designee shall notify the court of jurisdiction and the juvenile offender's parent or guardian (15 CCR 1047). A copy of the report provided to the state Attorney General's office shall be submitted to the Board of State and Community Corrections within 10 days of the death (15 CCR 1046(b)(1)).

The Sheriff or the authorized designee should ensure that all specified information relating to the in-custody death is posted on the office's website as prescribed and within the timeframes provided in Government Code § 10008.

#### 517.4 PROCEDURE

Upon determining that a death of any person has occurred while in the custody of this office, the Shift Supervisor is responsible for ensuring that the Sheriff and all appropriate investigative authorities, including the Coroner, are notified without delay and all written reports are completed.

The Shift Supervisor shall also promptly notify the Facility Commander and make any other notifications required by policy or direction. The Facility Commander shall observe all pertinent laws and allow appropriate investigating agencies full access to all facts surrounding the death.

Custody Custody

#### Reporting In-Custody Deaths

The Office shall establish policies and procedures for the investigation of any in-custody death.

The decedent's personal belongings shall be disposed of in a responsible and legal manner. All property and records shall be retained according to established records retention schedules.

The individual designated by the decedent shall be notified of all pertinent information as required by law.

During an investigation, all inquiries regarding the death shall be referred to the Public Information Officer. Deputies shall not make a public comment.

#### 517.5 IN-CUSTODY DEATH REVIEW

The Sheriff or his Disginee is responsible for establishing a team of qualified staff to conduct an administrative review of every in-custody death. At a minimum, the review team should include the following (15 CCR 1046(a); 15 CCR 1030):

- (a) The Sheriff and/or his Designee
- (b) The Facility Commander
- (c) County Counsel
- (d) Investigative staff
- (e) Responsible Physician, qualified health care professionals, supervisors, or other staff who are relevant to the incident

The in-custody death review should be initiated as soon as practicable but no later than 30 days after the incident. The team should review the appropriateness of clinical care, determine whether changes to policies, procedures, or practices are warranted, and identify issues that require further study (15 CCR 1046(a)).

## **Staff and Inmate Contact**

#### 518.1 PURPOSE AND SCOPE

Interaction with inmates allows for continual assessment of the safety and security of the facility and the health and welfare of the inmates. However, inappropriate interaction can undermine security and order in the facility and the integrity of the supervision process.

This policy provides guidelines for appropriate and professional interaction between members and inmates, and is intended to promote high ethical standards of honesty, integrity and impartiality as well as increase facility safety, discipline and morale.

Violation of this policy may result in disciplinary action up to and including dismissal. Members who seek information or clarification about the interpretation of this policy are encouraged to promptly contact their supervisor.

#### **518.2 POLICY**

The Facility Commander shall ensure that inmates have adequate ways to communicate with staff and that the staff communicates and interacts with inmates in a timely and professional manner.

#### 518.3 GENERAL CONTACT GUIDELINES

Members are encouraged to interact with the inmates under their supervision and are expected to take prompt and appropriate action to address health and safety issues that are discovered or brought to their attention.

All members should present a professional and command presence in their contact with inmates. Members shall address inmates in a civil manner. The use of profanity, and derogatory or discriminatory comments is strictly prohibited.

Written communication (e.g., request forms, inmate communication, grievances, rules infraction forms, disciplinary reports) shall be answered in a timely manner. Such communication shall be filed with the inmate's records.

Members shall not dispense legal advice or opinions, or recommend attorneys or other professional services to inmates.

While profanity and harsh language are prohibited, the Office recognizes the necessity for staff to give inmates direction in a firm, determined, and authoritative manner in order to maintain proper supervision and control. Authoritative directions to inmates are particularly instructed when activities or events pose a threat to the safety or security of this facility.

#### 518.4 ANTI-FRATERNIZATION

Personal or other interaction not pursuant to official duties between facility staff with current inmates, inmates who have been discharged within the previous year, their family members or known associates have the potential to create conflicts of interest and security risks in the work environment.

Custody Custody

#### Staff and Inmate Contact

Members shall not knowingly maintain a personal or unofficial business relationship with any persons described in this section unless the Facility Commanderhas been verbally briefed and made aware of the situation.

Prohibited interactions include, but are not limited to:

- (a) Communications of a sexual or romantic nature.
- (b) Salacious exchanges.
- (c) Sexual abuse, sexual assault, sexual contact or sexual harassment.
- (d) Exchanging letters, phone calls or other similar communications, such as texting.
- (e) Exchanging money or other items.
- (f) Extending privileges, giving or accepting gifts, gratuities or favors.
- (g) Bartering.
- (h) Any financial transactions.
- (i) Being present at the home of an inmate for reasons other than an official visit without reporting the visit.
- (j) Providing an inmate with the staff member's personal contact information, including social media accounts.

#### 518.4.1 EXCEPTIONS

The Facility Commander may grant a exception to an otherwise prohibited relationship on a caseby-case basis based upon the totality of the circumstance. In determining whether to grant an exception, the Facility Commander should give consideration to factors including, but not limited to:

- Whether a relationship existed prior to the incarceration of the inmate.
- Whether the relationship would undermine security and order in the facility and the integrity of the supervision process.
- Whether the relationship would be detrimental to the image and efficient operation of the facility.
- Whether the relationship would interfere with the proper discharge of, or impair impartiality and independence of, judgment in the performance of duty.

#### 518.5 REPORTING

Deputies and non-sworn staff shall promptly report all attempts by inmates to initiate sexual acts or any salacious conversations, and forward any correspondence from an inmate or former inmate to the Facility Commander or the authorized designee.

Deputies and non-sworn staff shall report all attempts by inmates to intimidate or instill feelings of fear to their supervisor.

Deputies and non-sworn staff shall promptly notify their immediate supervisor if:

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#### Staff and Inmate Contact

- A family member or close associate has been incarcerated or committed to the custody of the facility.
- The member is involved in a personal or family relationship with a current inmate or with an inmate who has been discharged within the previous year.

# Transportation of Inmates Outside the Secure Facility

#### 519.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for the transportation of inmates outside this facility and to ensure that the staff assigned to transportation duties is qualified and adequately trained.

#### **519.2 POLICY**

It is the policy of the Tulare County Sheriff's Office to provide safe, secure and humane transportation for all inmates and other persons as required by law.

This office shall transfer all inmates from the detention facility to the place of imprisonment pursuant to the sentence of the court as soon as practicable after the sentence, in accordance with all laws relating to the transfer of inmates and costs related to transfers to facilities and jurisdictions.

#### 519.3 PROCEDURES

All staff members who operate transportation vehicles shall hold a valid license for the type of vehicle being operated.

Any member who transports an inmate outside the secure confines of this facility is responsible for:

- Obtaining all necessary paperwork for the inmate being transported (e.g., medical/ dental records, commitment documents).
- (b) 1.
  - 2.
  - 3.
  - 4.
- (c) Ensuring that all inmates are thoroughly searched and appropriate restraints are properly applied.
  - Inmates who are known to be pregnant will not be handcuffed behind their backs or placed in waist restraints while being transported (Refer to Use of Restraints Policy).
  - 2. Inmates who are transported to a hospital for the purpose of childbirth shall be transported in the least restrictive way possible and in accordance with Penal Code § 3407. The inmate shall not be shackled to anyone else during transport (Refer to Use of Restraints Policy) (Penal Code § 4023.8(I)).
- (d) Ensuring that all vehicle security devices (e.g., window bars, inside cages, door locks) are in good repair and are operational.
- (e) Thoroughly searching the transporting vehicle for contraband before any inmate is placed inside, and again after removing the inmate from the transporting vehicle.

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#### Transportation of Inmates Outside the Secure Facility

#### 519.3.1 TRANSPORTATION LOGS

Inmate transportation logs shall be developed by the Facility Commander or the authorized designee and used to log all inmate transportation. The logs shall include:

- Name and identification number of the inmate.
- Date and start/stop time of the transport.
- Location where the inmate was transported.
- Name and identification number of the transporting deputy.
- Circumstances of any unusual events associated with the transportation.

The logs shall be retained by the facility in accordance with established records retention schedules.

# **Transportation Unit**

#### 520.1 DEFINITION

The purpose of this policy is to provide guidelines to all deputies assigned to the Transportation Unit.

#### **520.2 GENERAL**

This policy and the guidelines within are to help ensure all deputies assigned to the transportation unit handles all inmate movement with regards to the safety of the inmate, public and the transporting deputy(s).

#### 520.3 LICENSE

- A. All deputies assigned to the Transportation Unit will carry their valid California Driver's License at all times while on duty.
- B. All deputies assigned to the Transportation Unit will have or obtain a Class A or B Drivers license with a passenger endorsement.
- C. All deputies without a Class A or B Drivers License will be scheduled for drivers training after the proper training permits and required checks have been obtained and completed.
- D. All deputies will notify their sergeant, and personnel and training regarding any changes related to his or her driver's license status.

#### 520.4 VEHICLES

A complete safety inspection will be conducted prior to using any transportation unit. The inspection report will be turned in daily. Any vehicle found damaged, with mechanical problems, or has any type of safety issue will be reported to the supervising sergeant as soon as possible. Any unit with safety issues, including mechanical problems will be downed for service and repair. Transport units will be secured at all times.

#### **520.5 TRANSPORTING INMATES**

- A. All inmates will be fully restrained when transported outside of secure detention facilities.
- B. All inmates will be searched prior to transport. Inmates are only allowed to take legal documents to court.
- C. Positive identification will be made of all inmates leaving the facility, and prior to loading or unloading from the transport unit.
- D. Inmates in wheelchairs will be transported in the handicap van.
- E. Males and females will be kept separate while transported.
- F. Pregnant females will be restrained per restraint policies.

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#### Transportation Unit

G. Inmates on medication will receive their medication prior to leaving the facility for their court appointment. If medication is required while at court, medical staff will be advised and will dispense the needed medication at court.

Inmates will be supervised during all inmate movement. If for any reason an arrival location appears to be unsafe, the transport deputy will return the inmate to the facility of pick up. The transport sergeant will be advised immediately, or as soon as possible, if an emergency exist.

#### 520.6 INCIDENTS WHILE TRANSPORTING

- A. Deputies will take the most direct route without undue delay.
- B. If an inmate becomes severely ill or injured while being transported by a single deputy, no attempt will be made to enter the caged area until back- up arrives.
- C. If two deputies are transporting, a careful assessment of the situation and area should be made prior to opening or entering the secure area of the transport unit.
- D.Contact dispatch and advise of the circumstances, your location, and equipment needed.
- E. If the transport unit witnesses a traffic accident or comes upon a traffic accident, the deputy will notify dispatch. Under no circumstances will the deputy render assistance and leave the transport vehicle if inmates are being transported.
- F. If an attempt is made to stop your vehicle, you will notify dispatch immediately, advise your location and give as much information to dispatch as possible. Do not stop your vehicle but try and continue to the nearest law enforcement location. Keep dispatch informed as time permits. Remember, there are numerous scenarios that can occur but the focus is officer safety, safety of the citizens around you, and the inmates on board your transport unit.

#### 520.7 COURT PROCEDURE

- A. All court transport paperwork will be reviewed prior to transporting any inmate to and from court.
- B. All inmates returning from court will have court paperwork. If an inmate does not have court paperwork, the deputy will attempt to contact the court and obtain the required paperwork prior to returning the inmate to their designated housing facility.

#### **520.8 OUT OF COUNTY TRANSPORTS**

- A. Prior to leaving to pick-up an out of county inmate, the deputy will confirm with the records unit the warrant is active and the pick up status active.
- B. Prior to taking custody of the out of county inmate, the deputy will confirm the identity of the inmate based on document information, scars, tattoos, and photographs.
- C. Verify if inmate has any medical concerns or if the inmate is taking medication.
- D. During extraditions, assigned staff will be in plain clothes.
- E. Inmate will be handcuffed in the front with hand restrains concealed from view.
- F. All extradition paperwork will be forwarded to business personnel for processing.

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Transportation Unit	Trans	portation	Unit
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G. A report will be written on all extraditions.

# **Safety and Observation Cells**

#### **521.1 PURPOSE AND SCOPE**

This policy establishes the requirement for placing incarcerated persons into and the continued placement of incarcerated persons in safety and observation cells cells.

#### 521.1.1 DEFINITIONS

Definitions related to this policy include:

**Safety cell** - An enhanced protective housing designed to minimize the risk of injury or destruction of property used for incarcerated persons who display behavior that reveals intent to cause physical harm to themselves or others or to destroy property, or who are in need of a separate cell for any reason, until suitable housing is available.

**Observation cell** - An observation cell is designed to minimize the risk of injury by falling or dangerous behavior. It is used as a initial place for arrestees or incarcerated persons who are a threat to their own safety or the safety of others as a result of being intoxicated from any substance, and who require a protected environment to prevent injury or victimization by other incarcerated persons.

#### **521.2 POLICY**

This facility will employ the use of safety cells to protect incarcerated persons from injury or to prevent the destruction of property by an incarcerated person in accordance with applicable law.

A safety cell shall not be used as punishment or as a substitute for treatment. The Facility Commander or the authorized designee shall review this policy annually with the Responsible Physician.

#### **521.3 SAFETY CELL PROCEDURES**

The following guidelines apply when placing any incarcerated person in a safety cell (15 CCR 1055):

- (a) Placement of an incarcerated person into a safety cell requires approval of the Shift Supervisor or the Responsible Physician.
- (b) A safety cell log shall be initiated every time an incarcerated person is placed into the safety cell and should be maintained for the entire time the incarcerated person is housed in the cell. Cell logs will be retained in accordance with established office retention schedules.
- (c) A safety check consisting of direct visual observation that is sufficient to assess the incarcerated person's well-being and behavior shall occur twice every 30 minutes with no more than a 15-minute lapse between safety checks. Each safety check of the incarcerated person shall be documented. Supervisors shall inspect the logs for completeness every two hours and document this action on the safety cell log.
- (d) Incarcerated persons should be permitted to remain normally clothed or should be provided a safety suit, except in cases where the incarcerated person has

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#### Safety and Observation Cells

demonstrated that clothing articles may pose a risk to the incarcerated person's safety or the facility. In these cases, the reasons for not providing clothing shall be documented on the safety cell log.

- (e) Incarcerated persons in safety cells shall be given the opportunity to have fluids (water, juices) at least hourly. Deputies shall provide the fluids in paper cups. The incarcerated persons shall be given sufficient time to drink the fluids prior to the cup being removed. Each time an incarcerated person is provided the opportunity to drink fluids will be documented on the safety cell log.
- (f) Incarcerated persons will be provided meals during each meal period. Meals will be served on paper plates or in other safe containers, and the incarcerated persons will be monitored while eating the meals. Incarcerated persons shall be given ample time to complete their meals prior to the plate or container being removed. All meals provided to incarcerated persons in safety cells will be documented on the safety cell log.
- (g) The Shift Supervisor shall review the appropriateness for continued retention in the safety cell at least every four hours. The reason for continued retention or removal from the safety cell shall be documented on the safety cell log.
- (h) A medical assessment of the incarcerated person in the safety cell shall occur as soon as possible, but not more than 12 hours from the time of placement. The person shall be medically cleared for continued assessment, referral to advanced treatment, or removed from the safety cell a minimum of 24 hours thereafter. Medical assessments shall be documented.
- (i) A mental health assessment shall be conducted as soon as possible, but not more than 12 hours from an incarcerated person's placement. The mental health professional's recommendations shall be documented.

#### 521.4 OBSERVATION CELL PROCEDURES

The following guidelines apply when temporarily placing any incarcerated person in an observation cell (15 CCR 1056):

- (a) An observation cell log shall be initiated every time an incarcerated person is placed into an observation cell. The log shall be maintained for the entire time the incarcerated person is housed in the cell. Cell logs will be retained in accordance with established office retention schedules.
- (b) A safety check consisting of direct visual observation that is sufficient to assess the incarcerated person's well-being and behavior shall occur at least once every 30 minutes on an irregular schedule. Each visual observation of the incarcerated person by staff shall be documented. Supervisors shall check the logs for completeness every two hours and document this action on the observation cell log.
- (c) Qualified health care professionals shall assess the medical condition of the incarcerated person in the observation cell at least every six hours. Only incarcerated persons who continue to need the protective housing of an observation cell will continue to be detained in such housing.

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#### Safety and Observation Cells

- (d) Incarcerated persons will be removed from the observation cell when they no longer pose a threat to their own safety and the safety of others and are able to continue the booking process.
- (e) Incarcerated persons will be detained in separate observation cells based on the individuals' actual or perceived gender identity or gender expression.

# **Biological Samples**

#### **522.1 PURPOSE AND SCOPE**

This policy provides guidelines for the collection of biological samples from those incarcerated persons required to provide samples upon conviction and/or arrest for certain offenses. This policy does not apply to biological samples collected at a crime scene or taken from a person in conjunction with a criminal investigation. Nor does it apply to biological samples collected from those required to register, for example, as sex offenders.

#### 522.2 POLICY

The Tulare County Sheriff's Office will assist in the expeditious collection of required biological samples from arrestees and offenders in accordance with the laws of this state and with as little reliance on force as practicable.

#### 522.3 PERSONS SUBJECT TO BIOLOGICAL SAMPLE COLLECTION

Incarcerated persons must submit a biological sample (Penal Code § 296: Penal Code § 296.1):

- (a) Upon conviction or other adjudication of any felony offense.
- (b) Upon conviction or other adjudication of any offense if the person has a prior felony on record.
- (c) When arrested or charged with any felony.

#### 522.4 PROCEDURE

When an incarcerated person is required to provide a biological sample, a trained employee shall attempt to obtain the sample in accordance with this policy.

#### 522.4.1 COLLECTION

The following steps should be taken to collect a sample:

- (a) Verify that the incarcerated person is required to provide a sample pursuant to Penal Code § 296 and Penal Code § 296.1.
- (b) Verify that a biological sample has not been previously collected from the offender by querying the individual's criminal history record for a DNA collection flag or, during regular business hours, calling the California Department of Justice (DOJ) designated DNA laboratory. There is no need to obtain a biological sample if one has been previously obtained.
- (c) Use the designated collection kit provided by the California DOJ to perform the collection and take steps to avoid cross contamination.

#### 522.5 CALCULATED USE OF FORCE TO OBTAIN SAMPLES

If an incarcerated person refuses to cooperate with the sample collection process, deputies should attempt to identify the reason for refusal and seek voluntary compliance without resorting to using force. Force will not be used in the collection of samples except as authorized by court order or

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#### Biological Samples

approval of legal counsel and only with the approval of the Shift Supervisor. Methods to consider when seeking voluntary compliance include contacting:

- (a) The incarcerated person's parole or probation officer when applicable.
- (b) The prosecuting attorney to seek additional charges against the incarcerated person for failure to comply or to otherwise bring the refusal before a judge.
- (c) The judge at the incarcerated person's next court appearance.
- (d) The incarcerated person's attorney.
- (e) A chaplain.
- (f) A supervisor who may be able to authorize disciplinary actions to compel compliance, if any such actions are available.

The Shift Supervisor shall review and approve any calculated use of force. The supervisor shall be present to supervise and document the calculated use of force.

#### 522.5.1 VIDEO RECORDING

A video recording should be made any time force is used to obtain a biological sample. The recording should document all staff participating in the process, in addition to the methods and all force used during the collection. The recording should be part of the investigation file, if any, or otherwise retained in accordance with the office's established records retention schedule.

If the use of force includes a cell extraction, the extraction shall also be video recorded, including audio. The video recording shall be retained by the facility in accordance with established records retention schedules. Notwithstanding the use of the video as evidence in a criminal proceeding, the tape shall be retained by the jail administration (15 CCR 1059).

#### **522.6 LEGAL MANDATES AND RELEVANT LAWS**

California law provides for the following:

#### 522.6.1 DOCUMENTATION RELATED TO FORCE

The Shift Supervisor or the authorized designee on-duty shall prepare prior written authorization for the use of any force (15 CCR 1059).

The written authorization shall include information that the subject was asked to provide the requisite sample and refused, as well as any related court order authorizing the force.

#### 522.6.2 BLOOD SAMPLES

A blood sample should only be obtained under this policy when:

- (a) The California DOJ requests a blood sample and the subject consents, or
- (b) A court orders a blood sample following a refusal.

The withdrawal of blood may only be performed in a medically approved manner by health care providers trained and qualified to draw blood. A California DOJ collection kit shall be used for this purpose (Penal Code § 298(a); Penal Code § 298(b)(2)).

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### Biological Samples

#### 522.6.3 STATE MANDATES

Deputies shall document their efforts to secure voluntary compliance and include an advisement of the legal obligation to provide the requisite specimen, sample, or impression, and the consequences of refusal (15 CCR 1059).

## **End of Term Release**

#### **523.1 PURPOSE AND SCOPE**

The purpose of this policy is to establish and maintain procedures governing the end of term release of incarcerated persons to ensure that incarcerated persons are not released in error (15 CCR 1029).

#### **523.2 POLICY**

It will be the policy of the Tulare County Sheriff's Office to provide for the timely, efficient, and legal release of incarcerated persons.

#### **523.3 RELEASE PROCEDURE**

Incarcerated persons who have reached the end of their sentenced term or who are ordered released by the court will be scheduled for release at staggered times on their release date to avoid congestion in the release area. Incarcerated persons scheduled for release shall be escorted by the staff to the transfer/release area to begin the release procedure 30 minutes prior to their scheduled release time.

The Shift Supervisor or release officer shall sign and date the release paperwork on the same day the incarcerated person is to be released.

Incarcerated persons shall not be released or moved during incarcerated person count, change of shift, or at any time that would pose a potential safety threat or disrupt the orderly operation of the facility.

All incarcerated persons must be positively identified by the staff prior to being released from the facility. Incarcerated person identities should be verified using intake records bearing the incarcerated person's name, photograph, and facility identification number or a single digit fingerprint match system, if available.

Before any incarcerated person may be released, the following conditions must be met:

- (a) The identity of the incarcerated person has been verified.
- (b) All required paperwork for release is present. The staff shall review the active incarcerated person file to verify the validity of the documents authorizing the release. The file should also be reviewed for other release-related or pending matters, including:
  - 1. Verifying calculations and release-date adjustments for good time.
  - 2. Any pending arrangements for follow-up, such as medications needed, appointments, or referral to community or social resources.
  - 3. Unresolved grievances, damage claims, or lost property.
- (c) Releasing staff must complete National Crime Information Center (NCIC) and local warrant checks to ensure that there are no outstanding warrants or detention orders.

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#### End of Term Release

If any agency has outstanding charges against the incarcerated person, the staff shall notify the agency that the incarcerated person is available for release.

- (d) If an incarcerated person has known mental health concerns, the incarcerated person shall be evaluated by a qualified health care professional and medically authorized for release. To the extent reasonably practicable, individuals who have been determined to be severely mentally ill should be released during business hours to facilitate their ability to receive services immediately after release.
- (e) All personal property shall be returned to the incarcerated person during the release process. The incarcerated person must acknowledge receiving their property by signed receipt. Any discrepancies shall be promptly reported to the Shift Supervisor.
- (f) All facility property must be returned by the incarcerated person. Any missing or damaged facility property should be documented and promptly reported to the Shift Supervisor. The incarcerated person shall remain in custody until the Shift Supervisor determines whether additional criminal charges should be filed against the incarcerated person for the damage.
- (g) A forwarding address for the incarcerated person should be on file and verified with the incarcerated person for the return of mail.
- (h) Incarcerated persons on probation or parole should be directed by the staff to report to the probation or parole office immediately upon release. The parole authorities having jurisdiction shall be notified of the incarcerated person's release, if required.
- (i) Incarcerated persons shall have access to at least three free telephone calls to plan for a safe and successful release (Penal Code § 4024.5).
- (j) Release standards, release processes, and release schedules shall be made available to an incarcerated person following the determination to release the incarcerated person (Penal Code § 4024.5).

The housing sheet, release log, and daily census log shall be updated accordingly after the incarcerated person's release. The Shift Supervisor shall ensure all release documents are complete and properly signed by the incarcerated person and the staff where required.

# 523.3.1 DISCHARGE OF INCARCERATED PERSONS WITH MENTAL ILLNESS OR SUBSTANCE ADDICTION

Incarcerated persons who are eligible for release and suffer from mental illness or substance addiction may be offered to stay in the facility for up to 16 additional hours or until normal business hours, whichever is shorter, in order for the incarcerated person to be discharged to a treatment center or be discharged during daylight hours. The incarcerated person may revoke the incarcerated person's consent and be released as soon as possible and practicable (Penal Code § 4024).

#### 523.3.2 DISCHARGE OF INCARCERATED PERSONS CONVICTED OF FELONIES

Incarcerated persons who have been convicted of a felony and meet the conditions in Penal Code § 4852.01 shall be advised of the right to petition for certificate of rehabilitation and pardon prior to release. The Records Division shall inform the incarcerated person in writing of the incarcerated

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#### End of Term Release

person's right to petition, and of the procedures for filing a petition and obtaining the certificate (Penal Code § 4852.21).

#### 523.3.3 TRANSFERS TO IMMIGRATION AUTHORITIES

Members shall not transfer an individual to immigration authorities unless one of the following circumstances exist (Government Code § 7282.5; Government Code § 7284.6):

- (a) Transfer is authorized by a judicial warrant or judicial probable cause determination.
- (b) The individual has been convicted of an offense as identified in Government Code § 7282.5(a).
- (c) The individual is a current registrant on the California Sex and Arson Registry.
- (d) The individual is identified by the U.S. Department of Homeland Security's Immigration and Customs Enforcement as the subject of an outstanding federal felony arrest warrant.

#### 523.3.4 DISCHARGE OF SEX OFFENDER REGISTRANTS

The Records Division shall inform the California Department of Justice when incarcerated persons required to register changes in address under Penal Code § 290.013 have been released from the detention facility within 15 days of release (Penal Code § 290.013).

#### 523.3.5 ARRESTEE RELEASED FROM CUSTODY

Upon request, a detained arrestee released from custody shall be provided with the appropriate Judicial Council forms to petition the court to have the arrest and related records sealed (Penal Code § 851.91).

The detention facility shall display the required signage that complies with Penal Code § 851.91 advising an arrestee of the right to obtain the Judicial Council forms.

## **Over-Detention and Inadvertent Releases**

#### **524.1 PURPOSE AND SCOPE**

This policy is intended to provide guidance to staff and management in the event of over-detention or inadvertent release.

#### 524.1.1 DEFINITIONS

Definitions related to this policy include:

Inadvertent release - Any instance of an inmate being mistakenly released.

**Over-detention** - Any instance of an inmate being mistakenly detained beyond his/her scheduled release date.

#### **524.2 POLICY**

It is the policy of this office to reasonably ensure that over-detention and inadvertent releases do not occur.

#### **524.3 OVER-DETENTION**

Any custody staff member who discovers or receives information of an over-detention, or a complaint from an inmate regarding over-detention (which could be discovered through a grievance), should immediately notify the Shift Supervisor (refer to Inmate Grievances Policy 620).

The Shift Supervisorwill immediately conduct an investigation to determine the correct release date of the inmate and to report the findings to the Facility Commander.

Inmates who are found to be over-detained shall be processed for immediate release in accordance with the End of Term Release Policy. The Shift Supervisor shall ensure that the Facility Commander is notified, an entry is made to the daily activity log and that a report is completed.

#### 524.3.1 OVER-DETENTION GRIEVANCES

Any custody staff member who receives information or a complaint from an inmate regarding overdetention will notify the Shift Supervisor as soon as practicable.

The Shift Supervisor receiving the over-detention notification will immediately conduct an investigation to determine the correct release date of the inmate and to report the findings to the Facility Commander.

#### **524.4 INADVERTENT RELEASE**

Whenever an inadvertent release is discovered, the custody staff member making the discovery shall immediately notify the Shift Supervisor. The notification shall be documented in the daily activity log.

#### 524.4.1 INADVERTENT RELEASE INVESTIGATION

The Shift Supervisor will immediately conduct an investigation to determine the cause of the inadvertent release.

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#### Over-Detention and Inadvertent Releases

The Shift Supervisor will coordinate a response based upon the seriousness of the threat the inmate may pose to the community. The threat assessment should be based upon the inmate's criminal history and the reason he/she is currently in custody, among other factors.

In the case of an inadvertent release, the Shift Supervisor will immediately notify the Facility Commander and ensure a report is completed. The Facility Commander will notify the Captain as soon as possible.

An appropriate evaluation of the circumstances shall be made to determine whether the inadvertent release should be classified as an escape.

#### 524.4.2 RETURNING THE INMATE TO CUSTODY

When the inmate is located and returned to the facility, the appropriate notifications should be made as soon as possible.

# **Canines**

#### 525.1 PURPOSE AND SCOPE

The canine program aids staff in locating contraband and maintaining the security of this facility. This policy outlines requirements of the program, its staff and the expectations of the Office within the Detention Division. Canines assigned to the Detention Division are trained in Narcotic and Contraband Detection only. Canines trained for apprehension work will not be assigned to the Detention Division.

#### REFER TO OPERATION CANINE POLICY FOR COMPLETE POLICY INFORMATION.

#### 525.2 POLICY

The Tulare County Sheriff's Office is committed to ensuring its facilities are free from contraband and drugs and to maintaining facility security. This is done by employing trained canine teams to assist in the detection of drugs and other contraband, in accordance with all applicable laws, regulations and office policies and procedures.

#### 525.3 GUIDELINES FOR THE USE OF CANINES

Canines may be used to assist staff in conducting searches for contraband, perimeter patrol, building searches and area searches. At no time may a canine be used to demean, punish or psychologically torment an inmate. Contact between canines and inmates should be minimal. Canines should not be used to search individuals. Canines may be used for:

- Searching inmate housing units, including cells, during a housing unit search, as described in the Searches Policy.
- Physical plant searches, as described in the Searches Policy.
- Searching unoccupied intake/booking areas.
- Searching unoccupied transportation vehicles before and after inmate use.
- Searching for or tracking escaped offenders.
- Any other search-related use authorized by a supervisor.

A canine team shall only be used to perform tasks for which it has been trained or certified.

#### 525.3.1 REPORTING CANINE USE, BITES AND INJURIES

Whenever the canine is deployed, a canine use report shall be completed by the handler and turned in to the Detention Canine Sergeant or On-Duty Sergeant (If Canine Sergeant Off-Duty) before going off-duty. The Detention Canine Sergeant will still receive a copy of the report.

Whenever the use of the canine results in a bite or any injury a canine use report shall be completed and included with any related incident report. The injured party should receive required medical attention as soon as possible.

Refer to Operation Canine Policy.

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#### 525.4 SELECTING AND TRAINING CANINES

A selection committee consisting of the canine handler, a supervisor and an outside subject matter expert (in canine programs) shall select any canine to be used in the canine program. The committee shall consider the prospective canine's ability to detect contraband and its ability to work effectively in a custody environment.

#### 525.4.1 TRAINING

Before assignment in this facility, each canine team shall be trained and certified to meet the certification standards established by the office-approved and recognized canine association.

The Training Lieutenant or the authorized designee shall be responsible for scheduling periodic training as recommended by the certification standards adopted by the recognized canine association for all custody personnel. This shall be done to familiarize custody personnel with how to conduct themselves in the presence of office canines.

#### 525.4.2 CONTINUED TRAINING

Each canine team shall be recertified to current standards or other recognized and approved certification standards on an annual basis. Additional training considerations are as follows:

- (a) Canine teams shall receive training as defined in the current contract with the office's canine training provider.
- (b) Canine handlers are encouraged to engage in additional training with the approval of the canine program supervisor.
- (c) To ensure that all training is consistent, no handler, trainer or outside vendor is authorized to train to a standard that is contrary to the policies of the Tulare County Sheriff's Office.
- (d) All canine training shall be conducted while on-duty unless otherwise approved by the canine program supervisor.

#### 525.4.3 FAILURE TO SUCCESSFULLY COMPLETE TRAINING

Any canine team failing certification shall not be deployed in this facility until certification is achieved. Any canine team failing annual recertification shall be immediately removed from service. When practicable, pending successful recertification, the canine handler shall be temporarily reassigned to other duties.

#### 525.4.4 TRAINING RECORDS

A training record for each canine will be created and maintained in the canine handler's training file. The record shall be reviewed and initialed monthly by the supervisor in charge of the canine program. A copy of all training shall be forwarded to the Training Lieutenant and retained pursuant to the Tulare County Sheriff's Office's established records retention schedules.

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#### 525.5 SELECTION AND TRAINING FOR CANINE HANDLERS

The position of canine handler is a special assignment that requires a specific set of skills, experience, training and temperament, in addition to those of a line staff member. A canine handler shall have:

- (a) Three years experience as a deputy in the Tulare County Sheriff's Office.
- (b) Performance evaluations of satisfactory or better.
- (c) Demonstrated ability to communicate well with inmates.
- (d) Demonstrated ability to perform ancillary tasks with a minimum of supervision.
- (e) Reside in an adequately fenced, single-family residence (e.g., minimum 5-foot high fence with locking gates).
- (f) Live within 30 minutes travel time from the Tulare limits.
- (g) Agree to be assigned to the position for a minimum of three years.

#### 525.6 MEDICAL CARE OF THE CANINE

All medical attention shall be rendered by the designated canine veterinarian, except during an emergency as provided in this policy.

Refer to Operation Canine Policy

#### 525.7 REQUESTS FOR ASSISTANCE FROM OTHER AGENCIES

The Detention Canine Sergeant or the on-duty Facility Sergeant must approve all requests for canine assistance from outside agencies, subject to the following provisions:

- (a) Canine teams shall not be used to perform any assignment that is not consistent with this policy.
- (b) The handler has the ultimate authority to decide whether the canine will be used for any specific assignment.
- (c) Canine teams should not be called into service when off-duty or used outside the jurisdiction of the Office, unless authorized by the Detention Canine Sergeant or Detention Canine Lieutenant. The Detention Canine Lieutenant will be advised as soon as possible on all outside the jurisdiction requests or the use of a Canine Team called back into service when off-duty.
- (d) It shall be the responsibility of the canine handler to coordinate with outside agency personnel in order to minimize the risk of unintended injury.

#### 525.8 REQUESTS FOR PUBLIC DEMONSTRATIONS

All public requests for a canine team appearance shall be approved by the Detention Canine Sergeant or the authorized designee prior to making any commitment. The Detention Canine Lieutenant will be advised of all public appearances.

Handlers shall not demonstrate any canine activities to the public unless authorized to do so by the Detention Canine Sergeant or the authorized designee.

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#### 525.9 DETENTION CANINE SERGEANT RESPONSIBILITIES

The Detention Canine Sergeant shall be selected by the Division Captain and Detention Canine Lieutenant according to policy. The Detention Canine Sergeantresponsibilities include, but are not limited to:

- (a) Reviewing all canine use reports to ensure compliance with policy and to identify training issues and other needs of the program.
- (b) Maintaining liaison with the contracted trainer...
- (c) Maintaining liaison with administrative staff and functional supervisors.
- (d) Maintaining liaison with the Operation Canine Sergeant, and other agency canine coordinators.
- (e) Maintaining accurate records documenting canine activities.
- (f) Maintaining secure storage of all training aids. No controlled Substance will be maintained by the Detention Canine Unit.

(g)

- (h) Recommending and overseeing the procurement of equipment and services for the unit.
- (i) Scheduling all canine-related activities.
- (j) Ensuring the canine teams are scheduled for continuous training to maximize the capabilities of the teams.

#### **525.10 CANINE HANDLER RESPONSIBILITIES**

Refer to Operation Canine Policy.

#### 525.10.1 AVAILABILITY

The handler shall be available for call-out under conditions specified by the Detention Canine Sergeant and Detention Canine Lieutenant.

#### 525.10.2 CANINES IN PUBLIC AREAS

All canines shall be kept on a leash when in areas that allow access to the public. Exceptions would include specific operations for which the canines are trained.

If a canine unit is left unattended, all windows and doors shall be secured in such a manner as to prevent unauthorized access to the dog. The handler shall also ensure that an unattended unit remains habitable for the canine.

#### 525.11 CONTROLLED SUBSTANCE TRAINING AIDS

Controlled substance training aids are required to effectively train and maintain drug-detecting dogs. Further, controlled substances can be an effective training aid during training sessions for facility personnel and the public. Only approved training aids provided the contracted canine trainer, canine unit, or approved by the canine sergeant or canine lieutenant may be used to train the assigned canine.. The canine handler shall maintain accurate records of controlled substances

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(scent articles)provided for training purposes and shall promptly report any loss or destruction of controlled substance training aids to the canine program supervisor.

Detention Canine handlers will not have possession of any controlled substance for training, unless the training aids are being utilized during Canine Training Days and supplied by the contracted trainer or operation canine handler assigned to use controlled substances on training days.

## **Body Worn Camera**

#### **526.1 PURPOSE AND SCOPE**

This policy provides guidelines for the use of portable audio/video recording devices by members of this department while in the performance of their duties. Portable audio/video recording devices include all recording systems whether body-worn, hand held or integrated into portable equipment.

This policy does not apply to lawful surreptitious audio/video recording, interception of communications for authorized investigative purposes or to mobile audio/video recordings (see the Investigation and Prosecution and Mobile Audio/Video policies).

#### **526.2 POLICY**

The Tulare County Sheriff's Department will provide members with mandatory training and access to portable recorders, either audio or video or both, for use during the performance of their duties. The use of recorders is intended to enhance the mission of the Department by accurately capturing contacts between members of the Department, Inmates and the Public.

#### **526.3 MEMBER PRIVACY EXPECTATION**

All recordings made by members acting in their official capacity shall remain the property of the Department regardless of whether those recordings were made with department issued or personally owned recorders. Members shall have no expectation of privacy or ownership interest in the content of these recordings.

#### **526.4 MEMBER RESPONSIBILITIES**

Prior to going into service, each uniformed member that is assigned a device by supervisory personnel will be responsible for making sure that he/ she is equipped with a portable recorder issued by the Department, and that the recorder is in good working order. If the recorder is not in working order or malfunctions at any time, the member shall promptly report the failure to his/ her supervisor and obtain a functioning device as soon as practical. Uniformed members should wear the recorder in a conspicuous manner.

When using a portable recorder, the assigned member shall record his/her name, TCSO identification number and the current date and time at the beginning and the end of the shift or other period of use, regardless of whether any activity was recorded. This procedure is not required when the recording device and related software captures the user's unique identification and the date and time of each recording.

Members should document the existence of a recording in any report or other official record of the contact, including any instance where the recorder malfunctioned or the member deactivated the recording. Members should include the reason for deactivation.

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#### 526.5 SUPERVISOR RESPONSIBILITIES

Supervisors should take custody of a portable audio/video recording device as soon as practical when the device may have captured an incident involving force options, an officer-involved shooting or death or other serious incident, and ensure the data is downloaded (Penal Code § 832.18).

#### 526.6 ACTIVATION OF THE PORTABLE RECORDER

This policy is not intended to describe every possible situation in which the portable recorder should be used, although there are many situations where its use is appropriate. Members should activate the recorder any time the member believes it would be appropriate or valuable to record an incident. If the member is in a public setting, the member should notify any person in close proximity of the recording.

The portable recorder should be activated in any of the following situations:

- a. All enforcement and investigative contacts.
- b. All contacts with high risk inmates, mentally ill, violent, and otherwise confrontational inmates.
- c. Any other contact that becomes adversarial after the initial contact in a situation that would not otherwise require recording.

Members should remain sensitive to the dignity of all individuals being recorded and exercise sound discretion to respect privacy by discontinuing recording whenever it reasonably appears to the member that such privacy may outweigh any legitimate law enforcement interest in recording. Requests by members of the public to stop recording should be considered using this same criterion. Recording should resume when privacy is no longer at issue unless the circumstances no longer fit the criteria for recording.

At no time is a member expected to jeopardize his/her safety in order to activate a portable recorder or change the recording media. However, the recorder should be activated in situations described above as soon as practical.

#### 526.7 SURREPTITIOUS USE OF THE PORTABLE RECORDER

Members of the Department may surreptitiously record any conversation during the course of a criminal investigation if that member could lawfully overhear or record that conversation (Penal Code § 633).

Members shall not surreptitiously record another department member without a court order unless lawfully authorized by the Sheriff or the authorized designee.

#### **526.8 EXPLOSIVE DEVICE**

Many portable recorders, including body-worn cameras and audio/video transmitters, emit radio waves that could trigger an explosive device. Therefore, these devices should not be used where an explosive device may be present.

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#### 526.9 CESSATION OF RECORDING

Once activated, the portable recorder should remain on continuously until the member's direct participation in the incident is complete or the situation no longer fits the criteria for activation. Recording may be stopped during significant periods of inactivity such as report writing or other breaks from direct participation in the incident.

Members shall cease audio recording whenever necessary to ensure conversations are not recorded between a person in custody and the person's attorney, religious advisor or physician, (i.e. Health Insurance Portability and Accountability Act) or where inmate privacy supersedes the need for recording, such as when the inmate is undressed or partially dressed unless there is explicit consent from all parties to the conversation (Penal Code § 636).

#### 526.10 PROHIBITED USE OF PORTABLE RECORDERS

Members are prohibited from using department-issued portable recorders and recording media for personal use and are prohibited from making personal copies of recordings created while onduty or while acting in their official capacity.

Members are also prohibited from retaining recordings of activities or information obtained while on-duty, whether the recording was created with department-issued or personally owned recorders. Members shall not duplicate or distribute such recordings, except for authorized legitimate department business purposes. All such recordings shall be retained at the Department.

Members are prohibited from using personally owned recording devices while on-duty without the express consent of the Facility Commander. Any member who uses a personally owned recorder for department-related activities shall comply with the provisions of this policy, including retention and release requirements.

Recordings shall not be used by any member for the purpose of embarrassment, intimidation or ridicule.

#### **526.11 RETENTION OF RECORDINGS**

Any time a member records any portion of a contact that the member reasonably believes constitutes evidence in a criminal case, the member shall record the related case number and transfer the file in accordance with current procedure for storing digital files and document the existence of the recording in the related case report. Transfers should occur at the end of the member's shift, or any time the storage capacity is nearing its limit. Any time a member reasonably believes a recorded contact may be beneficial in a non-criminal matter (e.g., a hostile contact), the member should promptly notify a supervisor of the existence of the recording.

#### **526.12 RETENTION REQUIREMENTS**

All recordings shall be retained for a period consistent with the requirements of the organization's records retention schedule but in no event for a period less than 180 days.

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#### **526.13 REVIEW OF RECORDINGS**

When preparing written reports, members should review their recordings as a resource. However, members shall not retain personal copies of recordings. Members should not use the fact that a recording was made as a reason to write a less detailed report.

Supervisors are authorized to review relevant recordings any time they are investigating alleged misconduct or reports of meritorious conduct or whenever such recordings would be beneficial in reviewing the member's performance.

Recorded files may also be reviewed:

- a. Upon approval by a supervisor, by any member of the Department who is participating in an official investigation, such as a personnel complaint, administrative investigation or criminal investigation.
- b. Pursuant to lawful process or by court personnel who are otherwise authorized to review evidence in a related case.
- c. By media personnel with permission of the Sheriff or the authorized designee.
- d. In compliance with a public records request, if permitted, and in accordance with the Records Maintenance and Release Policy.

All recordings should be reviewed by the Custodian of Records prior to public release (see the Records Maintenance and Release Policy). Recordings that unreasonably violate a person's privacy or sense of dignity should not be publicly released unless disclosure is required by law or order of the court.

#### 526.14 COORDINATOR

The Sheriff or the authorized designee shall appoint a member of the Department to coordinate the use and maintenance of portable audio/video recording devices and the storage of recordings, including (Penal Code § 832.18):

- a. Establishing a system for downloading, storing and security of recordings.
- b. Designating persons responsible for downloading recorded data.
- c. Establishing a maintenance system to ensure availability of operable portable audio/video recording devices.
- d. Establishing a system for tagging and categorizing data according to the type of incident captured.
- e. Establishing a system to prevent tampering, deleting and copying recordings and ensure chain of custody integrity.
- f. Working with counsel to ensure an appropriate retention schedule is being applied to recordings and associated documentation.
- g. Maintaining logs of access and deletions of recordings.

## **Bail Bond Surrender Policy**

#### 527.1 PURPOSE

To establish guidelines in accordance with legal mandates regarding the surrender of bail bonds.

#### **527.2 POLICY**

To process the surrender of bail bonds in accordance with sections 1300-1306 of the California Penal Code. Bail Bond Surrenders will be accepted at all times for both misdemeanor and felony charges/cases. Bail bond surrenders will not be accepted for out of county cases. All Bail Bond Surrenders must be reviewed for accuracy by an on-duty Correctional Sergeant or designee prior to acceptance.

#### 527.3 PROCEDURE

- (a) Bail bond surrenders will be accepted at all times. The bailer (or depositor) must provide one of the following:
  - 1. A certified copy of the bail bond.
  - 2. A certified copy of the certificate of deposit.
  - 3. An affidavit given by the bail licensee or surety company listing all the specific information that would be included on a certified copy of a bail bond. (Name of defendant, DOB, charges, court of jurisdiction, bail amount, date the bail was posted, booking number (if applicable), warrant or case number (if applicable), bond number, surety company, agency, and the name of the person authorized to apprehend and surrender the defendant.
  - 4. If documents listed in #1 and #2 above are presented, they must be accompanied by a signed letter addressed to the Tulare County Sheriff's Office whereby the bondsman, or depositor, certify the bail bond is in full force and has not been experied.
- (b) The bail bond surrender will be booked and processed in accordance with established policy and procedure. The defendant will be booked for an appearance in the appropriate court per Penal Code section 1300.
  - 1. Bail bond surrenders will not be accepted if the individual is already in custody on that case.
  - 2. Prior to booking, a wants and warrants check of CLETS shall be conducted to determine if a warrant has been issued for the case.
  - 3. Bail bond surrenders discovered to have already gone to warrant will be booked per the warrant with the specified bail.
- (c) Within 48 hours of surrender, the defendant will be brought before the court in which the defendant is next to appear on the case for which he/she has been surrendered, per Penal Code section 1300.

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(d) If the defendant is in custody on another charge, a bailer may execute the surrender at the facility by providing the documents specified above. The defendant will be booked for an appearance in the appropriate court per Penal Code section 1300.

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## **Discipline**

#### 600.1 PURPOSE AND SCOPE

This policy addresses the fair and equitable application of incarcerated person rules and disciplinary actions for those who fail to comply (15 CCR 1081).

#### 600.2 POLICY

It is the policy of this office to maintain written general categories of prohibited incarcerated person behavior that are clear, consistent, and uniformly applied. Written rules and guidelines will be made available to all incarcerated persons. They will include a process for resolving minor infractions and a hearing process for a more serious breach of incarcerated person rules. Criminal acts may be referred to the appropriate criminal agency.

#### 600.3 DUE PROCESS

Incarcerated persons who are subject to discipline as a result of rule violations shall be afforded the procedural due process by the Sheriff that is established in the policies, procedures, and practices relating to incarcerated person discipline. All incarcerated persons will be made aware of the rules of conduct related to maintaining facility safety, security, and order, as well as clearly defined penalties for rule violations. Staff will not engage in arbitrary actions against incarcerated persons. All disciplinary actions will follow clearly established procedures. All disciplinary actions will be fairly and consistently applied (15 CCR 1081 et seq.).

The process for an incarcerated person accused of a major rule violation includes:

- (a) A fair hearing in which the Facility Commander or the authorized designee presents factual evidence supporting the rule violation and the disciplinary action.
- (b) Advance notice to the incarcerated person of the disciplinary hearing, to allow the incarcerated person time to prepare a defense.
- (c) An impartial hearing officer.
- (d) The limited right to call witnesses and/or present evidence on the person's behalf.
- (e) The appointment of an assistant or representative in cases where the incarcerated person may be incapable of self-representation.
- (f) A formal written decision that shows the evidence used by the hearing officer, the reasons for any actions, and an explanation of the appeal process.
- (g) Reasonable actions for violating rules that relate to the severity of the violation.
- (h) The opportunity to appeal the finding.

#### 600.3.1 RULES AND ACTIONS

The Facility Commander is responsible for ensuring that rules and actions are developed, distributed, reviewed annually, and revised as needed.

Incarcerated persons cannot be held accountable for rules of which they are unaware. However, it is impossible to define every possible prohibited act or rule violation that might be encountered in

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a detention facility. Therefore, a current list of recognized infractions that are generally prohibited should be available in each housing unit. All incarcerated persons, regardless of their housing unit, shall have access to these rules. For those individuals with limited literacy, unable to read English, and for persons with disabilities, provisions shall be made for staff to instruct them verbally or provide them with material in an understandable form (15 CCR 1080) (see the Handbook and Orientation Policy).

Disciplinary procedures governing incarcerated person rule violations should address rules, minor and major violations, criminal offenses, disciplinary reports, prehearing detention, and prehearing actions or investigations.

#### 600.3.2 RULE VIOLATION REPORTS

California Penal Code § 4019.5 requires that all disciplinary actions administered be documented. This requirement may be satisfied by retaining copies of rule violation reports, including the disposition of each violation (15 CCR 1084). Rule violation reports are required for major rule violations or any other violation that will require investigation or a formal resolution. The staff member who observed or detected the rule violation or who was charged with investigating a rule violation is responsible for completing the rule violation report. The rule violation report shall include, at a minimum:

- The date, time, and location of the incident.
- Specific rules violated.
- A written description of the incident.
- The identity of known participants in the incident.
- Identity of any witnesses to the incident.
- Description and disposition of any physical evidence.
- Action taken by staff, including any use of force.
- Name and signature of the reporting deputy.
- Date and time of the report.

The supervisor investigating the violation shall ensure that certain items are documented in the investigation or rule violation report, including:

- Date and time the explanation and the written copy of the complaint and appeal process was provided to the incarcerated person.
- The incarcerated person's response to the charges.
- Reasons for any actions.
- The identity of any staff or witnesses involved, as revealed by the incarcerated person.
- The findings of the hearing officer.
- The incarcerated person's appeal, if any.

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The appeal findings, if applicable.

#### 600.3.3 POSTING

The Facility Commander or the authorized designee is responsible for conspicuously posting notices about rules, disciplinary procedures, and actions in a conspicuous location, as set forth in 15 CCR 1080.

#### 600.4 RULE VIOLATION PROCEDURES

Minor acts of non-conformance to the rules may be handled informally by any deputy (15 CCR 1081).

A violation of rules observed by general service employees, volunteers, or contractors will be reported to a deputy for further action. Deputies are authorized to recommend informal actions on minor violations.

Any staff member imposing informal discipline shall complete the reporting portion of the disciplinary report and provide the form to the supervisor for review prior to the imposition of the action.

Disciplinary actions that may be imposed for minor rule violations include (15 CCR 1081):

- Counseling the incarcerated person regarding expected conduct.
- Assignment to extra work detail.
- Removal from work detail (without losing work time credits).
- Loss of television, telephone, and/or commissary privileges for a period not to exceed 24 hours.
- Lockdown in the incarcerated person's assigned cell or confinement in the incarcerated person's bunk area for a period not to exceed 24 hours.

An incarcerated person may request that a supervisor review the imposed action. However, this request must be made within one hour of receiving notice of the action. The supervisor should respond to the request within a reasonable time (generally within two hours) and shall have final authority as to the imposition of informal discipline.

#### 600.4.1 MULTIPLE MINOR RULE VIOLATIONS

Staff may initiate a major rule violation report if an incarcerated person is charged with three or more minor rule violations in a consecutive 30-day period. Copies of all minor rule violations will be attached to the major rule violation report. A staff member shall conduct a hearing according to the procedures of a major rule violation.

#### 600.4.2 MAJOR RULE VIOLATIONS

Major rule violations are considered a threat to the safety, security, or efficiency of the facility, its staff members, incarcerated persons, or visitors. Staff members witnessing or becoming aware of a major rule violation shall take immediate steps to stabilize and manage the situation, including

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immediate notification of a supervisor. The supervisor shall assess the situation and initiate any emergency action, if necessary, and notify the Shift Supervisor.

The staff member who learned of the rule violation shall write and submit a disciplinary report, along with all relevant evidence, to the appropriate supervisor prior to the end of the shift (15 CCR 1081).

#### 600.4.3 PREHEARING DETENTION

Incarcerated persons who are accused of a major rule violation may be moved to administrative restrictive housing for prehearing detention, with the Shift Supervisor's approval, if there is a threat to safety or security. Incarcerated persons placed in prehearing detention are subject to the property and privilege restrictions commensurate with segregated confinement (15 CCR 1081).

The Facility Commander or the authorized designee shall, within 72 hours including weekends and holidays, review the status of any incarcerated person in prehearing detention to determine whether continued prehearing restrictive housing is appropriate.

#### 600.5 INVESTIGATIONS

Investigations involving major rule violations should be initiated within 24 hours of the initial report and completed in sufficient time for the incarcerated person to have a disciplinary hearing, which is required within 72 hours of the time the incarcerated person was informed, in writing, of the charges. If additional time is needed, the investigating supervisor will request more time in writing from the Shift Supervisor. The incarcerated person will be notified in writing of the delay.

If upon completion of the investigation, the investigating supervisor finds insufficient evidence to support a major rule violation, the supervisor may discuss alternative actions with the Shift Supervisor, including handling the incident as a minor violation or recommending that charges be removed. Such alternatives shall be documented in the incarcerated person's file.

If the investigating supervisor determines that sufficient evidence exists to support a major rule violation, the supervisor will act as the hearing coordinator and will be responsible for:

- Reviewing all reports for accuracy and completeness.
- Overseeing or conducting any required additional investigation.
- Making a determination as to the final charges.
- Making preliminary decisions about the appointment of a staff member to act as an assistant to the incarcerated person.
- Identifying any witnesses that may be called to the hearing.

#### 600.6 NOTIFICATIONS

An incarcerated person charged with a major rule violation shall be given a written description of the incident and the rules violated at least 24 hours prior to a disciplinary hearing.

Unless waived in writing by the incarcerated person, hearings may not be held in less than 24 hours from the time of notification (15 CCR 1081).

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#### 600.7 HEARING OFFICER

The Facility Commander shall appoint at least one hearing officer to preside and conduct disciplinary hearings of major rule violations. The hearing officer should be a qualified supervisor or suitably trained designee who will have the responsibility and authority to rule on charges of incarcerated person rule violations. The hearing officer shall also have the power to impose actions. The hearing officer shall not investigate nor preside over any incarcerated person disciplinary hearing on cases where the hearing officer was a witness or was directly involved in the incident that generated the complaint (15 CCR 1081).

#### 600.8 HEARING PROCEDURE

Incarcerated persons charged with major rule violations are entitled to be present at a hearing unless waived in writing or excluded because their behavior poses a threat to facility safety, security, and order (15 CCR 1081). Staff shall inform the hearing officer when any incarcerated person is excluded or removed from a scheduled hearing and shall document the reasons for the exclusion or removal. A copy of the report shall be forwarded to the Facility Commander.

Hearings may be postponed or continued for a reasonable period of time for good cause. Reasons for postponement or continuance shall be documented and forwarded to the Facility Commander (15 CCR 1081).

The hearing officer shall disclose to the accused incarcerated person all witnesses who will be participating in the hearing. Incarcerated persons have no right to cross-examine witnesses. However, the accused incarcerated person may be permitted to suggest questions that the hearing officer, in the hearing officer's discretion, may ask.

#### 600.8.1 EVIDENCE

Accused incarcerated persons have the right to make a statement, present evidence, and call witnesses at the hearing (15 CCR 1081). Requests for witnesses shall be submitted in writing by the incarcerated person no later than 12 hours before the scheduled start of the hearing. The written request must include a brief summary of what the witness is expected to say.

The hearing officer may deny the request when it is determined that allowing the witness to testify would be unduly hazardous to institutional safety or correctional goals, when the witness's information would not be relevant or would be unnecessarily duplicative, or is otherwise unnecessary. The reason for denying a witness to testify shall be documented in the hearing report. The reason for denial of any documents requested by the incarcerated person shall also be documented in the hearing record.

A witness's signed written statement may be submitted by the incarcerated person as an alternative to a live appearance. The hearing officer shall review and determine whether the statement is relevant to the charges and shall document the reason for exclusion when any written statement is not given consideration.

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Absent a safety or security concern, all staff reports and evidence, including exculpatory evidence, obtained during the disciplinary investigation shall be made available to the accused incarcerated person prior to the hearing.

#### 600.8.2 STAFF ASSISTANCE

A staff member shall be assigned to assist an incarcerated person who is incapable of self-representation at a disciplinary hearing due to limited literacy, developmental disabilities, language barriers, or mental status (15 CCR 1081). The scope of the duties of the assistant shall be commensurate with the reasons for the appointment. The assistant should be allowed sufficient time to confer with the incarcerated person to fulfill the individual's obligations. In these cases, the incarcerated person does not have a right to appoint a person to assist in the individual's disciplinary hearing. The final decision regarding the appointment rests with the hearing officer.

Incarcerated person discipline is an administrative and not a judicial process. Incarcerated persons do not have a right to an attorney in any disciplinary hearing. Additionally, disciplinary matters may be referred for criminal prosecution and jail disciplinary action concurrently as there is no double jeopardy defense for an administrative process.

#### 600.8.3 DISCIPLINARY DECISIONS

Disciplinary decisions shall be based on the preponderance of evidence presented during the disciplinary hearing.

The disciplinary process shall consider whether an incarcerated person's mental disabilities or mental illness contributed to the incarcerated person's behavior when determining what type of discipline, if any, should be imposed (28 CFR 115.78(c)).

#### 600.8.4 REPORT OF FINDINGS

The hearing officer shall write a report regarding the decision and detailing the evidence and the reasons for the disciplinary action. A copy of the report shall be provided to the incarcerated person. The original shall be filed with the record of the proceedings. All documentation related to the disciplinary process shall be retained and a copy should be placed in the incarcerated person's file (15 CCR 1081).

If it is determined that the incarcerated person's charge is not sustained at the end of the disciplinary hearing, the documentation shall be removed from the incarcerated person's file but otherwise maintained in accordance with records retention requirements.

All disciplinary hearing reports and dispositions shall be reviewed by the Facility Commander or the authorized designee soon after the final disposition (15 CCR 1081).

#### 600.9 DISCIPLINARY APPEALS

Incarcerated persons wishing to appeal the decision of the hearing officer must do so in writing within five days of the decision. All appeals will be forwarded to the Facility Commander or the authorized designee for review (15 CCR 1081).

Only appeals based on the following will be considered:

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- (a) The disciplinary process or procedures were not followed.
- (b) There was insufficient evidence to support the hearing officer's decision.
- (c) The discipline imposed was not proportionate to the violation committed.

A final disposition shall be rendered as soon as possible if the incarcerated person's appeal is granted or discipline is reduced but no later than 10 days after the appeal. The decision of the review authority shall be final and the result of the appeal shall be provided to the incarcerated person in writing.

#### 600.10 LIMITATIONS ON DISCIPLINARY ACTIONS

The U.S. and state constitutions expressly prohibit all cruel or unusual punishment, disciplinary actions shall not include corporate punishment, group punishment when feasible, or physical or psychological degradation (15 CCR 1083). Additionally, there shall be the following limitations:

- Disciplinary separation shall be considered an option of last resort and as a response
  to the most serious and threatening behavior, for the shortest time possible, and with
  the least restrictive conditions possible (15 CCR 1083).
- In no case shall any incarcerated person or group of incarcerated persons be delegated the authority to punish any other incarcerated person or group of incarcerated persons (Penal Code § 4019.5; 15 CCR 1083).
- In no case shall a safety cell, as specified in the Safety and Sobering Cells Policy, be used for disciplinary purposes (15 CCR 1083).
- In no case shall any restraint device be used for disciplinary purposes (15 CCR 1083).
- Food shall not be withheld as a disciplinary measure (15 CCR 1083).
- Correspondence privileges shall not be withheld except in cases where the incarcerated person has violated correspondence regulations, in which case correspondence other than legal mail may be suspended for no longer than 72 hours without the review and approval of the Facility Commander (15 CCR 1083).
- In no case shall access to the courts and/or legal counsel be suspended as a disciplinary measure (15 CCR 1083).
- No incarcerated person may be deprived of the implements necessary to maintain an acceptable level of personal hygiene (15 CCR 1083; 15 CCR 1265).
- Discipline may be imposed for sexual activity between incarcerated persons. However, such activity shall not be considered sexual abuse for purposes of discipline unless the activity was coerced (28 CFR 115.78(g)).
- No discipline may be imposed for sexual contact with staff unless there is a finding that the staff member did not consent to such contact (28 CFR 115.78(e)).
- No incarcerated person may be disciplined for falsely reporting sexual abuse or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation, if the report was made in good faith based upon a reasonable belief that the alleged conduct occurred (28 CFR 115.78(f)).

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#### Discipline

#### 600.11 GUIDELINES FOR DISCIPLINARY ACTIONS

Discipline shall be commensurate with the nature and circumstances of the offense committed, the incarcerated person's disciplinary history, and the actions imposed for comparable offenses by other incarcerated persons with similar histories (28 CFR 115.78(b); 15 CCR 1082).

In all cases, actions should be imposed for the purpose of controlling or changing an incarcerated person's behavior, promotion of desired behavior through a progressive disciplinary process, and not for the purpose of punishment (15 CCR 1082).

Acceptable forms of discipline shall consist of but not be limited to the following (15 CCR 1082):

- Loss of privileges
- Extra work detail
- Short-term lockdown for less than 24 hours
- Removal from work details
- Forfeiture of work time credits earned under Penal Code § 4019
- Forfeiture of good time credits earned under Penal Code § 4019
- Disciplinary detention

The Sheriff or the Facility Commander shall be responsible for developing and implementing a range of disciplinary actions for violations.

Incarceratedpersons shall be subject to disciplinary actions pursuant to a formal disciplinary process following an administrative finding that the incarcerated person engaged in incarcerated person-on-incarcerated person sexual abuse or following a criminal finding of guilt for incarcerated person-on-incarcerated person sexual abuse (28 CFR 115.78(a)).

To the extent that there is available therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for sexual abuse, the facility shall consider whether to require an incarcerated person being disciplined for sexual abuse to participate in such interventions as a condition of access to programming or other benefits (28 CFR 115.78(d)).

#### 600.12 TRAINING

The Facility Commander or the authorized designee is responsible for ensuring that a wide range of training and disciplinary tools are available to aid staff and that preprinted forms are available for documenting rule violations in a consistent and thorough manner.

The Training Lieutenant is responsible for developing and delivering, or procuring, training for staff members who participate in the disciplinary hearing process. Training topics should include the legal significance of due process protections and the hearing officer's role in assuring that those protections are provided.

## **Disciplinary Separation**

#### 601.1 PURPOSE AND SCOPE

This policy specifically addresses disciplinary separation and guiding principles relating to the conditions attached to that separation. It will provide guidance to the staff on acceptable practices with regard to management of incarcerated persons in disciplinary separation or classified as requiring special management needs.

#### 601.1.1 DEFINITIONS

Definitions related to this policy include:

**Disciplinary separation** - A status assigned to an incarcerated person after a disciplinary hearing in which the person was found to be in violation of a detention facility rule or state or federal law. This status results in separating the person from the rest of the incarcerated person population to serve the consequence imposed.

#### 601.2 POLICY

The Tulare County Sheriff's Office will maintain a disciplinary separation unit to house incarcerated persons who, after an impartial due process hearing, are being sanctioned for violating one or more detention facility rules. Restrictions on privileges will be subject to the disciplinary process and in accordance with this policy.

#### 601.3 DISCIPLINARY SEPARATION

Incarcerated persons may be placed into disciplinary separation only after an impartial hearing to determine the facts of the rule violation, in accordance with the office Discipline Policy. The hearing officer shall impose discipline in accordance with the discipline schedule established by the Facility Commander. Maximum discipline sanctions for any one incident, regardless of the number of rules violated, shall not exceed 60 days.

Disciplinary separation in excess of 30 days shall be reviewed by the Facility Commander before the discipline is imposed. The review shall include a consultation with health care staff. Such reviews shall continue at least every 15 days thereafter until the disciplinary status has ended. These reviews shall be documented (15 CCR 1082(g); 15 CCR 1083(a)).

#### 601.4 ACCESS TO SERVICES

The ability to discipline incarcerated persons for conduct violations is not absolute. Absent legitimate government reasons, incarcerated persons continue to have a right to receive certain services. However, incarcerated persons in disciplinary separation, in accordance with the Discipline Policy, or special management incarcerated persons who are disciplined for one or more rule violations, may be subject to loss of privileges or credit for good time and work time.

Services to provide for basic human needs must continue to be made available. There are minimum service requirements that must be maintained to ensure the facility continues to operate in a constitutional manner. All custody staff will adhere to the following policy sections to guide

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#### Disciplinary Separation

them in the supervision of incarcerated persons held in disciplinary separation or classified as requiring special management needs.

#### 601.4.1 MEDICATION, CLOTHING, AND PERSONAL ITEMS

Incarcerated persons placed in disciplinary separation are considered special management incarcerated persons and shall not be denied prescribed medication.

Special management incarcerated persons will be provided with clothing that identifies their status, but in no case will this clothing be used to intentionally disgrace the incarcerated person.

Absent unusual circumstances, special management incarcerated persons will continue to have the same access to personal items in their cell as general population incarcerated persons have, including the following:

- Clean laundry
- Barbering and hair care services
- Clothing exchanges
- Bedding and linen exchanges

Incarcerated persons in disciplinary separation shall not be deprived of bedding or clothing except in cases where the inmate destroys such articles or uses them to attempt suicide (15 CCR 1083(a) (2)). The decision to continue to deprive the incarcerated person of these articles must be made by the Facility Commander or the authorized designee and reviewed every 24 hours.

#### 601.4.2 SHOWERING AND PERSONAL HYGIENE

Incarcerated persons in disciplinary separation should be allowed to shower with the same frequency as the general population, if reasonably practicable, but at a minimum shall be afforded the opportunity to shower at least every other day and shave daily (15 CCR 1083(d)). The opportunities for each incarcerated person to shave and shower will be documented on the disciplinary separation unit log.

Exceptions to this policy can only be made when the restriction is determined to be reasonably necessary for legitimate government purposes. Any exceptions to this basic requirement must be reviewed and approved by the Shift Supervisor. The circumstances necessitating a restriction must be clearly documented on the unit log.

#### 601.4.3 DENIAL OF AUTHORIZED ITEMS OR ACTIVITIES

Personal items may be withheld when it reasonably appears that the items will be destroyed by the incarcerated person or it is reasonably believed that the personal item will be used for a selfinflicted injury or to harm others.

Whenever an incarcerated person in disciplinary separation is denied personal care items or activities that are usually authorized to the general population incarcerated persons, except for restrictions imposed as a result of a disciplinary hearing, the deputy taking such action shall prepare a report describing the circumstances that necessitated the need to restrict personal items

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or activities. The report shall be submitted to a supervisor for review, who will then forward it to the Facility Commander. A copy of the report shall be placed in the incarcerated person's file.

#### 601.4.4 MAIL AND CORRESPONDENCE

Incarcerated persons in disciplinary separation shall have the same privileges to write and receive correspondence as incarcerated persons in general population, except in cases where incarcerated persons violated correspondence regulations. In such cases, mail privilege may be suspended. The Facility Commander or the authorized designee shall approve all mail privilege suspensions that exceed 72 hours. Legal mail shall not be suspended from delivery to the incarcerated person (15 CCR 1083(f)).

#### 601.4.5 VISITATION

Incarcerated persons in disciplinary separation shall have the same opportunities for visitation as general population incarcerated persons, except when the visitation privileges are suspended pursuant to a sanction imposed by the disciplinary hearing officer. Disciplinary sanctions that limit or curtail visitation must be clearly documented and approved by a supervisor if not a condition of the original approved discipline.

#### 601.4.6 READING AND LEGAL MATERIALS

Incarcerated persons in disciplinary separation shall have the same access to reading materials and legal materials as the general population incarcerated persons, unless the restriction is directed by a court of law or there is a reasonable basis to believe the materials will be used for illegal purposes or pose a direct threat to the security and safety of the facility. In such cases the basis for the action shall be documented in the incarcerated person's file and unit log. Access to courts and legal counsel shall not be suspended as a disciplinary measure (15 CCR 1083(g)).

#### 601.4.7 EXERCISE

Incarcerated persons in disciplinary separation shall be given a minimum of three hours of exercise per week outside of their cell. Exceptions to this may occur if there are legitimate security or safety considerations. The circumstances relating to the limitation of exercise shall be documented in an incident report. The report shall be reviewed and the restriction shall be approved by a supervisor.

#### 601.4.8 LIMITED TELEPHONE PRIVILEGES

Incarcerated persons in disciplinary separation may have their telephone privilege restricted or denied. Exceptions include the following:

- (a) Making legal calls
- (b) Responding to verified family emergencies, when approved by the sergeant or Facility Commander

All telephone access based on the above exceptions shall be documented on the unit log.

#### 601.4.9 BEDDING AND CLOTHING

Incarcerated persons in disciplinary separation shall not be deprived of bedding or clothing except in cases where the person destroys such articles or uses them for self-harm or to harm others

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or for something other than the intended purpose. Clothing and bedding shall be returned to the incarcerated person as soon as it is reasonable to believe the behavior that caused the action will not continue. The decision to continue to deprive the incarcerated person of these articles must be made by the Facility Commander or the authorized designee and reviewed at least every eight hours. This review shall be documented and placed into the incarcerated person's file.

#### 601.5 DIET

Under no circumstances will an incarcerated person be denied food as a means of punishment (15 CCR 1083(e)).

#### 601.6 SAFETY CHECKS

A staff member shall conduct a face-to-face safety check of all disciplinary separation incarcerated persons at least every 30 minutes on an irregular schedule. If an incarcerated person is violent, has mental health problems, or demonstrates unusual behavior, the face-to-face check by custody should occur every 15 minutes on an irregular schedule.

Incarcerated persons who are at risk of suicide shall be under continuous observation until seen by a qualified health care professional. Subsequent supervision routines should be in accordance with orders provided by the qualified health care professional.

Disciplinary separation incarcerated persons shall receive increased monitoring to include at a minimum:

- (a) A visit by the Shift Supervisor once a day.
- (b) Visits by program staff, upon request.
- (c) Visits by a qualified health care professional a minimum of once a day and more often, if needed.

All management, program staff, and qualified health care professional visits shall be documented on the appropriate records and logs and retained in accordance with established records retention schedules.

## **Incarcerated Persons with Disabilities**

#### 602.1 PURPOSE AND SCOPE

This policy provides guidelines for addressing the needs and rights of incarcerated persons detained by this office in accordance with the Americans with Disabilities Act (ADA).

#### 602.1.1 DEFINITIONS

Definitions related to this policy include:

**Disability** - The ADA defines a disability as a physical or mental impairment that limits one or more major life activities. These include, but are not limited to, any disability that would substantially limit the mobility of an individual or an impairment of vision and/or hearing, speaking or performing manual tasks that require some level of dexterity.

#### 602.2 POLICY

This office will take all reasonable steps to accommodate incarcerated persons with disabilities while they are in custody and will comply with the ADA and any related state laws. Discrimination on the basis of disability is prohibited.

#### 602.3 FACILITY COMMANDER RESPONSIBILITIES

The Facility Commander, in coordination with the Responsible Physician and the ADA Coordinator (see the Accessibility - Facility and Equipment Policy), will establish written procedures to assess and reasonably accommodate disabilities of incarcerated persons. The procedures will include but are not limited to:

- (a) Establishing housing areas that are equipped to meet the physical needs of disabled incarcerated persons, including areas that allow for personal care and hygiene in a reasonably private setting and for reasonable interaction with incarcerated persons.
- (b) Establishing classification criteria to make housing assignments to incarcerated persons with disabilities.
- (c) Assigning individuals with adequate training to assist disabled incarcerated persons with basic life functions, as needed.
- (d) Establishing transportation procedures for moving incarcerated persons with limited mobility.
- (e) Establishing guidelines for services, programs, and activities for the disabled and ensuring that incarcerated persons with disabilities have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect and respond to sexual abuse and sexual harassment (28 CFR 115.16).
- (f) Enlisting or contracting for trained service personnel who have experience working with people with disabilities.
- (g) Establishing procedures for the request and review of accommodations.

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#### Incarcerated Persons with Disabilities

- (h) Establishing guidelines for the accommodation of individuals who are deaf or hard of hearing, have common disabilities such as sight and mobility impairments and developmental disabilities, or have common medical issues, such as epilepsy.
- (i) Identifying and evaluating all incarcerated persons with developmental disabilities, including contacting the regional center for the developmentally disabled to assist with diagnosis and/or treatment within 24 hours of identification, excluding holidays and weekends (15 CCR 1057).

The Facility Commander is responsible for ensuring the Tulare County Sheriff's Office detention facility is designed or adapted to reasonably accommodate incarcerated persons with disabilities. At a minimum this includes:

- Access to telephones equipped with a telecommunications device for the deaf (TDD) for incarcerated persons who are deaf, are hard of hearing, or have a speech impairment.
- If orientation videos are used to explain facility rules to newly admitted incarcerated persons, subtitles may be displayed on the video presentation to assist incarcerated persons who have impaired hearing.
- Some cells and dormitories should be equipped with wheelchair-accessible toilet and shower facilities. Incarcerated persons with physical disabilities should be allowed to perform personal care in a reasonably private environment.
- Tables designed for eating should be accessible to those in wheelchairs.

#### 602.4 DEPUTIES' RESPONSIBILITIES

Deputies should work with qualified health care professionals to aid in making accommodations for those with physical disabilities.

Deputies who work in the classification process should be aware of incarcerated persons with disabilities before making housing decisions. For example, persons with mobility issues may require a lower bunk and accessible toilet and shower facilities. When necessary or required, a supervisor of the classification deputy should consult with the qualified health care professional or the Responsible Physician regarding housing location.

Deputies should assist an incarcerated person with a disability by accommodating the incarcerated person consistent with any guidelines related to the incarcerated person's disability. If there are no current guidelines in place, deputies receiving an incarcerated person request for accommodation of a disability should direct the incarcerated person to provide the request in writing or assist the incarcerated person in doing so, as needed. The written request should be brought to the on-duty supervisor as soon as practicable but during the deputy's current shift. Generally, requests should be accommodated if the accommodation would not raise a safety concern or affect the orderly function of the detention facility. The formal written request should still be submitted to the onduty supervisor.

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#### Incarcerated Persons with Disabilities

Requests that are minor and do not reasonably appear related to a significant or ongoing need may be addressed informally, such as providing extra tissue to an incarcerated person with a cold. Such requests need not be made in writing.

#### 602.5 ACCOMMODATION REQUESTS

Incarcerated persons shall be asked to reveal any accommodation requests during the intake classification process. Any such request will be addressed according to the classification process.

Requests for accommodation after initial entry into the facility should be made through the standard facility request process and should be reviewed by a supervisor within 24 hours of the request being made. The reviewing supervisor should evaluate the request and, if approved, notify the Facility Commander, ADA Coordinator (see the Accessibility - Facility and Equipment Policy) and any other staff as necessary to meet the accommodation. The supervisor should make a record of the accommodation in the incarcerated person's file.

A supervisor who does not grant the accommodation, either in part or in full, should forward the request to the Facility Commander and the ADA Coordinator within 48 hours of the request being made. The Facility Commander, with the assistance of the ADA Coordinator and/or legal counsel, should make a determination regarding the request within five days of the request being made.

#### 602.6 TRAINING

The ADA Coordinator should work with the Training Lieutenant to provide periodic training on such topics as:

- (a) Policies, procedures, forms, and available resources for incarcerated persons with developmental disabilities.
- (b) Working effectively with interpreters, telephone interpretive services and related equipment.
- (c) Training for management staff, even if they may not interact regularly with disabled individuals, so that they remain fully aware of and understand this policy and can reinforce its importance and ensure its implementation.

## **Inmate Access to Courts and Counsel**

#### 603.1 PURPOSE AND SCOPE

The purpose of this policy is to protect the constitutional rights of inmates to access the courts and legal counsel, while holding inmates accountable to the rules and regulations that govern conduct in this facility. The staff at every level is reminded the fundamental constitutional right of access to courts does not end when a person is incarcerated.

#### 603.2 POLICY

It is the policy of this office that all inmates will have access to the courts and the ability to consult with legal counsel (15 CCR 1068).

#### 603.3 INMATE ACCESS

Staff should not unreasonably interfere with inmates' attempts to seek counsel and where appropriate should assist inmates with making confidential contact with attorneys and authorized representatives.

Access to courts and legal counsel may occur through court-appointed counsel, attorney or legal assistant visits, telephone conversations or written communication. To facilitate access, this facility will minimally provide:

- Confidential attorney visiting areas that include the means by which the attorney and the inmate can share legal documents.
- Telephones that enable confidential attorney-client calls.
- Reasonable access to legal materials.
- A means of providing assistance through the court process by individuals trained in the law. This assistance will be available to illiterate inmates and those who cannot speak or read English or who have disabilities that would impair their ability to access.
- Writing materials, envelopes and postage for indigent inmates for legal communications and correspondence.

The Facility Commander shall be responsible for ensuring that information regarding access to courts and legal counsel and requesting legal materials or legal assistance is included in the inmate handbook.

#### **603.4 CONFIDENTIALITY**

All communication between inmates and their attorneys is confidential, including telephone conversations, written communication and video conferencing. The content of written attorney-client communication will not be reviewed or censored but the documents may be inspected for contraband.

Outgoing and incoming legal correspondence shall be routed through the staff, who have received special training in inspecting confidential documents and who are accountable for maintaining

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#### Inmate Access to Courts and Counsel

confidentiality. Incoming legal correspondence shall be opened and inspected for contraband in the presence of the recipient inmate.

Inmates may seek the assistance of other inmates in writing writs and other legal correspondence to the courts, when needed subject to the security and safety needs of the inmates, staff and the facility.

#### 603.5 VISITATION RELATED TO LEGAL DEFENSE

Visits with inmates that are related to legal defense, including attorneys, paralegals and investigators, will be permitted only in the areas designated for legal visitation or by way of video visitation to assure confidentiality (15 CCR 1068(b)). Contact visits may be approved by the Facility Commander for special circumstances.

- (a) Visits shall be of a reasonable length of time to discourage any allegation the defense of the inmate was hindered due to the length of time allowed for the legally authorized visit. These visits shall be of such a length of time that they do not interfere with the security, order and discipline of this facility. The permissible time for visitation should be flexible but shall not substantially interfere with other facility schedules, such as medical examinations, meal service or other required activities.
- (b) Only materials brought to this facility by an approved legal assistant shall be allowed.
- (c) All materials shall be subject to security inspections by the staff and shall be routed through the Shift Supervisor for logging and distribution.

#### 603.6 MAIL

Legal mail shall be handled in accordance with the Inmate Mail Policy.

#### 603.7 IN PROPRIA PERSONA (PRO PER) INMATES

Inmates may be granted pro per status by court order only. Any time a court order is received designating an inmate as having been granted pro per status, all relevant records systems at the facility shall be updated to reflect this information. A copy of the court order shall be maintained in the inmate's file in accordance with established records retention schedules.

The court may, but is not required to, appoint to an inmate who is designated pro per a back-up attorney, paralegal or other person to assist the inmate with legal research. All information related to appointed assistants should be recorded in the relevant facility records.

Any provision of legal materials shall be in accordance with court directives and in consultation with the County Counsel.

#### 603.7.1 PRO PER STATUS MISUSE

Any inmate who is granted pro per status and is found to be misusing or abusing that status to the extent that it poses a demonstrable threat to the safety and security of the facility shall be immediately reported to the Facility Commander and Compliance Lieutenant. The Facility Commander and/or the Compliance Lieutenant may recommend the suspension or a limitation

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of the inmate's pro per privileges if they adversely affect the safety and security of the detention facility.

Upon the concurrence with the findings and recommendation of the Facility Commander or the Compliance Lieutenant, Sheriff or the authorized designee shall consult with the Office's legal counsel prior to notifying the court of any intent to limit the described pro per privileges.

The inmate may petition the court if he/she is dissatisfied with the action taken.

#### 603.7.2 PRO PER STATUS - MATERIALS AND SUPPLIES

The facility may provide the following materials and supplies to a pro per inmate. These items may be retained by the inmate but must be kept in the container supplied for such purpose. The items may include:

- Up to one-half of a ream of 8½-inch x 11-inch plain bond typing paper
- Up to three ruled legal notepads
- Standard legal size envelopes
- One dozen (maximum) black lead golf pencils
- Two erasers
- One legal size accordion file
- 9-inch x 12-inch manila envelopes and 10-inch x 14-inch manila envelopes
- Up to a maximum of four law books at one time (paperback)

Unless otherwise ordered by the court, the Office shall have no obligation to supply materials beyond those listed above. Replacement of any of the listed items shall be accomplished through a written request to the Shift Supervisor or the authorized designee. Supplies provided by a court legal liaison will be received and distributed by the Shift Supervisor or the authorized designee. All supplies distributed to the inmate will be recorded in the inmate's pro per activities record. Supplies not listed in this policy are subject to approval by the Facility Commander or the authorized designee.

Access to ballpoint pens, for signature purposes only, will be provided through a supervisor. The use of the pen will be supervised by the staff and taken from the inmate immediately after its use.

Copies of an inmate's final legal (criminal case) work product, upon the inmate's request, may be provided subject to arrangements with the court.

Inmates may purchase their own legal books and materials. However, such materials will be subject to safety inspection and rules pertaining to items permitted to be in the inmate's possession. Personal books must be marked with the inmate's name and booking number.

Any books or materials found in the inmate's possession beyond what is authorized will be returned or placed in the inmate's property.

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#### 603.7.3 PRO PER INMATES INTERVIEWING WITNESSES

A proper inmate may be permitted to interview prospective witnesses in the regular visitation area. Requests for visits outside of normal visiting hours will be directed to a supervisor for approval and should be accommodated when practicable.

Interviews conducted by pro per inmates are subject to the following rules and restrictions:

- (a) No interview will be permitted without notification from a judge confirming or validating the prospective witness. The pro per inmate is responsible for providing the judge with the list of prospective witnesses for validation.
- (b) No visit shall be permitted by a prospective witness who is in the custody of this office or otherwise detained by a government agency, except upon a specific court order.

#### 603.7.4 TELEPHONE USAGE

Pro per inmates may use the telephones in their housing areas to place calls concerning their cases. Court-authorized pro per telephone calls shall not be monitored and shall be provided without charge to the inmate in accordance with the orders of the court (see the Inmate Telephone Access Policy).

## **Release to Other Agencies**

#### 604.1 GENERAL

**GENERAL**:

Inmates sentenced to the California Department of Corrections or who have "Holds" pending in other jurisdictions, may be released to an authorized transporting agency.

Pursuant to Penal Code, Section 822, an agency placing a hold on an inmate will have five (5) court days to pick him/her up if no additional charges are pending and the inmate is time served in Tulare County.

Inmates who are attending court proceedings or who have additional charges pending, may be released to another jurisdiction if the transporting agency presents a Superior Court order with a return clause. A detainer letter detailing any hold for Tulare County or another jurisdiction will be sent with the inmate.

#### 604.2 ICE HOLDS

ICE HOLDS: The intake/release deputy will notify the on--duty shift sergeant each day of any ICE HOLD and the release date of the inmate(s). The on-duty shift sergeant will notify ICE five (5) days prior to release date of inmate and advise ICE they have five days to pick up. If ICE picks up within five days, the inmate will be released to the custody of ICE. If ICE has not picked up the inmate on the day of his/her release date, the inmate will be released (time served). Refer to the below guidelines.

If the inmate meets any of the following requirements outlined in the California Trust Act and is serving his or her sentence within a Tulare County Detention Facility, excluding the Day Reporting Center:

- a. The inmate has been convicted of a serious or violent felony as defined in subdivision (c) of section 1192.7 of, or subdivision (c) of section 667.5 of the Penal Code.
- b. The inmate has been convicted of a felony punishable by imprisonment in the state prison.
- c. The inmate has been convicted within the past 5 years of a misdemeanor or felony for, or has been convicted at any time for a felony for any offenses stated in subdivision (a)(3) of Section 7282.5 of the Government Code.
- d. The inmate is a current registrant on the California Sex and Arson Registry.
- e. The inmate is arrested on any of the aforementioned crimes and a magistrate finds probable cause to charge the inmate of such crimes pursuant to Section 872 of the Penal Code.
- f. The inmate has been convicted of a federal crime that meets the definition of an aggravated felony as set forth in subparagraphs (A) to (P), inclusive, of paragraph (43) of subsection (a) od Section 101 of the Federal Immigration and Nationality Act (8 U.S.C. Sec. 1101), or is identified by the United States Department of Homeland Security's Immigration and Customs Enforcement as the subject of an outstanding felony arrest warrant.

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#### Release to Other Agencies

If an inmate has an ICE HOLD and goes to court and the court orders the inmate released time served, or no case filed, the inmate will be released immediately and will not be held on the ICE HOLD.

#### 604.3 ICE HOLDS

ICE HOLDS: If an inmate is being held on an ICE HOLD and serving time, the following notification procedure will be followed:

- a. Inmates with ICE Holds will be given a copy of the immigration hold within a reasonable time after the immigration hold is received by the Tulare County Sheriff's Office, and not to exceed 24 hours.
- b. After providing the inmate with a copy of the immigration hold the deputy will ask the inmate if he or she wishes to challenge the immigration hold. If he or she does, the deputy will allow the inmate to make the following phones calls promptly and at no cost: (1) to call either or both of the ICE telephone complaint numbers provided on the immigration hold form; (2) call an attorney or an immigration services provider; and (3) a call to a family member.
- c. The Deputy will obtain signed confirmation from the inmate who is to be detained on an immigration hold confirming the inmate received a copy of the immigration hold and was given an opportunity to make the required phone calls.
- d. All detention facilities housing inmates will maintain a record/log of the signed confirmations for two years. A copy of the signed immigration confirmation notice will be maintained with the inmate's booking jacket.

#### 604.4 OUT OF COUNTY

The agency that has placed a hold on an inmate that is serving local time at any Tulare County Detention Facility will be notified five (5) days prior to the inmate's local release date if under 400 miles and seven (7) days if over 400 miles that the inmate is available for pick-up by that agency.

#### PROCEDURE:

The Intake/Release Deputy will:

Prepare a detainer letter if required.

Notify the Shift Supervisor of the pick-up.

Notify the Housing Unit Control Deputy of the pick-up.

Double check all the paper work and complete the "Released to" section of the booking sheet.

#### The Shift Supervisor will:

Confirm the pick-up time from the transporting agency.

Confirm that a detainer letter is prepared when needed.

#### The Rove Deputy will:

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#### Release to Other Agencies

Obtain the clothing bag from the Intake/Release Deputy and have the inmate dressed out.

Assist the Intake/Release Deputy as needed in the release of the inmate.

#### The Intake/Release Deputy will:

Receive the inmate from the Rove Deputy and place in a holding cell.

Place the inmate's personal property, money and any other items he/she may have with them in a paper bag with their name and I.D. number on it.

Give the bag to the Transporting Deputy.

Have the Transporting Deputy sign the booking sheet in the "Released to" section as receiving officer.

Log the removal in the Shift Activity Log.

All male inmates being picked up by the California Department of Corrections will not be dressed out until the transport arrives and then will be dressed out in California Department of Corrections coveralls. Any personal clothing will be placed in a paper bag together with his money and property. Property of the inmate should be released to the family members prior to the inmate's departure.

## **Pro-Per Inmates**

#### 605.1 DEFINITION:

The Tulare County Sheriff's Department acts in obedience to court orders allowing inmates that wish to represent themselves as their own attorney as per propria persona or "Pro Per" in court on their local criminal charges. These inmates need to be designated by the local court as Pro Per inmates through court order.

#### **605.2 GENERAL:**

This policy memorandum, which is the exclusive body of rules and regulations governing incustody defendants acting in propria persona or "Pro-Per" in Tulare County criminal proceedings, delineates the privileges granted to those defendants acting in Pro-Per within Tulare County Detention Facilities.

Persons representing themselves in any civil matter, e.g. child custody, child support, ect. will receive the same law library access privileges as other non Pro-Per inmates.

#### 605.3 PROCEDURES:

#### 605.3.1 JURISDICTION:

A. The exclusive body of rules and regulations governing in-custody defendants acting in pro persona or "Pro Per" in Tulare County criminal proceedings, delineates the privileges granted to those defendants acting in Pro Per in Tulare County Detention Facilities.

#### 605.3.2 SHERIFF'S AUTHORITY:

A. The exclusive authority to house inmates and take such actions authorized by law, as is necessary to maintain jail security, discipline, safety, and provide for the operation of the jails.

#### 605.3.3 PRO PER COMMITTEE:

- A. A committee consisting of:
  - 1. A Judge of the Superior Court.
  - 2. An Attorney of the Public Defender's Office.
  - 3. An Attorney of the County Counsel's Office.
  - 4. A member of the Sheriff's Department.
- B. The committee will meet, no less than once annually to review this policy and procedures.
- C. The committee may make recommendations to the Sheriff on suggested changes to this policy and procedures

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#### 605.3.4 PRO PER LIAISON OFFICER:

- A. The Tulare County Sheriff's Department shall designate one or more officers as Pro Per Liaison between the Pro Per inmate, the Sheriff's Department and the Court.
- B. The Sheriff's Department shall direct a copy of all Pro Per Court orders to the Pro Per Liaison officer, including any existing orders and any new orders, including those which modify or revoke existing orders.
- C. The Liaison officer shall be responsible to maintain a Pro Per file consisting of all court orders involving the Pro Per status and privileges as to each Pro Per inmate.
- D. If a Pro Per inmate has a concern as to his or her Pro Per privileges, he or she shall first advise the liaison officer of the concern in writing and in detail. The liaison officer may consult with the applicable facility commander, appropriately address the concern, attempt to dispose of the concern informally, and respond to the Pro Per inmate in writing within ten (10) days of receipt of the concern as to what action, if any, will be taken.
- E. Issues concerning privileges are not grieve-able.
- F. Pro Per inmates seeking relief should be directed to the courts.
- G. Pro Per inmates Notification:
  - 1. All inmates which are granted Pro Per status through court order, shall be given a copy of this policy and procedures.
  - 2. The inmate shall sign an acknowledgment of receipt of these procedures.

#### 605.3.5 PRO PER INMATES HOUSING CONSIDERATIONS:

- A. Pro Per inmates will be housed by classification and at locations designated by the Sheriff, which provides security, order and safety.
- B. Pro Per inmates will not receive any privileges that are not granted to any other inmate, except as specifically outlined within these procedures or provided by Court Order.

#### 605.3.6 LAW LIBRARY ACCESS PRIVILEGES:

- A. The Sheriff shall provide and maintain law library access for use by inmates granted Pro Per status per court order. The law library materials may be in printed format, or accessible by electronic means, or both.
- B. Law Library access is provided primarily to permit effective access for all inmates to the Court, including Pro Per inmates, and inmates who intend to attack their sentences or challenge the conditions of their confinement.
- C. The law library can also be accessed by non Pro Per inmates.
- D. The Sheriff will not be responsible for providing any computer instruction.
- E. The use of the law library access is restricted only to legal research directly related to an inmate's case.
- F. All inmates are expected to utilize time in their cell to prepare for court hearings and trials.

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- G. Inmates violating this section will be verbally warned, and may be summarily removed from the library for the balance of that particular session. The verbal warning shall be documented.
- H. Repeated violations shall result in further disciplinary action with possible loss of Pre Per status or Pro Per privileges.
- The Sheriff will designate the time and place of an inmate's law library access, and may assign inmates into groups based upon safety, security, and efficient use of available facilities.
- J. Inmates may be moved to a law library within the institution(s) or deliver law library services to the inmate's housing assignment.
- K. The Sheriff shall maintain a log which shows the time and date each inmate uses the law library. The log shall be retained for five (5) years.
- L. Pro Per inmates will be given ten (10) hours of law library access in three to five (3-5) sessions over a seven day period (Monday thru Sunday).
- M. When requested, non Pro Per inmates will be given law library access as time permits. Pro Per inmates will receive priority access over non Pro Per inmates.
- N. It is the inmate's responsibility to make him/herself available for the law library during his or her scheduled time.
- O. The Sheriff will notify the Pro Per inmate of his or her scheduled time, at least thirty (30) minutes in advance.
- P. The Pro Per inmate is obligated to be prepared to be escorted to the law library.
- Q. Delays in escorting the inmate to the law library, caused by the inmate, will be documented and will result in verbal warning.
- R. Repeat violators shall receive further disciplinary action with possible loss of Pro Per status or Pro Per privileges.
- S. The Sheriff may, but is not required to, provide make up time.
- T. The Sheriff is under no obligation to provide any law books, other legal reference materials, copies thereof, to any inmate in his or her living area.
- U. If the inmate is provided law library access or materials within his or her cell, the inmate is responsible for the safe return of those materials.
- V. If during a Pro Per inmate's scheduled law library access time, he or she voluntarily suspends access for an interview, or any other reason, the scheduled time in the law library continues until that scheduled time is over.
- W. All inmates exercising Pro Per privileges have an affirmative duty to exercise these privileges in such a manner as not to infringe upon the exercise of other Pro Per inmates privileges.
- X. Possession of any law library materials in an inmate's cell other than during scheduled law library access time, or with the Sheriff's consent or pursuant to Court order, shall be considered contraband. The possession of such contraband, or the theft, damage or destruction of law books or source materials, will result in discipline.

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Y. Any violations of the above rules by Pro Per inmates will be documented and can result in possible loss of Pro Per privileges and/or Pro Per status.

#### 605.3.7 LAW LIBRARY TELEPHONE PRIVILEGES:

- A. A telephone shall be maintained for use during normal law library time, and made available for Pro Per inmates to contact their:
  - Witnesses.
  - 2. Investigator(s).
  - 3. Runner(s).
  - 4. Or other persons specifically authorized by Court order (collectively "authorized legal assistants").
- B. All phone calls made in the law library shall be related to the inmate's case. All calls will be at the inmate's expense and must be pre-paid through the Sheriff's Department.
- C. The Sheriff may restrict telephone use to outgoing calls. Non Pro Per inmates will not receive any special telephone privileges.
- D. All calls will be made at the inmate's expense unless determined to be indigent by court order.
- E. Indigent Pro Per inmates may contact the Court and request funds to be placed on their pre-paid telephone account.
- F. Any Pro Per inmate who does not receive any money from the Court for phone calls can have their authorized legal assistant(s) or others deposit money on their pre-paid telephone account by contacting the Tulare County Sheriff's Department Bob Wiley Detention Facility administration office, between the hours of 8:00 am and 4:00 pm, Monday thru Friday.
- G. A maximum of \$40.00 may be deposited onto the pre-paid telephone card during any seven day period (Monday thru Sunday).
- H. Money deposited must be in the form of the U.S. Postal Service money order.
- I. Once a pre-paid telephone account is established, a Pro Pre inmate will be given a pin number to use to access a pre-paid phone account for all legal calls.
- J. Use of the pin number will deduct money from the pre-paid telephone account, and turn off all telephone recording and call branding systems.
- K. The pre-paid account system is for legal calls only.
- L. Pro Per inmates are required to use the normal inmate telephone calling system for non-legal related calls.
- M. Inmates violating this section will be verbally warned, and will be expected to reimburse the Sheriff's Department for any unauthorized charges, and may lose telephone access until the calls have been paid for.
- N. The Court with jurisdiction shall be notified in writing if law library telephone privileges are suspended.

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O. Violations of these rules related to the use of the telephone shall result in discipline and possible loss of Pro Per privileges, including, but not limited to, the loss of the privilege to make telephone calls.

#### 605.3.8 LAW LIBRARY EQUIPMENT:

- A computer with legal research capability will be maintained for law library access.
- B. Inmates may use the computer to prepare their criminal case.
- C. The Sheriff will not be responsible for providing any computer instruction.
- D. The computer will not have printing capability.
- E. Pro Per inmates needing copies, must obtain them from their authorized legal assistant(s).
- F. Motions to the court may be typed or hand-written provided they are legible.
- G. The Court will accept motions on any type of paper and in pencil.
- H. Audio and Video equipment will also be maintained and provided for use by Pro Per inmates during their law library access time.
- Inmates that have audio or video tapes that are related to their criminal case may use the audio and video equipment exclusively for their criminal case preparation and not for entertainment.
- J. All such equipment must be checked out and in by staff after each law library access session.
- K. Audio and video equipment necessary to review audio tapes and video tapes will only be supplied by the jail.
- L. Authorized legal assistant(s) and other persons will not be permitted to bring this type of equipment into the jail facility.
- M. An inmate who damages any equipment, either intentionally or through misuse, will be held responsible for any damage caused, beyond normal wear and tear, and the inmate will be disciplined, including, but not limited to, being required to pay for the cost of repair or replacement of that equipment, loss of access to that equipment, and/ or loss of Pro Per privileges or Pro Per status.

#### 605.3.9 LEGAL VISITS:

- A. Inmates granted Pro Per status shall receive visitation time to confer with their authorized legal assistant(s), and/or witnesses.
- B. The Court will notify the jail division of the identity of any investigator, runner or any other person that the Court has authorized to assist the Pro Per inmate with the inmate's case.
- C. If there has not been any notification from the Court, the Sheriff has the right to refuse access to any such person.
- D. Pro Per inmates will be permitted up to one such visit daily, Monday thru Friday, by their authorized legal assistant.

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- E. It will be the Pro Per inmate's responsibility to coordinate with his/her assistant to prevent multiple arrival times on the same day.
- F. Access to the jail facility by the Pro Per inmate's assistant will be limited to the available times posted for other authorized legal assistants from non Pro Per inmates (i.e. attorneys and investigators).
- G. Access by the Pro Per inmate's authorized legal assistant(s), and witnesses as permitted by this Policy and Procedures, will be non-contact.
- H. Pro Per inmates that need to interview witnesses shall do so via the telephone or through their authorized legal assistants.

#### 605.3.10 LEGAL RUNNER:

- A. Pro Per inmates may request one person to act as a legal runner, if they are not receiving assistance from Court-appointed investigators.
- B. The legal runner must be pre-approved by the Sheriff and may be rejected for security reasons.
- C. The Sheriff will have up to ten (10) days to approve or reject a legal runner.
- D. The legal runner may be used to pick up or deliver one package per calendar day. Pick ups and deliveries will be limited to the hours between 9:00 am and 8:00 pm.
- E. Materials that may be picked up or delivered will be legal materials and/or office supplies via commissary.
- F. Non legal mail, books, periodicals, news papers or any other items not specifically approved, may not be sent through a legal runner.
- G. Items to be sent out of the jail, via a legal runner must be prepared by the inmate and inspected by the Sheriff.
- H. The items will then be placed into an envelope, no larger than a 10" x 13" manila envelope.
- I. The receiving deputy will write on the outside of the envelope that the contents were inspected, date and time.
- J. Inmates must supply their own envelopes.
- K. Items being brought to the jail by the legal runner will be placed into a sealed envelope, no larger than a 10" x 13" manila envelope.
- L. The envelope will be taken to the inmate, within a reasonable amount of time and will be inspected in the inmate's presence.
- M. Any unauthorized items found will be seized and an incident report will be written.
- N. Abuse of this privilege will result in discipline and may result in loss of Pro Per status or Pro Per privileges.

#### 605.3.11 LEGAL MATERIALS & LEGAL CORRESPONDENCE:

A. Pro Per inmates may accumulate legal material to include:

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- 1. Reports.
- 2. Notes.
- Court documents.
- 4. And other materials relating to their criminal case.
- B. The volume of materials the Pro Per inmate may posses at one time is limited to what can be stored inside one (1) paper board box, commonly known as a Banker's box.
- C. The lid of the box must fit snugly onto the box.
- D. The box's approximate dimensions are 12 ½"W x 16"L x 10"H.
- E. Any other materials needed for the criminal case must be stored in a secured area at a location selected by the facility manager.
- F. It is the responsibility of the inmate to keep any legal materials separate and apart from his or her other personal property.
- G. The Sheriff may treat any legal materials which are stored with items of personal property, as personal property.
- H. It will be the Pro Per inmate's responsibility to arrange for the exchange of materials.
- I. Materials may be transported in and out of the jail, via the authorized legal assistant(s).
- J. All materials entering or leaving the jail will be subject to inspection.
- K. It is the inmate's responsibility to store the materials within his or her living area in a safe and sanitary fashion.
- L. If the accumulated materials jeopardize the safety or security of the facility, the Sheriff may request the inmate to take appropriate remedial action.
- M. If the inmate fails to take such remedial action within a reasonable amount of time, the Sheriff may remove excess property, as designated by the inmate, if applicable, otherwise at the Sheriff's reasonable discretion.
- N. Property removed may be stored by the Sheriff on behalf of the inmate or released to an authorized legal assistant, or any person designated by the inmate.
- O. Legal materials may be searched only in the presence of the inmate.
- P. The Sheriff may inspect the materials for contraband, but cannot read the contents of the materials.
- Q. Incoming and outgoing legal correspondence may be searched for contraband only in the presence of the inmate or authorized legal assistant.
- R. Legal Correspondence (legal mail) is any confidential communication between an inmate and any state or federal court, with any attorney licensed to practice law in any state or the District of Columbia, the holder of any public office, the Corrections Standards Authority, and facility commander where the inmate may be housed or the Sheriff.

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- S. Legal Correspondence must be clearly indicated on the outside of the envelope that it is legal correspondence.
- T. Upon the transfer of a Pro Per inmate to another facility, he or she will be allowed to maintain possession of his or her legal material during the transfer.
- U. If an emergency requires an inmate's separation from his or her legal material, the legal material will be sealed and stored with the inmate's name or released to any person designated by the inmate.

#### 605.3.12 LEGAL SUPPLIES:

- A. Pro Per inmates may possess office supplies to assist in the preparation of their criminal case.
- B. The supplies must be stored in the same box as their legal materials.
- C. All limitations to volume apply.
- D. Inmates must purchase their own office supplies through a vendor approved by the Sheriff.
- E. The supplies may be purchased from the inmate's personal funds or through approved court funds.
- F. Inmates may possess the following office supplies:

Accordian file folders	"Post-It" note pads	File folders
10" x 13 envelopes	Plain bond paper	Envelopes
Plastic paperclips	Erasers	Pencils
Legal Pads		Stamps
Cord or plastic fasteners to secure pages or transcriptions		

#### G. Items not permitted:

- 1. Ink pens.
- 2. Markers.
- 3. Items with metal parts.
- 4. Metal fasteners, including staples.
- 5. Carbon paper.
- H. Photocopies must be provided by the Pro Per inmate's authorized legal assistant.

#### 605.3.13 REQUESTS FOR ADDITIONAL PRIVILEGES:

A. Pro Per inmates wanting additional or special privileges or treatment different from what is provided in this policy and Procedures shall first submit the request in writing to the liaison officer.

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- B. The inmate must specifically state his or her request and reason(s) for, along with the duration of, the special privilege(s).
- C. The liaison officer shall respond in writing within ten (10) days of the request.
- D. The inmate may appeal any adverse decision to the facility commander in detailed writing with a copy of the liaison officer's decision.
- E. The facility commander shall respond in writing to the appeal within ten (10) days.
- F. The inmate may appeal any adverse decision from the facility commander to the Court designated to review Pro Per issues, attaching a copy of the decision to the appeal.

#### 605.3.14 INMATE DISCIPLINE & REVOCATION OF PRO PER STATUS & PRIVILEGES:

- A. Pro Per inmate's are subject to discipline for violations of jail rules and regulations in the same manner as all other inmates.
- B. All reports of Pro Per inmate discipline will be filed with the Court designated to review the Pro Per issues.
- C. After reviewing the discipline report, the Court may request the Sheriff to apply for an order modifying or revoking the inmate's Pro Per privileges or Pro Per status.
- D. The Sheriff may apply for an order modifying or revoking some or all of an inmate's Pro Per privileges or Pro Per status for cause.
- E. Except in emergency situations, Pro Per privileges may not be revoked or modified as a concomitant of either jail discipline or administrative segregation without complying with the following procedures:
  - 1. The inmate will be given notice of the charges upon which the proposed revocation, modification or administrative segregation is based at least twenty-four (24) hours in advance of a hearing before a Hearing Officer.
  - The inmate will be given the opportunity to appear before the Hearing Officer within forty-eight (48) hours of the service of such notice. The Hearing Officer shall be a Sheriff's Lieutenant or Captain not personally involved with the Pro Per inmate in question.
  - The inmate will be given the opportunity to present witnesses and documentary
    evidence at the hearing. The Hearing Officer may restrict the presentation of
    live witnesses if he or she determines that doing so is necessary to preserve
    institutional safety and security.
  - 4. The inmate will be given a written statement of the evidence relied upon and the reasons for the action taken, except that when personal or institutional safety requires the statement may be properly be edited to the extent necessary to preserve the safety of inmates or staff or to protect institutional security.
  - 5. As soon as practical after the hearing, but in no event later than two (2) court days after the hearing, the Hearing Officer shall issue findings and decision as to the charges and proposed disposition. The Sheriff shall notify the court before whom the defendant's case is pending of the findings and decision, a record of the administrative proceedings, and the proposed disposition, including any

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modification or revocation of Pro Per privileges, or administrative segregation. The Sheriff shall notify the Court as soon as practical under the circumstances, but under no circumstances beyond the next court day. When the inmate is Pro Per on multiple cases, the notice shall list all cases in which the defendant is acting Pro Per and will be filed in the Court designated to consider the Pro Per matter. Unless the safety of the inmate, the safety of the other inmates or jail staff would be jeopardized, the inmate's Pro Per privileges should not be revoked or modified until the Court orders modification of Pro Per privileges or Pro Per status. In emergency situations, the Sheriff may immediately suspend all Pro Per privileges, a report will be provided to the Court specifically describing the emergency action taken and the reasons therefore.

- 6. Upon receipt of the notice, the Court may direct the Sheriff to show cause why any or part of the Pro Per privileges suspended should not be reinstated pending hearing on the proposed disposition. The Court will independently review the administrative record and will conduct a hearing thereon within a reasonable time of receipt of the notice from the Sheriff, at which both the Sheriff, or his designee, and the inmate will be entitled to appear and argue. No additional evidence will be presented at the Court hearing unless the Court so determines upon a showing of good cause.
- 7. The Court may affirm, deny, or modify the proposed disposition as to the Pro Per privileges and Pro Per status, and may request that the Sheriff prepare a formal order as to the same.

#### 605.3.15 DURATION OF PRIVILEGES:

A. An inmate's Pro Per privileges and Pro Per status as to a particular case shall terminate upon Court order to that effect, or shall immediately and automatically terminate upon sentencing in that case, or upon appointment or retention of counsel as to the inmate in that case.

#### 605.3.16 ACCESS TO THE COURT:

- A. The court will not hear, nor set for hearing, any request for additional privileges, complaint about denial of Pro Per privileges, or appeal from any disciplinary action affecting Pro Per privileges, that does not allege that the inmate has complied with and exhausted, these administrative procedures and remedies.
- B. The Sheriff may request that the Court suspend any such matter that has not first exhausted these administrative procedures and remedies.

# **Foreign Nationals and Diplomats**

#### 606.1 PURPOSE AND SCOPE

This policy addresses the privileges and immunities afforded to members of foreign diplomatic missions and consular posts.

This policy also addresses the legal requirements related to consular notifications that should occur when a foreign national is in custody.

#### 606.2 POLICY

The Tulare County Sheriff's Office Detention Facility will treat foreign diplomatic and consular personnel with due regard for the privileges and immunities to which they are entitled under international law. The Office will investigate all claims of immunity and accept custody of the person when appropriate.

The Tulare County Sheriff's Office Detention Facility will also honor the laws related to foreign nationals in custody by making proper consular notifications and by assisting those who wish to contact their consular representative.

#### 606.3 DIPLOMATIC AND CONSULAR IMMUNITY

#### 606.3.1 AVAILABILITY OF RESOURCES

The Shift Supervisor will ensure that current contact information for the U.S. Department of State and the U.S. Mission to the United Nations is readily available for office members who need to verify a claim of diplomatic or consular immunity. Relevant material for law enforcement published by the U.S. Department of State Bureau of Diplomatic Security should be readily available as well.

#### 606.3.2 ADDRESSING CLAIMS OF DIPLOMATIC OR CONSULAR IMMUNITY

When an arrestee who claims diplomatic or consular immunity is brought to the Tulare County Sheriff's Office Detention Facility the receiving deputy shall first inform the Shift Supervisor and then generally proceed as follows:

- (a) Do not accept custody of the person from the transporting deputy. The person should not be brought inside the Tulare County Sheriff's Office Detention Facility unless doing so would facilitate the investigation of his/her claim of immunity.
- (b) Do not handcuff the person, or, if handcuffs have been applied, remove them unless there is an articulable threat that would justify their use.
- (c) If the person has already been accepted into custody, inform the person that he/ she will be detained until his/her identity and immunity can be confirmed. Attempt to obtain a U.S. Department of State-issued identification card or other identification or documents that may relate to the claimed immunity.
- (d) In all cases, verify the status and level of immunity by contacting the U.S. Department of State or the U.S. Mission to the United Nations, as appropriate.

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It will be the responsibility of the Shift Supervisor to communicate the claim of immunity to the on-duty supervisor of the arresting office (if not the Tulare County Sheriff's Office). The Shift Supervisor may assist another agency in determining the person's immunity status.

The Shift Supervisor is responsible for ensuring appropriate action is taken based upon information received regarding the person's immunity status.

#### 606.3.3 REPORTING

If the person's immunity status has been verified, the Shift Supervisor should ensure a report is prepared describing the details and circumstances of any detention or custody. A copy of the report should be faxed or mailed as soon as possible to the U.S. Department of State in Washington, D.C. or to the U.S. Mission to the United Nations in New York in cases involving a member of the United Nations community.

#### 606.4 CONSULAR NOTIFICATIONS

#### 606.4.1 CONSULAR NOTIFICATION LIST AND CONTACTS

The Facility Commander will ensure that the U.S. Department of State's list of countries and jurisdictions that require mandatory notification is readily available to office members. There should also be a published list of foreign embassy and consulate telephone and fax numbers, as well as standardized notification forms that can be faxed and then retained for the record. Prominently displayed placards informing inmates of rights related to consular notification should also be posted.

#### 606.4.2 CONSULAR NOTIFICATION ON BOOKING

Office members assigned to book inmates shall:

- (a) Inform the foreign national, without delay, that he/she may have his/her consular officers notified of the arrest or detention and may communicate with them. Members shall ensure this notification is acknowledged and documented.
- (b) Determine whether the foreign national's country is on the U.S. Department of State's mandatory notification list.
- (c) If the foreign national's country is not on the list for mandatory notification but the foreign national requests that his/her consular officers be notified, then:
  - Notify the nearest embassy or consulate of the foreign national's country of the person's arrest or detention by faxing the appropriate notification form. If no fax confirmation is received, a telephonic notification should be made and documented.
  - 2. Forward any communication from the foreign national to his/her consular officers without delay.
- (d) If the foreign national's country is on the list for mandatory notification, then:

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- Notify the nearest embassy or consulate of the foreign national's country, without delay, of the person's arrest or detention by faxing the appropriate notification form. If no fax confirmation is received, a telephonic notification should be made and documented.
- 2. Tell the foreign national that this notification has been made and inform him/her without delay that he/she may communicate with his/her consular officers.
- 3. Forward any communication from the foreign national to his/her consular officers without delay.
- 4. Document all notifications to the embassy or consulate and retain the faxed notification and any fax confirmation for the inmate's file.

Members should never discuss anything with consulate personnel beyond the required notifications, such as whether the inmate is requesting asylum. Requests for asylum should be forwarded to the Shift Supervisor.

# **Inmate Rights - Protection from Abuse**

#### 607.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines to ensure that inmates are afforded a safe, healthful environment free from abuse, corporal punishment or harassment, and that inmate property is protected.

#### 607.2 POLICY

It is the policy of this office to make every reasonable effort to protect inmates from personal abuse, corporal punishment, personal injury, disease, property damage and harassment by other inmates or staff. Staff shall take reasonable actions to safeguard vulnerable inmates from others and shall use the classification policies and procedures to make housing decisions that will provide for inmate safety. Abuse of inmates by staff or other inmates will not be tolerated.

The Facility Commander or the authorized designee shall be responsible for including prohibitions against inmate abuse and harassment, rules regarding respect for the property of others, and the prevention of disease in the inmate handbook. All inmates shall receive a copy of the inmate handbook during the booking process, which shall be printed in a language understood by the inmate. The inmate also shall receive verbal instruction on inmate rights during orientation.

#### 607.3 RESPONSIBILITY

It shall be the responsibility of all facility staff to adhere to policies, procedures and practices, and to make every reasonable effort to prevent inmate injury, harassment and abuse, to prevent theft or damage to inmate property and to eliminate conditions that promote disease. These procedures include, but are not limited to:

- Following the classification guidelines for inmate housing.
- Closely supervising inmate activities and interceding as needed to prevent violence, harassment or abuse of inmates.
- Using force only when necessary and to the degree that is reasonable.
- Reporting all inmate injuries, investigating the cause of reported injuries and documenting these efforts in an incident report.
- Enforcing all rules and regulations in a fair and consistent manner.
- Preventing any practice of inmates conducting kangaroo courts or dispensing discipline toward any other inmate.
- Conducting required safety checks of all inmate housing areas.
- Checking all safety equipment for serviceability and making a report of any defective equipment to the appropriate supervisor or Facility Commander.
- Referring sick or injured inmates to a qualified health care professional without unnecessary delay.

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### Inmate Rights - Protection from Abuse

- Maintaining high standards of cleanliness throughout the detention facility.
- Documenting all abuse protection efforts in facility logs and incident reports as applicable.

# **Prison Rape Elimination Act**

#### 608.1 PURPOSE AND SCOPE

This policy provides guidance for compliance with the Prison Rape Elimination Act of 2003 (PREA) and the implementing regulation that establishes standards (PREA Rule) to prevent, detect, and respond to sexual abuse and sexual harassment (28 CFR 115.11; 15 CCR 1029).

#### 608.1.1 DEFINITIONS

Definitions related to this policy include:

Intersex - A person whose sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development (28 CFR 115.5).

Sexual abuse - Any of the following acts, if the incarcerated person does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse (28 CFR 115.6; 15 CCR 1006):

- (a) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight
- Contact between the mouth and the penis, vulva, or anus (b)
- Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument
- (d) Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation

Sexual abuse also includes abuse by a staff member, contractor, or volunteer as follows, with or without consent of the incarcerated person, detainee, or resident:

- Contact between the penis and the vulva or the penis and the anus, including penetration, however slight
- Contact between the mouth and the penis, vulva, or anus
- Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire
- Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties, or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire
- Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties, or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire
- Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described above

- Any display by a staff member, contractor, or volunteer of their uncovered genitalia, buttocks, or breast in the presence of an incarcerated person, detainee, or resident
- Voyeurism by a staff member, contractor, or volunteer

**Sexual harassment** - Repeated and unwelcome sexual advances; requests for sexual favors; verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one incarcerated person, detainee, or resident that are directed toward another; repeated verbal comments or gestures of a sexual nature to an incarcerated person, detainee, or resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures (28 CFR 115.6; 15 CCR 1006).

**Transgender** - A person whose gender identity (i.e., internal sense of feeling male or female) is different from the person's assigned sex at birth (28 CFR 115.5).

#### 608.2 POLICY

This office has zero tolerance with regard to sexual abuse and sexual harassment in this facility. This office will take appropriate affirmative measures to protect all incarcerated persons from sexual abuse and harassment, and promptly and thoroughly investigate all allegations of sexual abuse and sexual harassment.

#### 608.3 PRESERVATION OF ABILITY TO PROTECT INCARCERATED PERSONS

The Office shall not enter into or renew any collective bargaining agreement or other agreement that limits the office's ability to remove alleged staff sexual abusers from contact with any incarcerated persons pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted (28 CFR 115.66).

#### 608.4 PREA COORDINATOR

The Detentions Administration Facility Commander will be the PREA Coordinator and shall appoint a sergeant and compliance deputy with sufficient time and authority to develop, implement, and oversee office efforts to comply with the PREA standards. The PREA coordinator shall review facility policies and practices and make appropriate compliance recommendations to the Detentions Division Captain (28 CFR 115.11).

The PREA coordinator's responsibilities shall include:

- (a) Developing a written plan to coordinate response among staff first responders, medical and mental health practitioners, investigators, and facility management to an incident of sexual abuse. The plan must also outline the office's approach to identifying imminent sexual abuse toward incarcerated persons and preventing and detecting such incidents (28 CFR 115.11; 28 CFR 115.65; 28 CFR 115.62).
- (b) Ensuring that within 30 days of intake, incarcerated persons are provided with comprehensive education, either in person or through video, regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation

- for reporting such incidents, and regarding the office's policies and procedures for responding to such incidents (28 CFR 115.33).
- (c) Developing a staffing plan to provide adequate levels of staffing and video monitoring, where applicable, to protect detainees from sexual abuse. This includes documenting deviations and the reasons for deviations from the staffing plan, as well as reviewing the staffing plan a minimum of once per year. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration (28 CFR 115.13):
  - 1. Generally accepted detention and correctional practices.
  - 2. Any judicial findings of inadequacy.
  - 3. Any findings of inadequacy from federal investigative agencies.
  - 4. Any findings of inadequacy from internal or external oversight bodies.
  - 5. All components of the facility's physical plant, including blind spots or areas where staff or incarcerated persons may be isolated.
  - 6. The composition of the incarcerated person population.
  - 7. The number and placement of supervisory staff.
  - 8. Institution programs occurring on a particular shift.
  - 9. Any applicable state or local laws, regulations, or standards.
  - 10. The prevalence of substantiated and unsubstantiated incidents of sexual abuse.
  - 11. Any other relevant factors.
- (d) Ensuring that, when designing, acquiring, expanding, or modifying facilities, or when installing or updating a video-monitoring system, electronic surveillance system, or other monitoring technology, consideration is given to the office's ability to protect incarcerated persons from sexual abuse (28 CFR 115.18).
- (e) Ensuring that any contract for the confinement of office detainees or incarcerated persons includes the requirement to adopt and comply with the PREA standards including obtaining incident-based and aggregated data, as required in 28 CFR 115.187. Any new contract or contract renewal shall provide for office contract monitoring to ensure that the contractor is complying with the PREA standards (28 CFR 115.12).
- (f) Making reasonable efforts to enter into agreements with community service providers to provide incarcerated persons with confidential, emotional support services related to sexual abuse. The facility shall provide incarcerated persons with access to outside victim advocates for emotional support services related to sexual abuse by giving incarcerated persons mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, state, or national victim advocacy or rape crisis organizations. The facility shall enable reasonable communication between incarcerated persons and these organizations and agencies in as confidential a manner as possible. The facility shall inform persons, prior to giving them access, of the extent to which such communications will be monitored and the extent to

- which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws (28 CFR 115.53).
- (g) Ensuring the protocol describing the responsibilities of the Office and of another investigating agency, if another law enforcement agency will be responsible for conducting any sexual abuse or sexual harassment investigations, is published on the facility website or by other means, if no website exists (28 CFR 115.22).
- (h) Implementing a process by which incarcerated persons may report sexual abuse and sexual harassment to a public/private entity or an office that is not part of the Office, and that the outside entity or office is able to receive and immediately forward incarcerated person reports of sexual abuse and sexual harassment to the Facility Commander, allowing the incarcerated person anonymity (28 CFR 115.51; 15 CCR 1029).
- (i) Establishing a process to ensure accurate, uniform data is collected for every allegation of sexual abuse at facilities under the direct control of this office, using a standardized instrument and set of definitions. Upon request, the Office shall provide all such data from the previous calendar year to the U.S. Department of Justice (DOJ) no later than June 30 (28 CFR 115.87; 34 USC § 30303; 15 CCR 1041).
  - 1. The data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the U.S. Department of Justice (DOJ).
  - 2. The data shall be aggregated at least annually.
- (j) Establishing a process to monitor the conduct and treatment of detainees or staff who have reported sexual abuse, and the conduct and treatment of detainees who were reported to have suffered sexual abuse.
- (k) Ensuring that the following are published on the office's website or by other means, if no website exists:
  - (a) Office policy governing investigations of allegations of sexual abuse and sexual harassment or the referral of such investigations of sexual abuse or sexual harassment (unless the allegation does not involve potentially criminal behavior) (28 CFR 115.22)
  - (b) Information on how to report sexual abuse and sexual harassment on behalf of an incarcerated person (28 CFR 115.54)
- (I) Ensuring audits are conducted pursuant to 28 CFR 115.401 through 28 CFR 115.405 (28 CFR 115.93).
- (m) Implementing a protocol requiring mid-level or higher-level supervisors to conduct and document unannounced inspections to identify and deter sexual abuse and sexual harassment. The protocol shall prohibit announcing when such inspections are to occur, unless it is necessary for operational considerations (28 CFR 115.13).
- (n) Ensuring agreements with outside investigating agencies include PREA requirements, including a requirement to keep the Tulare County Sheriff's Office informed of the progress of the investigation (28 CFR 115.71).

- (o) Ensuring that information for uninvolved incarcerated persons, family, community members, and other interested third parties to report sexual abuse or sexual harassment is publicly posted at the facility (15 CCR 1029).
- (p) Ensuring the Office conducts follow-up criminal background records checks at least once every five years on members or contractors who may have contact with incarcerated persons or has in place a system for otherwise capturing such information (28 CFR 115.17).

#### 608.5 REPORTING SEXUAL ABUSE, HARASSMENT, AND RETALIATION

Any employee, agency representative, volunteer, or contractor who becomes aware of an incident of sexual abuse, sexual harassment, or retaliation against incarcerated persons or staff shall immediately notify a supervisor, who will forward the matter to a sexual abuse investigator (28 CFR 115.61). Staff may also privately report sexual abuse and sexual harassment of incarcerated persons (e.g., report to the Facility Commander) (28 CFR 115.51; 15 CCR 1029).

The facility shall provide information to all visitors or third parties on how they may report any incident, or suspected incident of sexual abuse, or sexual harassment to a staff member (28 CFR 115.54; 15 CCR 1029).

Incarcerated persons may report sexual abuse or sexual harassment incidents anonymously or to any staff member they choose. Staff shall accommodate all incarcerated person requests to report allegations of sexual abuse or harassment. Staff shall accept reports made verbally, in writing, anonymously, or from third parties and shall promptly document all verbal reports (28 CFR 115.51; 15 CCR 1029).

Threats or allegations of sexual abuse and sexual harassment, or retaliation, regardless of the source, shall be documented and referred for investigation. Sexual abuse and sexual harassment reports shall only be made available to those who have a legitimate need to know, and in accordance with this policy and applicable law (28 CFR 115.61).

#### 608.5.1 REPORTING TO OTHER FACILITIES

If there is an allegation that an incarcerated person was sexually abused while the person was confined at another facility, the Facility Commander shall notify the head of that facility as soon as possible but not later than 72 hours after receiving the allegation. The Facility Commander shall ensure that the notification has been documented (28 CFR 115.63).

#### 608.6 RETALIATION

All incarcerated persons and staff who report sexual abuse or sexual harassment, or who cooperate with sexual abuse or sexual harassment investigations, shall be protected from retaliation.

Protective measures, including housing changes, transfers, removal of alleged abusers from contact with victims, administrative reassignment, or reassignment of the victim or alleged perpetrator to another housing area, and support services for incarcerated persons or staff who fear retaliation, shall be utilized (28 CFR 115.67; 15 CCR 1029).

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The Facility Commander or the authorized designee shall assign a supervisor to monitor, for at least 90 days, the conduct and treatment of incarcerated persons or staff who report sexual abuse or sexual harassment, as well as persons who were reported to have suffered sexual abuse, to determine if there is any possible retaliation. The supervisor shall act promptly to remedy any such retaliation. The assigned supervisor should consider incarcerated person disciplinary reports, housing or program changes, negative staff performance reviews, or reassignment of staff members. Monitoring may continue beyond 90 days if needed. Incarcerated person monitoring shall also include periodic status checks. The Facility Commander should take reasonable steps to limit the number of people with access to the names of individuals being monitored and should make reasonable efforts to ensure that staff members who pose a threat of retaliation are not entrusted with monitoring responsibilities.

If any other individual who cooperates with an investigation expresses a fear of retaliation, the facility shall take reasonable measures to protect that individual against retaliation (28 CFR 115.67).

#### 608.7 FIRST RESPONDERS

If an allegation of incarcerated person sexual abuse is made, the first deputy to respond shall (28 CFR 115.64):

- (a) Separate the parties.
- (b) Request medical assistance as appropriate. If no qualified health care or mental health professionals are on-duty when a report of recent abuse is made, staff first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate qualified health care and mental health professionals (28 CFR 115.82).
- (c) Establish a crime scene to preserve and protect any evidence. Identify and secure witnesses until steps can be taken to collect any evidence.
- (d) If the time period allows for collection of physical evidence, request that the alleged victim, and ensure that the alleged abuser, do not take any actions that could destroy physical evidence (e.g., washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, eating).
- (e) Consider whether a change in classification or housing assignment for the victim is needed or whether witnesses to the incident need protection, both of which may include reassignment of housing.
- (f) Determine whether the alleged perpetrator should be administratively separated or administratively transferred during the investigation.

If the first responder is not a deputy, the responder shall request the alleged victim to refrain from any actions that could destroy physical evidence and then immediately notify a deputy.

Should an investigation involve incarcerated persons who have disabilities or who have limited English proficiency, the first responder shall not rely on incarcerated person interpreters, incarcerated person readers, or other types of incarcerated person assistants, except in limited circumstances where an extended delay in obtaining an interpreter could compromise

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incarcerated person safety, the performance of first responder duties, or the investigation of sexual abuse or sexual harassment allegations (28 CFR 115.16).

#### 608.8 SEXUAL ABUSE VICTIMS

Incarcerated persons who are victims of sexual abuse shall be transported to the nearest appropriate location for treatment of injuries and collection of evidence, and for crisis intervention services (28 CFR 115.82). Depending on the severity of the injuries, transportation may occur by a staff member or by ambulance, in either case with appropriate security to protect the staff, the incarcerated person, and the public, and to prevent escape.

A victim advocate from a rape crisis center should be made available to the victim. If a rape crisis center is not available, the Office shall make available a qualified member of a community-based organization, or a qualified health care or mental health professional from the Office, to provide victim advocate services. Efforts to secure services from a rape crisis center shall be documented. A rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in (34 USC § 12511), to sexual assault victims of all ages. A rape crisis center that is part of a government unit may be used if it is not part of the criminal justice system (such as a law enforcement agency) and it offers a level of confidentiality comparable to the level at a nongovernmental entity that provides similar victim services (28 CFR 115.21).

#### 608.9 EXAMINATION, TESTING, AND TREATMENT

Examination, testing, and treatment shall include the following (15 CCR 1206):

- (a) Forensic medical examinations shall be performed as evidentiarily or medically appropriate, without financial cost to the victim. Where possible, these examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANE)s. If neither SAFEs nor SANEs are available, other qualified medical practitioners can perform the examination. The Office shall document its efforts to provide SAFEs or SANEs (28 CFR 115.21).
- (b) If requested by the victim, a victim advocate, a qualified office staff member, or a qualified community organization staff member shall accompany the victim through the forensic medical examination process and investigatory interviews. That person will provide emotional support, crisis intervention, information, and referrals (28 CFR 115.21).
- (c) Provisions shall be made for testing the victim for sexually transmitted diseases (28 CFR 115.82).
- (d) Counseling for the treatment of sexually transmitted diseases, if appropriate, shall be provided.
- (e) Victims shall be offered information about, and given access to, emergency contraception, prophylaxis for sexually transmitted infections, and follow-up treatment for sexually transmitted diseases (28 CFR 115.82; 28 CFR 115.83). This shall be done in a timely manner.

- (f) Victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the abuse, such victims shall receive comprehensive information about, and access to, all lawful pregnancy-related medical services (28 CFR 115.83). This shall be done in a timely manner.
- (g) Victims shall be provided with follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody (28 CFR 115.83).
- (h) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident (28 CFR 115.82; 28 CFR 115.83).
- (i) The health authority or mental health staff shall obtain informed consent from incarcerated persons before reporting information to detention facility staff about prior sexual victimization that occurred somewhere other than an institutional setting, unless the incarderated person is under the age of 18 (28 CFR 115.81).
- (j) Medical and mental health practitioners shall ensure that information related to sexual victimization that occurred in an institutional setting is limited to medical and mental health practitioners and other staff unless it is necessary to inform detention facility staff about security or management decisions (28 CFR 115.81).

#### 608.10 SEXUAL ABUSE AND SEXUAL HARASSMENT INVESTIGATIONS

An administrative investigation, criminal investigation or both shall be completed for all allegations of sexual abuse and sexual harassment (28 CFR 115.22). Administrative investigations shall include an effort to determine whether the staff's actions or inaction contributed to the abuse. All administrative and/or criminal investigations shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Only investigators who have completed office-approved training on sexual abuse and sexual harassment investigation shall be assigned to investigate these cases (28 CFR 115.71).

When practicable, an investigator of the same gender as the victim should be assigned to the case. Sexual abuse and sexual harassment investigations should be conducted promptly and continuously until completed. Investigators should evaluate reports or threats of sexual abuse and sexual harassment without regard to an incarcerated person's sexual orientation, sex or gender identity. Investigators should not assume that any sexual activity among incarcerated persons is consensual.

The departure of the alleged abuser or victim from the employment or control of the detention facility or Office shall not provide a basis for terminating an investigation (28 CFR 115.71).

If the investigation is referred to another agency for investigation, the Office shall request that the investigating agency follow the requirements as provided in 28 CFR 115.21 (a) through (e). The referral shall be documented. The Office shall cooperate with the outside agency investigation and shall request to be informed about the progress of the investigation (28 CFR 115.71) If criminal

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acts are identified as a result of the investigation, the case shall be presented to the appropriate prosecutor's office for filing of new charges (28 CFR 115.71).

Evidence collection shall be based on a uniform evidence protocol that is adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents," or similarly comprehensive and authoritative protocols developed after 2011 (28 CFR 115.21).

Incarcerated persons alleging sexual abuse shall not be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with an investigation (28 CFR 115.71).

If a victim considered a vulnerable adult under state law, the assigned investigator shall report the allegation to the designated social services agency as required (28 CFR 115.61).

#### 608.10.1 INVESTIGATIVE FINDINGS

All completed written investigations shall be forwarded to the Facility Commander or, if the allegations may reasonably involve the Facility Commander, to the Sheriff. The Facility Commander or Sheriff shall review the investigation and determine whether any allegations of sexual abuse or sexual harassment have been substantiated by a preponderance of the evidence (28 CFR 115.71; 28 CFR 115.72).

The staff shall be subject to disciplinary sanctions, up to and including termination, for violating this policy. Termination shall be the presumptive disciplinary action for staff members who have engaged in sexual abuse. All discipline shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the actions imposed for comparable offenses by other staff with similar histories.

All terminations for violations of sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to the law enforcement agency that would handle any related investigation and to any relevant licensing bodies (28 CFR 115.76).

#### 608.10.2 REPORTING TO INCARCERATED PERSONS

The Facility Commander or the authorized designee shall inform a victim incarcerated person in writing whether an allegation has been substantiated, unsubstantiated or unfounded. If the Office did not conduct the investigation, the Office shall request relevant information from the investigative agency in order to inform the incarcerated person.

If a staff member is the accused (unless the Office has determined that the allegation is unfounded), the incarcerated person shall also be informed whenever:

(a) The staff member is no longer assigned to the incarcerated person's unit or employed at the facility.

(b) The Office learns that the staff member has been indicted or convicted on a charge related to sexual abuse within the facility.

If another incarcerated person is the accused, the alleged victim shall be notified whenever the Office learns that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility.

All notifications or attempted notifications shall be documented. When notification is made while the incarcerated person is in custody, the incarcerated person will sign a copy of the notification letter. The letter will be added to the case file (28 CFR 115.73).

# 608.11 SEXUAL ABUSE AND SEXUAL HARASSMENT BETWEEN STAFF AND INCARCERATED PERSONS

Sexual abuse and sexual harassment between staff, volunteers or contract personnel and incarcerated persons is strictly prohibited. The fact that an incarcerated person may have initiated a relationship or sexual contact is not recognized as a defense to violating this policy.

Any incident involving allegations of staff-on-incarcerated person sexual abuse or sexual harassment shall be referred to the Internal Affairs Unit for investigation.

#### 608.11.1 SEXUAL ABUSE BY CONTRACTOR OR VOLUNTEER

Any contractor or volunteer who engages in sexual abuse within the facility shall be immediately prohibited from having any contact with incarcerated persons. The contractor or volunteer shall be promptly reported to the law enforcement agency that would investigate such allegations and brought to the attention of any relevant licensing bodies (28 CFR 115.77).

#### 608.12 PROTECTIVE CUSTODY

Incarcerated persons at high risk for sexual victimization shall not be placed in involuntary protective custody unless an assessment of available alternatives has been made and it has been determined that there is no reasonably available alternative means of separation. Incarcerated persons may be held in involuntary protective custody for less than 24 hours while an assessment is completed.

If an involuntary protective custody assignment is made because of a high risk for victimization, the Facility Commander shall clearly document the basis for the concern for the incarcerated person's safety and the reasons why no alternative means of separation can be arranged (28 CFR 115.43).

The facility shall assign these persons to involuntary protective custody only until an alternative means of separation from likely abusers can be arranged, not ordinarily in excess of 30 days.

Incarcerated persons placed in temporary protective custody shall continue to have reasonable access to programs, privileges, education and work opportunities. If restrictions are put in place, the Facility Commander shall document the following:

- (a) The opportunities that have been limited
- (b) The duration of the limitation
- (c) The reasons for such limitations

Every 30 days, the Facility Commander shall afford each such incarcerated person a review to determine whether there is a continuing need for protective custody (28 CFR 115.43).

#### 608.13 SEXUAL ABUSE INCIDENT REVIEW

An incident review shall be conducted at the conclusion of every sexual abuse investigation unless the allegation has been determined to be unfounded (28 CFR 115.86). The review should occur within 30 days of the conclusion of the investigation.

The review team shall include upper-level management officials and seek input from line supervisors, investigators, and qualified health care and/or mental health professionals, as appropriate:

- (a) Consider whether the investigation indicates a need to change policy or practice in order to better prevent, detect, or respond to sexual abuse.
- (b) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification status or perceived status; gang affiliation; or other group dynamics at the facility.
- (c) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers may enable abuse.
- (d) Assess the adequacy of staffing levels in the area during different shifts.
- (e) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.
- (f) Prepare a written report of the team's findings, including but not limited to determinations made pursuant to paragraphs (a)-(e) of this section, and any recommendations for improvement. The report should be submitted to the Sheriff and the PREA coordinator.

The Facility Commander or the authorized designee shall implement the recommendations for improvement or document the reasons for not doing so.

#### 608.14 DATA REVIEWS

This office shall conduct an annual review of collected and aggregated incident-based sexual abuse data. The purpose of these reviews is to assess and improve the effectiveness of sexual abuse prevention, detection and response policies, practices and training by:

- (a) Identifying problem areas.
- (b) Identifying corrective actions taken.
- (c) Recommending corrective actions.
- (d) Comparing current annual data and corrective actions with those from prior years.
- (e) Assessing the office's progress in addressing sexual abuse.

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The reports shall be approved by the Facility Commander and made available through the office website. Material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of the facility. However, the nature of the redacted material shall be indicated (28 CFR 115.88).

All aggregated sexual abuse data from Tulare County Sheriff's Office facilities and private facilities with which it contracts shall be made available to the public at least annually through the office website. Before making aggregated sexual abuse data publicly available, all personal identifiers shall be removed (28 CFR 115.89).

#### 608.15 RECORDS

All case records and reports associated with a claim of sexual abuse and sexual harassment, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment or counseling shall be retained in accordance with confidentiality laws.

The Office shall retain all written reports from administrative and criminal investigations pursuant to this policy for as long as the alleged abuser is held or employed by the Office, plus five years (28 CFR 115.71).

All other data collected pursuant to this policy shall be securely maintained for at least 10 years after the date of the initial collection, unless federal, state or local law requires otherwise (28 CFR 115.89).

# **Grooming**

#### 609.1 PURPOSE AND SCOPE

The purpose of this policy is to allow inmates to have freedom in personal grooming, except when a legitimate government interest justifies the development of grooming standards that are based upon orders of the court, inmate classification, work status, safety and security, or health and hygiene.

#### 609.2 POLICY

It is the policy of this facility to allow inmates freedom in personal grooming, except when a valid government interest justifies that grooming standards be established. The Facility Commander or the authorized designee shall establish inmate grooming standards specific to inmate classification, work status, facility safety and security, or inmate health and hygiene. Any established standards should not unreasonably interfere with religious observances. Grooming standards should be identified in the inmate handbook.

#### 609.3 HAIRCUTS

Inmates will be provided haircuts and hair-cutting tools subject to established facility rules. If hair length, style or condition presents a security or sanitation concern, haircuts may be mandatory. Inmates who significantly alter their appearance may be required to submit to additional booking photos.

Inmates shall not cut names, numbers or other designs into their hair. Inmates shall not manipulate their hair into any style, including, but not limited to, braids, ponytails, cornrows or twists, that could facilitate the concealment and movement of contraband and weapons.

#### 609.3.1 HAIR CARE SERVICES

The Facility Commander or the authorized designee shall establish written procedures for inmate hair care services (15 CCR 1267(a)). The procedures will include schedules for hair care services and allow rescheduling for conflicts, such as court appearances.

Inmates shall generally be permitted to receive hair care services once per month after being in custody for at least 30 days. Staff may suspend access to hair care services if an inmate appears to be a danger to him/herself or others or to the safety and security of the facility.

#### 609.4 SHAVING

Inmates may shave daily. Facial hair shall be clean and well groomed. Long beards may allow inmates to conceal weapons or contraband. Inmates may be required to trim facial hair if it poses a security or safety risk. Inmates may be required to submit to new booking photographs if their appearance is significantly altered due to facial hair. Inmates with facial hair who work around food shall wear appropriate facial coverings.

An inmate may be denied access to razors if he/she appears to be a danger to him/herself or others, or if such access may jeopardize the safety and security of the facility.

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Inmates may be restricted from significantly altering their appearance for reasons of identification in court (15 CCR 1267(b)).

#### 609.5 GROOMING EQUIPMENT

Grooming equipment is to be inventoried and inspected by the staff at the beginning of each shift and prior to being issued to inmates. The staff shall ensure that all equipment is returned by the end of the shift and is not damaged or missing parts.

Grooming equipment will be disinfected before and after each use by the methods approved by the State Board of Barbering and Cosmetology to meet the requirements of (16 CCR 979; 16 CCR 980; 15 CCR 1267(c)). Cleaning methods include:

- Removing foreign matter.
- Cleaning tools with soap or detergent and water.
- Immersing non-electrical equipment in disinfectant.
- Spraying electrical equipment with disinfectant.
- Storing cleaned equipment in clear, covered containers that are labeled as such.

Disinfectant solution shall be changed at least once per week or whenever the solution is cloudy or dirty. Solution will be stored in covered containers with labeled instructions for its use and the Environmental Protection Agency registration number.

#### 609.6 SHOWERING

Inmates shall be permitted to shower upon assignment to a housing unit, at least every other day thereafter and more often if practicable (15 CCR 1266).

#### 609.7 PERSONAL CARE ITEMS

Inmates are expected to maintain their hygiene using approved personal care items. Personal care items, including disposable razors, toothbrushes, combs and soap, are available through the inmate commissary and will be charged to the inmate's account.

Indigent inmates shall receive hygiene items necessary to maintain an appropriate level of personal hygiene.

No inmate will be denied the necessary personal care items. For sanitation and security reasons, personal care items shall not be shared (15 CCR 1265 et seq.).

## **Inmate Nondiscrimination**

#### 610.1 PURPOSE AND SCOPE

The constitutional rights of inmates regarding discrimination are protected during incarceration. These protections extend to administrative decisions, e.g., classification, access to programs and the availability of services. This policy is intended to guide the staff toward nondiscriminatory administrative decisions and to detail an inmate complaint and discrimination investigation process.

#### 610.2 POLICY

All decisions concerning inmates housed at this facility shall be based on reasonable criteria that support the health, safety, security and good order of the facility.

#### 610.3 INMATES REPORTING DISCRIMINATION

Inmates who wish to report an allegation of discrimination may communicate with facility management in any way, including:

- (a) Confidential correspondence addressed to the Facility Commander or the Sheriff or other government official, including the courts or legal representative.
- (b) Verbally to any supervisor or other staff member of this facility.

#### 610.3.1 HANDLING COMPLAINTS OF DISCRIMINATION

Staff shall promptly forward all written allegations of discrimination by inmates to the Shift Supervisor. If the allegation is presented verbally, the receiving staff member shall prepare an incident report identifying the circumstances prompting the allegation, the individuals involved, and any other pertinent information that would be useful to investigating the allegation.

Unless the complaint submitted by the inmate is clearly identified as confidential and addressed to the Facility Commander, Sheriff, or other official, the Shift Supervisor shall review the complaint and attempt to resolve the issue. In any case, the Shift Supervisor shall document the circumstances of the allegation and what actions, if any, were taken to investigate or resolve the complaint. All reports of alleged discrimination shall be forwarded to the Facility Commander for review and further investigation or administrative action as needed.

Administrative evaluations and response to allegations of discrimination shall be based upon objective criteria:

- (a) The inmate's classification
- (b) The inmate's criminal history
- (c) Current and past behavior and disciplinary history
- (d) Housing availability
- (e) The availability of programs
- (f) The ability to safely provide the requested services

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#### Inmate Nondiscrimination

#### 610.4 DISCRIMINATION PROHIBITED

Discriminating against an inmate based upon actual or perceived race, ethnicity, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, pregnancy, genetic information, veteran status, marital status, and any other classification or status protected by law is prohibited.

Reasonable and comparable opportunities for participation in services and programs including vocational, educational, and religious programs shall be made available to inmates in a nondiscriminatory manner.

The Facility Commander should periodically conduct interviews with inmates and staff members to identify and resolve potential problem areas related to discrimination before they occur.

## **Inmate Grievances**

#### 611.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process by which inmates may file grievances and receive a formal review regarding the conditions of their confinement.

#### 611.2 POLICY

It is the policy of this office that any inmate may file a grievance relating to conditions of confinement, which includes allegations of sexual abuse; medical care; classification actions; disciplinary actions; program participation; telephone, mail, and visiting procedures; and food, clothing, and bedding. (15 CCR 1073).

Grievances will not be accepted if they are challenging the rules and policies themselves, state or local laws, court decisions and probation/parole actions.

Retaliation for use of the grievance system is prohibited.

#### 611.3 INMATE GRIEVANCE PROCEDURES

Staff shall attempt to informally resolve all grievances at the lowest level. All attempts to resolve a grievance shall be documented in the inmate's file. If there is no resolution at this level, the inmate may request a grievance form.

The inmate should be advised to complete the form and return it to any staff member. A grievance should be filed by an inmate within 5 days of the complaint or issue.

Inmates cannot file a grievance on behalf of another inmate but an inmate may assist another inmate in the preparation of a grievance. Custody staff may take reasonable steps to assist the inmate in the preparation of a grievance if requested.

Upon receiving a completed inmate grievance form, the staff member shall acknowledge receipt of the grievance by signing the form and giving a copy to the inmate. The staff member receiving the form shall gather all associated paperwork and reports and immediately forward it to a supervisor.

#### 611.3.1 EXCEPTION TO INITIAL GRIEVANCE FILING

Inmates may request to submit the grievance directly to a supervisor or directly to the Facility Commander if they reasonably believe the issues to be grieved are sensitive or that their safety would be in jeopardy if the contents of the grievance were to become known to other inmates.

Inmates with limited access to mail privileges, who are in segregation units or are indigent may give their grievances to the housing unit deputy or place their grievance in a sealed envelope labeled "Grievance" and give their grievance to the on duty supervisor. These envelopes will be delivered directly to the Facility Commander.

#### 611.3.2 TIMELY RESOLUTION OF GRIEVANCES

Upon receiving a completed inmate grievance form, the supervisor shall ensure that the grievance is investigated and resolved or denied in a timely manner, as established by the Facility

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Commander. The supervisor shall assign the investigation of the grievance to the manager in charge of the department the inmate is grieving.

Grievances related to medical care should be investigated by the medical staff or the authorized designee. The findings of that investigation, along with any recommendations, shall be forwarded to the sergeant. Any appeals of the findings of the medical staff shall be forward to the Facility Commander as the final level of appeal.

Grievances about food-related matters should be investigated by the food services manager. The findings of that investigation, along with any recommendations, shall be forwarded to the sergeant. Any appeals shall be forwarded to the Facility Commander as the final level of appeal.

Other grievances relating to programs or other services provided by the Office shall be investigated by the custody staff with the assistance of the supervising employee in charge of those services. Findings relating to the investigation will be forwarded to the sergeant. Any appeals shall be forwarded to the Facility Commander as the final level of appeal.

#### 611.3.3 APPEALS TO GRIEVANCE FINDINGS

Inmates may appeal the finding of a grievance to the Facility Commander as the final level of appeal within **five (5)** days of receiving the findings of the original grievance. The Facility Commander will review the grievance and either confirm or deny it. If the Facility Commander confirms the grievance, he/she will initiate corrective actions. In either case, the inmate shall receive a written response to the appeal.

Appeals related to sexual abuse allegations shall be confirmed or denied by the Facility Commander within 10 calendar days.

#### 611.3.4 RECORDING GRIEVANCES

The Facility Commander should maintain a grievance log in a central location accessible to all supervisors. The supervisor who originally receives a grievance shall record the grievance, along with its finding, on the grievance log. Periodic reviews of the log should be made by the Facility Commander or the authorized designee to ensure that grievances are being handled properly and in a timely manner.

The original grievance should be retained in a file maintained by the Facility Commander or the authorized designee, and shall be retained in accordance with established records retention schedules.

#### 611.3.5 FRIVOLOUS GRIEVANCES

Inmates shall use the grievance process only for legitimate problems or complaints. If there is concern that an inmate is abusing the grievance process, he/she shall be informed that continued behavior may result in disciplinary action.

#### 611.4 ACCESS TO THE GRIEVANCE SYSTEM

All inmates shall be provided with a grievance process for resolving complaints arising from facility matters with at least one level of appeal.

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#### Inmate Grievances

Inmates will receive information concerning the grievance procedure during the orientation process. Information will also be contained in the inmate handbook. Information regarding the grievance process will be provided to inmates in the language they understand.

The information will include (15 CCR 1073(a) and (b)):

- (a) A grievance form or instructions for registering a grievance.
- (b) Instructions for the resolution of the grievance at the lowest appropriate staff level.
- (c) The appeal process to the next level of review.
- (d) Written reasons for denial of a grievance at each level of review.
- (e) A provision of required timeframes for responses.
- (f) A provision for resolving questions of jurisdiction within the facility.
- (g) Consequences for abusing the grievance system.

# **Inmate Voting**

#### 612.1 PURPOSE AND SCOPE

This policy establishes the requirement for providing eligible inmates the opportunity to vote during elections, pursuant to election statutes.

#### 612.2 POLICY

Inmates who have not been convicted of a felony and are in custody during trial continue to have the right to vote. Except for individual inmates who have lost the right to vote, sentenced inmates also maintain this right. Because inmates are unable to access public voting polls, the Facility Commander or the authorized designee shall develop written procedures whereby the county registrar of voters allows qualified inmates to vote in local, state and federal elections, pursuant to election codes (15 CCR 1071).

Inmates should be advised of voting methods during the inmate orientation.

#### 612.3 VOTING REQUIREMENTS

Inmates maintain their right to vote while incarcerated if they are:

- (a) A citizen of the United States.
- (b) A resident of the county.
- (c) At least 18 years of age at the time of the next election.
- (d) Not been declared mentally incompetent by a court.
- (e) Awaiting or on trial for a criminal offense.
- (f) Serving time for a traffic or misdemeanor offense or as a condition of probation.
- (g) Not convicted of a felony offense and sentenced to serve time in a state prison.

#### 612.4 PROCEDURES

Prior to each election, the Compliance Lieutenant will designate a deputy to be a liaison between the Office and the local Registrar of Voters. The designated deputy will be responsible for assisting inmates who have requested to vote.

#### 612.4.1 REGISTERING TO VOTE

An inmate who is eligible to vote and requests to register should complete a voter application. The application should be submitted to the liaison deputy, who will forward the application to the local election official.

#### 612.4.2 REQUESTING AN ABSENTEE BALLOT

An inmate who will be in custody during an election and requests to vote by absentee ballot should complete an application. The completed application should be submitted to the liaison deputy, who will forward the application to the local election official.

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#### Inmate Voting

#### 612.4.3 VOTING

All ballots received shall be delivered to inmates in a timely manner to ensure compliance with the inmate's right to vote. Once the ballot has been delivered to the inmate, it shall be the responsibility of the inmate to mail his/her ballot in accordance with the state's voting requirements. If the inmate is indigent, the detention facility will mail the ballot; if not, the inmate is responsible for the postage.

**Chapter 7 - Medical-Mental Health** 

# Health Care Administrative Meetings and Reports

#### 700.1 PURPOSE AND SCOPE

The Office recognizes that the delivery of effective health care requires open and frequent communication between the Responsible Health Authority and the Facility Commander. This policy provides guidelines for the continuous monitoring, planning and problem resolution in providing health care that addresses the medical needs of the inmate population and prevents potential outbreaks of communicable and contagious illness.

#### 700.1.1 DEFINITIONS

Definitions related to this entire chapter include:

**Access to care-** An inmate should be seen in a timely manner by a qualified health care professional. The inmate should be given a professional clinical diagnosis and receive treatment that is ordered.

Clinical practice guidelines- A systematically developed science-based statement designed to assist practitioners and inmates with decisions about appropriate health care for specific clinical circumstances. Clinical practice guidelines are used to assist clinical decision-making, assess and assure the quality of care, educate individuals and groups about clinical disease, guide the allocation of health care resources and reduce the risk of legal liability for negligent care.

**Clinical setting** - An examination or treatment room, either on or offsite, which is appropriately supplied and equipped to address a patient's health care needs.

**Daily** - Seven days a week, including holidays.

**Direct order** - A written order issued by a qualified health care professional specifically for the treatment of an inmate's particular condition.

**Health appraisal** - A comprehensive health evaluation completed within 14 days of an inmate's arrival at the facility.

**Health authority-** The Responsible Physician, health services administrator or health agency responsible for providing all health care services or coordinating the delivery of all health care services.

**Health care** - The sum of all actions, preventive and therapeutic, taken for the physical and mental wellbeing of the inmate population. The term health care includes medical, both physical and psychological, dental, nutrition and other ancillary services, as well as maintaining safe and sanitary environmental conditions. As of the date of this revision, Wellpath is the contracted provider of these services.

HIPAA - Health Insurance Portability and Accountability Act

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#### Health Care Administrative Meetings and Reports

**Mental health staff-** Qualified health care professionals who have received instruction and supervision in identifying and interacting with individuals in need of mental health services.

**Physical examination** - An objective, hands-on evaluation of an individual. It involves the inspection, palpation, auscultation and percussion of a body to determine the presence or absence of physical signs of disease.

**Qualified health care professional** - Physicians, physician's assistants, nurses, nurse practitioners, dentists, mental health professionals or other persons who, by virtue of their education, credentials and experience are permitted by law to evaluate and care for patients within the parameters of his/her license or certification.

**Responsible Physician-** An individual licensed to practice medicine and provide health services to the inmate population of the facility, or the physician at an institution with final responsibility for decisions related to medical judgment.

**Sick call** The evaluation and treatment of an ambulatory patient, either on- or off-site, by a qualified health care professional.

**Special needs** - Health conditions that require regular care.

**Standing order-** Written orders issued by a physician that specify the same course of treatment for each patient suspected of having a given condition and the specific use and amount of prescription drugs (e.g., immunizations, insulin, seizure medications).

**Suicidal ideation** - Having thoughts of suicide or of taking action to end one's own life. Suicidal ideation includes all thoughts of suicide when the thoughts include a plan to commit suicide and when they do not.

**Treatment plan** - A series of written statements specifying a patient's particular course of therapy and the roles of qualified health care professionals in delivering the care.

**Triage** - The sorting and classifying of health care requests to determine priority of need and the proper place for health care to be rendered.

#### 700.2 POLICY

It is the policy of the Sheriff's Department that the Responsible Health Authority should meet with the Detention Division Command Staff once a month. The Responsible Health Authority should be required to submit a report addressing the effectiveness of the health care system, a description of any environmental or access issues that require improvement, and detail any progress that has been made in previously reported areas. The monthly meeting should be documented through formal minutes, which should include the names of attendees and a list of the topics discussed. The minutes should be retained in accordance with established records retention schedules.

The data for the monthly report should be gathered by the Responsible Health Authority via monthly meetings with all facility Shift Supervisors and qualified health care professionals. The monthly meetings should cover the following topics:

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#### Health Care Administrative Meetings and Reports

- Health care services
- Quality improvement findings
- Infection control efforts
- Inmate grievances
- Environmental inspections report

#### 700.2.1 STATISTICAL REPORTS

In addition to the monthly report described above, a statistical report will be provided annually to the Medical Liaison Lieutenant The statistical report will be prepared by the Responsible Health Authority and shall include, but not be limited to, the following (15 CCR 1202):

- (a) The number of inmates receiving health services by category of care
- (b) The number of referrals to specialists
- (c) Medications dispensed
- (d) Laboratory and X-ray tests completed
- (e) Infirmary admissions, if applicable
- (f) On-site and off-site hospital admissions
- (g) Serious injuries or illnesses
- (h) Deaths
- (i) Off-site transports
- (j) Infectious disease monitoring
- (k) Emergency services provided to inmates
- (I) Dental visits provided
- (m) Number of health care grievances by category (e.g., medication error, missed appointment, health staff complaint) and whether the grievance was founded or unfounded

It is the responsibility of the Medical Liaison Lieutenant to ensure that copies of the statistical reports and documentation of any remedies implemented are retained in accordance with established records retention schedules.

# **Access to Health Care**

#### 701.1 PURPOSE AND SCOPE

The provision of adequate health services in a custody setting is a constitutional right afforded to all incarcerated persons. The purpose of this policy is to provide custody personnel and qualified health care professionals with a process to inform newly booked incarcerated persons of the procedure to access health care services and how to use the grievance system, if necessary.

#### **701.2 POLICY**

It is the policy of this office that all incarcerated persons, regardless of custody status or housing location, will have timely access to a qualified health care professional and receive a timely professional clinical judgment and appropriate treatment.

The Tulare County Sheriff's Office facility will provide medical, dental, and mental health services as necessary to maintain the health and well-being of incarcerated persons to a reasonable and socially acceptable standard (15 CCR 1200 et seq.; 15 CCR 1208).

#### 701.3 ACCESS TO CARE

Incarcerated person medical requests will be evaluated by qualified health care professionals or health-trained custody staff. Health care services will be made available to incarcerated persons from the time of admission until they are released. Timely access to services will be provided within seven days of request. Information regarding how to contact the medical staff will be posted in all incarcerated person housing areas (15 CCR 1200 et seq.; 15 CCR 1208). Medications and community health resources and referrals may be provided upon request when the incarcerated person is released.

Unreasonable barriers shall not be placed on an incarcerated person's ability to access health services. Health care that is necessary during the period of confinement shall be provided regardless of an incarcerated person's ability to pay, the size of the facility, or the duration of the incarcerated person's incarceration. Such unreasonable barriers include:

- Punishing incarcerated persons for seeking care for their health needs.
- Deterring incarcerated persons from seeking care for their health needs by scheduling sick call at unreasonable times.

All routine requests for medical attention shall be promptly routed to a qualified health care professional.

Any incident of an incarcerated person refusing medical treatment or causing a disruption in the delivery of health care services shall be documented in an incident report. The original incident report shall be forwarded to the Responsible Physician and a copy sent to the Facility Commander.

#### 701.4 HEALTH CARE GRIEVANCES

Custody personnel should authorize and encourage resolution of incarcerated person complaints and requests on an informal basis whenever possible. To the extent practicable, custody personnel

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#### Access to Health Care

should provide incarcerated persons with opportunities to make suggestions to improve programs and conditions.

Incarcerated persons will be informed of the grievance process during incarcerated person orientation. The grievance process is also explained in the incarcerated person handbook, which all incarcerated persons receive and which they should have additional access to in their housing units. Grievances will be handled in accordance with the Incarcerated Person Grievances Policy (15 CCR 1073(a)).

Custody personnel should minimize technical requirements for grievances and allow incarcerated persons to initiate the grievance process by briefly describing the nature of the complaint and the remedy sought. For simple questions and answers regarding clinical issues, incarcerated persons may meet with a qualified health care professional or may submit a written correspondence.

Incarcerated person grievances regarding health care issues will be investigated by an uninvolved member of the medical staff. If no such person is available or does not exist, an outside peer should be sought to investigate the grievance. The incarcerated person should be provided with a written response in accordance with the schedule set forth in the Incarcerated Person Grievances Policy. Responses to incarcerated person grievances should be based on the community standard of health care.

Copies of grievances and the facility's response shall be sent to the Facility Commander, who, in consultation with the Responsible Physician, shall serve as the final authority in response to all incarcerated person grievances.

If an inmate is not satisfied with the response, the incarcerated person may appeal the grievance as outlined in the Incarcerated Person Grievances Policy.

#### 701.5 POSTING AVAILABLE RESOURCES

A listing of telephone numbers for medical, dental, mental health and ambulance services shall be posted at the facility's medical area and in the primary staff control station, along with a schedule of availability.

# Non-Emergency Health Care Requests and Services

#### 702.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a daily triage system of inmate requests for health care services. This is to ensure that the health needs of the population are addressed properly and in a timely manner.

#### **702.2 POLICY**

It is the policy of this office to provide daily access to qualified health care professionals or health-trained custody staff in order for inmates to request medical services (15 CCR 1200). All health care requests will be documented, triaged and referred appropriately by medical staff. Qualified health care professionals will conduct sick call and clinics for health care services on a scheduled basis to ensure a timely response to requests for medical services (15 CCR 1211).

The Responsible Health Authority, in coordination with the Facility Commander or the authorized designee, is responsible for developing a process that includes:

- (a) A process for inmates to request health services on a daily basis.
- (b) A priority system for health care services to acquire and address requests for routine health care, and for urgent or emergent injuries, illnesses and conditions.
- (c) Making health care request forms available in each housing unit and to all inmates upon request.
- (d) A system in which health care requests are documented, triaged and referred appropriately.
- (e) Restrictions that prohibit non-health services personnel from diagnosing or treating an illness.

#### 702.3 HEALTH CARE REQUESTS

During the collection of health care requests from inmates, care should be taken to protect the confidentiality of the inmate and the nature of the health issue. The collector shall date and initial the request when the collection takes place. The requests shall be triaged to determine the priority of need and the proper place for health care to be delivered.

Inmates will be instructed on how to obtain medical services during the inmate orientation process and in the inmate handbook. Inmates shall submit a medical request form to the housing unit deputy or the health-trained staff delivering medications, or a nurse, if appropriate.

Medical request forms should be available in languages representative of the population. Inmates who communicate in a language not available in printed form shall have access to interpreter services.

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#### Non-Emergency Health Care Requests and Services

Inmates with disabilities should be provided with appropriate assistance or accommodation to ensure they are able to request health care services.

Medical Staff will pick up medical request daily from housing units.

#### 702.4 TRIAGE OF HEALTH CARE REQUESTS

Qualified health care professionals shall perform a daily triage. Sick call shall be available to inmates at least five days a week and shall be performed by a qualified health care professional.

Other qualified health care professionals should schedule inmates in need of specialized treatment for the next available providers' clinic. The wait for the next available providers' clinic should not exceed two days. The qualified health care professional shall document the referral in the providers' scheduling book and on the inmate's medical record.

The frequency and duration of sick call should be sufficient to meet the needs of the inmate population but should be conducted at least weekly by a qualified health care professional. If an inmate's custody status precludes attendance at sick call, arrangements shall be made to provide sick call services in the place of the inmate's detention (15 CCR 1211).

#### 702.5 GUIDELINES FOR ELECTIVE PROCEDURES OR SURGERY

The Responsible Physician and the Facility Commander shall work cooperatively to develop guidelines that govern elective procedures or surgery for inmates. The guidelines must include decision-making processes for elective procedures or surgery that is needed to correct a substantial functional deficit or an existing pathological process that threatens the well-being of the inmate over a period of time. Any discussion of this nature with the inmate should be conducted in a language easily understood by the inmate and should be carefully documented in the inmate's medical record. This record should be maintained in accordance with established records retention schedules.

#### 702.5 REQUESTS FOR OUTSIDE MEDICAL CARE

Inmates who request access to health care services outside the facility may do so with advance authorization from the Facility Commander or the authorized designee. The inmate shall be required to provide proof of sufficient private funds available to pay for all costs associated with transportation to the off-site facility and all costs associated with the medical services, diagnostics, treatment plans, medications or any other costs associated with off-site medical care.

## Referrals and Coordination of Specialty Care

#### 703.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process for referring inmates who need health care or specialty care that is beyond the resources available in the facility. The policy includes guidelines regarding transportation under appropriate security provisions and the formulation of advance written agreements for around the clock or on-call availability of alternate services. Specialty care includes specialist-provided health care, such as nephrology, surgery, dermatology and orthopedics.

#### **703.2 POLICY**

It is the policy of this office that inmates have access to necessary hospitalization and specialty services for serious medical needs. This facility will provide, either directly or through contracted sources, specialty care and emergency medical services to inmates when the need is determined by the Responsible Physician (15 CCR 1206(b); 15 CCR 1206(c)).

#### 703.3 REFERRAL TO OFF-SITE MEDICAL CARE

A qualified health care professional shall evaluate the inmate, and if indicated, shall recommend specialty appointments in writing on the order sheet in the inmate's medical record. A referral form should be completed and any supporting documentation attached. The written referral shall be reviewed and authorized, if appropriate, by the Responsible Physician.

A court order is generally required when an inmate requires medical or surgical treatment necessitating hospitalization. A court order is not required for an inmate in need of immediate medical or hospital care, but an application for a court order should be made as soon as practicable when the inmate's condition requires him/her to be gone from the facility more than 48 hours (Penal Code § 4011.5).

#### 703.4 OFF-SITE COORDINATION

The qualified health care professional is responsible for recommending off-site medical and psychiatric care for inmates, coordinating outside appointments and notifying supervisory custody staff of off-site transportation needs. The Facility Commander should establish a written transportation procedure that ensures inmates are transported securely and in a timely manner for medical, mental health, dental clinic or other specialty appointments. The procedure shall include the secure transfer of medical information to the receiving health care service.

Any conflicts that arise regarding off-site consultation trips will be communicated by the deputy responsible for transportation to the Responsible Physician and the Facility Commander or the authorized designee so that modifications may be made.

The detention facility supervisor shall keep a log of missed appointments to determine if transportation issues are impeding the ability of inmates to access appropriate medical care. Any issues identified shall be discussed and resolved between the Responsible Physician and the Facility Commander (15 CCR 1206(c); 15 CCR 1206(n)).

## **Emergency Health Care Services**

#### 704.1 PURPOSE AND SCOPE

The purpose of this policy is to establish plans and procedures for responding to medical emergencies in the facility when the level of medical or mental health services exceeds the licensure or certification of staff who are on-duty, and to define staff training requirements.

#### **704.2 POLICY**

It is the policy of this office that emergency medical, mental health and dental services are available 24 hours a day. These services may include off-site health care services.

#### 704.3 PROCEDURES

The Facility Commander or the authorized designee shall work cooperatively with the Responsible Physician to develop plans and procedures for responding to emergency medical incidents that occur when the level of medical or mental health services needed exceeds the licensure or certification of staff who are on-duty. The plans should include: on-site emergency first aid, basic life support and crisis intervention; emergency evacuation of an inmate from the facility, including security procedures to ensure an immediate transfer when appropriate; on-call physicians, dentists and mental health professionals; predetermined back-up health care services when the emergency health facility is not located in a nearby community; and the identification of primary, secondary and tertiary acute care facilities.

The plan may additionally include, but is not limited to, these components:

- (a) Health-trained staff shall respond to all emergencies immediately upon notification.
- (b) Contact information for emergency on-call health care services, both on- and off-site, is available and accessible for facility supervisors.
- (c) Qualified health care professionals shall respond by reporting to the area of the emergency with the necessary emergency equipment and supplies.
- (d) Emergency equipment and supplies are regularly maintained and accessible to the qualified health care professionals and health-trained custody staff.
- (e) Most inmates will be stabilized on-site and then transferred to an appropriate health care unit, if necessary.
- (f) Notification of on-call physicians and mental health staff will be done as soon as the situation reasonably allows.
- (g) The qualified health care professionals will determine if the inmate needs to be transported to a local emergency room for treatment.
- (h) When necessary, facility staff shall activate 9-1-1 and notify a supervisor as soon as reasonably practicable.
- (i) The Facility Commander and the Responsible Physician will coordinate on the notification of the inmate's next of kin in cases of serious illness and injury. Death

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#### Emergency Health Care Services

notifications will be made in accordance with the Inmate Death - Clinical Care Review Policy.

(j)

- (k) Identifying when court orders to transport prisoners outside the facility for hospitalization may be required and the processes for obtaining those court orders (Penal Code § 4011.5).
- (I) Identifying who is responsible to seek a court order when an inmate is expected to be gone from the facility more than 48 hours for medical or surgical treatment necessitating hospitalization (Penal Code § 4011.5).

The goal of any emergency medical response plan is to provide emergency medical care to those in need as expeditiously as possible. While facility size and patient proximity to the health care service will vary, staff training will emphasize responding to medical emergencies as soon as reasonably possible.

#### 704.4 EMERGENCY PROCEDURES

The health services administrator or the authorized designee is responsible for ensuring the following information, equipment and personnel are available in the event an inmate requires emergency treatment (15 CCR 1206(c)):

- (a) A current list of names, addresses and telephone numbers of all persons and agencies to be notified in an emergency. The list should be available to all health care and custody staff at all times, and should be updated quarterly.
- (b) Emergency drugs, equipment and supplies should be readily available at all times and replenished after each use. An inventory control system should be in use to ensure the necessary supplies are present when needed and have not expired.
- (c) A physician, dentist and mental health professional should be available on-call 24 hours a day, seven days a week (this can include off-site health care services) and there should be a back-up health care services plan.
- (d) Ambulances should be accessed through the facility staff or by calling the appropriate emergency number. There should be a clear security plan in place for the transportation of inmates.
- (e) The Shift Supervisor will be contacted and informed of any emergency as soon as practicable.
- (f) All decisions regarding medical treatment and the need for emergency transportation are to be made by the qualified health care professionals or health-trained custody staff.
- (g) Whenever reasonably possible, the on-call health care service should be notified prior to transporting the inmate to the hospital or other emergency care. However, in the event of a life- or limb-threatening emergency, the inmate shall be sent to the hospital

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#### Emergency Health Care Services

in the most expedient way possible, which may require notifying the specific health care service after the inmate has been transported.

#### 704.5 FIRST-AID KITS

The Responsible Physician or the authorized designee is responsible for determining the contents, number, location and procedures for monthly inspections of all first-aid kits in the facility. The Responsible Physician shall also ensure that (15 CCR 1220):

- (a) The contents of each first-aid kit are:
  - 1. Approved by the Responsible Physician.
  - 2. Appropriate for its location.
  - 3. Arranged for quick use.
  - 4. Documented on the outside cover.
  - 5. Inventoried every month.
  - 6. Secured with a plastic tamper-proof seal.
    - (a) Once the seal has been broken, the kit should be taken to the medical unit so the contents can be inventoried and restocked.
    - (b) Written protocols and training materials are developed for the use of medical supplies and equipment by certified-trained custody staff.
    - (c) Inspections and testing of supplies and equipment are documented and maintained in accordance with established records retention schedules.

#### 704.6 TRAINING

The Facility Commander shall ensure that all qualified health care professionals are trained in the delivery of emergency medical services in the custody environment during new employee orientation.

The Facility Commander or the authorized designee shall ensure that all facility staff members who have contact with inmates receive first-aid and basic life support training during new employee orientation, and that annual refresher training is conducted for the facility and qualified health care professionals. Training should include, but not be limited to:

- (a) The location of all emergency medical equipment and medications and the proper use of the equipment, such as AEDs.
- (b) How to properly summon internal and external emergency services.
- (c) Recognition of basic life support signs and symptoms and the actions required in emergency situations.
- (d) Administration of basic first aid.
- (e) Certification in CPR in accordance with the recommendations of the certifying health organization.

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- (f) Recognition of the signs and symptoms of mental illness, violent behavior and acute chemical intoxication and withdrawal.
- (g) Procedures for inmate transfers to appropriate medical facilities or health care service.
- (h) Suicide recognition, prevention and intervention techniques.

All records of the training provided, testing procedures and the results, and certificates achieved shall be maintained in each qualified health care professional's training file in accordance with established records retention schedules. The Responsible Physician should be bound by similar requirements in the contractual language between the Office and the vendor.

#### 704.7 AUTOMATED EXTERNAL DEFIBRILLATORS (AED)

The Responsible Physician or the authorized designee is responsible for ensuring that an Automated External Defibrillator (AED) is available in the facility and that all staff members are trained in its use. The AEDs shall be inspected and tested at a frequency consistent with the manufacturer's recommendations to ensure functionality.

## **Infection Control Protocol**

#### 705.1 PURPOSE AND SCOPE

The Department recognizes the importance of properly protecting its staff and inmates from possible exposure to infectious disease through a three pronged approach. This triad approach will consist of training for Sheriff's staff as well as Jail Medical staff to; Identify, Isolate and Treat/Transport of possibly infected persons.

#### 705.2 DEFINITIONS

Definitions related to this entire chapter include:

#### 705.2.1 STANDARD PRECAUTIONS

Standard Precautions apply to detainees regardless of their diagnosis or presumed infection status.

- (a) Standard Precautions are designed to reduce the risk of transmission of microorganisms from both recognized and unrecognized sources of infection.
- (b) Standard Precautions reduce the risks of such transmission by the consistent use of barriers whenever the staff is likely to contact any body substance.
- (c) Standard Precautions apply to the following:
  - i. Blood
  - Body fluids, secretions, and excretions, regardless of whether or not they contain visible blood
  - iii. Non-intact skin
  - iv. Mucous membranes
- (d) Standard Precautions eliminate the need for other categories of isolation procedures unless an inmate-patient is known or suspected to be infected or colonized pathogens spread by airborne or droplet transmission, or by contact with dry skin or contaminated surfaces. Transmission-based Precautions would then be instituted.

#### 705.2.2 TRANSMISSION-BASED PRECAUTIONS

Transmission-based Precautions apply to inmate-patients known or suspected to be infected or colonized with highly transmissible pathogens.

- (a) Transmission-based Precautions are used in addition to Standard Precautions.
- (b) Three types of Transmission-based Precautions can be utilized. These precautions can be used along or in combination:
  - 1. Airborne Infection Precautions
    - (a) Airborne Infection Precautions are used in addition to Standard Precautions for inmate-patients known or suspected to be infected with microorganisms transmitted by airborne droplet nuclei or evaporated droplets containing microorganisms that remain suspended in the air and

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#### Infection Control Protocol

can be dispersed widely by air currents within a room or over a long distance.

#### 2. Droplet Precautions

- (a) Droplet Precautions are used in addition to Standard Precautions for inmate-patients known or suspected to be infected with microorganisms transmitted by droplets that can be generated by inmate-patients during coughing, sneezing, talking, or the performance of procedures.
  - i. Having the detainee wear a surgical mask (NOT N95) will protect the staff from droplet contamination.

#### 3. Contact Precautions

(a) Contact Precautions are used in addition to Standard Precautions for inmate-patients known or suspected to be infected or colonized with microorganisms that can be transmitted by direct contact with the inmatepatient or indirect contact with environmental surfaces or inmate-patient care equipment.

#### 705.2.3 SPECIALIZED PRECAUTIONS

Certain diseases special precautions have been recommended by the Center for Disease Control. Some of these precautions include, up to and including, "no skin showing" liquid barrier coverings. The precautions will be identified, if needed, by health staff in accordance with CDC guidelines.

<u>Infectious Disease</u>- A disease caused by the entrance into the body of organisms (as bacteria, protozoans, fungi, or viruses) which grow and multiply there.

**<u>Training</u>** - A process by which someone is taught the skills that are needed for an art, profession, or job.

**Exposure** - The state of being in contact with: for this purpose the contact of an infectious organism with non-intact skin, mucus membranes, eyes, nose, mouth.

<u>Identify</u> - To establish or indicate who or what (someone or something) is.

<u>Isolate</u> - To put or keep (someone or something) in a place or situation that is separate from others.

<u>Treatment</u> - The action or manner of treating a patient medically or surgically.

**Transport**- To carry (someone or something) from one place to another.

<u>Decontamination</u> - To remove dirty or dangerous substances (such as germs or virus) from (a person, thing, place, etc.)

<u>Observation</u> - the act of careful watching and listening: the activity of paying close attention to someone or something in order to get information.

(a) BOOKING - Any arrestee brought into any Sheriff's Controlled Facility will be medically cleared by a medical professional (Authorized Health Authority), unless articulable facts exist that a delay in accepting an arrestee would put that inmate, staff or public in imminent risk or danger.

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#### Infection Control Protocol

- 1. Scenario #1- Arrestee is brought into pre-booking, shows no signs or symptoms of being ill. Medical staff clear and inmate is accepted into Sheriff's Custody.
- 2. Scenario #2- Arrestee is brought into pre-booking, shows neither signs nor symptoms of being ill, however indicates to medical staff that they have traveled to any location where an infectious disease is known to be active or report exposure to an infectious disease. If otherwise cleared by medical staff, and there is no physical reason for us not to accept this inmate, they shall be accepted into the custody of the sheriff. Once in our custody the Sheriff's security staff will isolate this inmate for observation if recommended by medical staff. Medical staff will recommend appropriate isolation based on CDC recommendations. The length of the inmate's isolation will remain under the purview of medical staff. Once medical staff indicates the inmate is not a likely medical threat to the inmate population or staff, the inmate shall be cleared for housing in their proper classification. All decontamination protocols will fall under the direction of Medial Staff. It is strongly suggested that if any inmate shows any sign of being ill, regardless of the cause, Standard Precautions should be used.
- 3. Scenario #3- Arrestee is brought into pre-booking, shows signs or symptoms of being ill but has no travel or indications that they have come into contact with an area where an infectious disease is active. Medical staff will, based on their professional opinion, advise whether or not the arrestee is clear for acceptance and whether or not the inmate need to be isolated.
- 4. Scenario #4 Arrestee is brought into custody shows signs and or symptoms if being ill. The Medical professional will screen the inmate for potential infectious disease utilizing current CDC guidelines. If it is determined that the illness is a potentially deadly infectious disease as defined by the CDC
  - (a) This arrestee will immediately be isolated and a surgical mask placed on the inmate. Medical staff will not clear the inmate for housing, nor allow the arrestee to leave the pre-booking area.
  - (b) The facility supervisor will be notified immediately and an immediate lock down of the facilities booking will commence.
  - (c) No one coming into direct contact with this arrestee will be allowed to leave the isolation area. This is to include the arresting officer. The arresting officer's vehicle shall not be permitted to leave the facility until cleared by the Tulare County Health and Human Services Medical Director.
  - (d) All persons in the isolation area will immediately be required to wear appropriate Personal Protective Equipment as recommended by the Medical Professional. A log shall be generated to include full names of all persons with potential contact with the arrestee. This log shall be provided to the Health Services Administrator for follow-up by County Health Services.
  - (e) The Sheriff's facility supervisor will immediately contact their facility commander, and ensure that the Health Services Administrator is contacted.

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#### Infection Control Protocol

- (f) The Facility commander shall notify the arresting agency's acting commander and advise him/her of the potential exposure and vehicle quarantine.
- (g) Medical staff will be responsible for coordinating all medical response and notifications to all County Health officials and hospitals.
- (h) Once the isolation protocol has been initiated it will not be terminated without approval of both the Health Services Administrator/Medical Director and Sheriff's Divisional Commander or their designee.
- (i) Once notification and coordination has occurred with the hospital, professional medical transportation will be coordinated. Once the transportation of the arrestee has occurred, Tulare County Health and Human Services will then begin decontamination as indicated by CDC guidelines.
- (j) If booking is closed for less than two hours, the Sheriff's facility commander will contact outlying agencies and advise they will have to hold all arrestee's until booking is reopened. If booking is to be closed longer than two hours then the facility commander will notify and coordinate booking being moved to another facility.
- (k) Once decontamination has occurred and both the Sheriff's Divisional Commander and Medical Director approve, booking can be reopened.
- 5. Scenario #5- Arrestee is cleared with not signs or symptoms. Upon being housed the inmate becomes ill. On further evaluation by medical staff, it is determined that the inmate provided false information regarding travel or exposure to persons who have travelled to an area with an active infectious disease outbreak.
- 6. The inmate shall be masked with a surgical mask.
- 7. The facility supervisor will be notified immediately and an immediate lock down of the facilities booking and or housing unit will commence.
- 8. The Medical Director and/or Health Services Administrator and facility commander shall immediately be notified.
- The inmate shall be immediately isolated.
- 10. No one coming into direct contact with this arrestee will be allowed to leave the isolation area.
- 11. For all diseases which are not airborne, Inmates not in direct contact or having the potential for direct contact need not be moved from the area. For diseases that are considered airborne, the inmates shall be removed from the area as soon as possible with normal safety and security precautions. Surgical masks shall be provided to each individual in the isolation area until removed from that area
- All persons in the isolation area will immediately be required to wear appropriate Personal Protective Equipment as recommended by the Medical Professional. A

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#### Infection Control Protocol

log shall be generated to include full names of all persons with potential contact with the arrestee. This log shall be provided to the Health Services Administrator for follow-up by County Health Services.

- 13. Medical staff will be responsible for coordinating all medical response and notifications to all County Health officials and hospitals.
- 14. Once the isolation protocol has been initiated it will not be terminated without approval of both the Medical Director and Sheriff's Divisional Commander or their designee.
- 15. Once notification and coordination has occurred with the hospital, professional medical transportation will be coordinated. Once the transportation of the arrestee has occurred, Tulare County Health and Human Services will then begin decontamination as indicated by CDC guidelines.
- 16. Once decontamination has occurred and both the Sheriff's Divisional Commander and Medical Director approve, booking can be reopened

#### 705.3 2. PRECAUTION PROCEDURES

- (a) Standard Precautions Techniques
  - Hand washing is the single most important means of preventing the spread of infection. Follow the hand washing practices as outlined in the Hand washing policy.

#### 2. Gloves,

- (a) Disposable single-use gloves (sterile or non-sterile-depending on the purpose for use) are worn when touching blood, body fluids, secretions, or excretions, and contaminated items.
- (b) Put on clean gloves just before touching mucous membranes or non-intact skin.
- (c) Change gloves after performing a contaminated procedure and prior to performing a clean procedure on the same patient.
- (d) Change gloves after contact with contaminated/infective material or when torn, punctured, or barrier properties are compromised.
- (e) Gloves are worn once and discarded in proper receptacle before leaving the work area.
- (f) Remove gloves promptly after use and wash hands thoroughly before touching non-contaminated items and environmental surfaces, and before going to another inmate-patient.

#### Respiratory Hygiene/Cough Etiquette

- (a) Should be initiated at the first sign of illness (cough, congestion, runny nose) by everyone (inmates, staff and visitors)
- (b) Post attached sign in appropriate language at entrances to your facility.

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#### Infection Control Protocol

- (c) Educate inmates, staff and visitors regarding proper respiratory hygiene/cough etiquette.
- (d) Provide tissues and trash cans.

#### 4. Private Room

- (a) is indicated if:
- (b) inmate-patient is soiling the environment
- (c) profuse bleeding or drainage may cause environmental contamination;
- (d) Transmission-based Precautions are instituted.
- 5. a private room is not available, contact the Infection Prevention Personnel for placement alternatives

#### (b) Droplet Precautions

- 1. Droplet Precautions are used in addition to Standard Precautions for inmatepatients known or suspected to be infected with microorganisms transmitted by droplets (large-particle droplets that can be generated by inmate-patients during coughing, sneezing, talking, or the performance of procedures.
- Place the inmate-patient in a private room or cohort with an inmate-patient who
  has an active infection with the same microorganism, but no other infection. If
  a patient room is not available maintain separation of 3 feet from other inmates
  or visitors.
- 3. Employees must wear an isolation mask when working within 3 feet of the inmate-patient.
- 4. Inmate-patient transport from the room should be limited and the inmate-patient should wear a surgical mask during transport.

#### (c) Contact Precautions

- Contact Precautions are used in addition to Standard Precautions for inmatepatients known or suspected to be infected or colonized with epidemiologically important microorganisms that can be transmitted by direct contact with the inmate-patient or indirect contact with environmental surfaces or inmate-patient care equipment.
- The inmate-patient will be placed in a private room or cohort with an inmatepatient who as an active infection with the same microorganism but no other infection.
- 3. Persons entering the room should wear gloves.
- 4. Change gloves after contact with infective material that may contain high concentrations of microorganisms (fecal material and wound drainage).
- 5. Remove gloves and discard prior to leaving the room.
- 6. Wash hands immediately after removal of gloves.

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#### Infection Control Protocol

- 7. If significant inmate-patient and/or environmental contact are anticipated, an isolation gown should be worn upon entry into the room.
- 8. Wear a clean gown each time.
- 9. Remove gown and discard prior to leaving the inmate-patient room.
- 10. Ensure that after gown and glove removal and hand washing, hands and clothing do not contact potentially contaminated environmental surfaces.
- 11. Inmate-patient transport /restraint equipment must be adequately cleaned and disinfected prior to use on another inmate-patient.
- 12. The inmate-patient is the leave the room only when necessary. Precautions must be maintained during transport to minimize the risk of transmission to other inmate-patients, equipment or surfaces.

## **Health Care for Pregnant Incarcerated Persons**

#### 706.1 PURPOSE AND SCOPE

The purpose of this policy is to establish prenatal and postpartum health care services for incarcerated persons who are pregnant. Services may include assistance recovering from the effects of potentially unhealthy lifestyles, which could include tobacco use, alcohol and drug abuse or addiction, and a lack of previous adequate medical care. Because of unhealthy lifestyle choices prior to incarceration, many incarcerated person pregnancies are classified as high-risk. This policy is intended to protect the health of the pregnant person and the fetus.

#### **706.2 POLICY**

It is the policy of this office that a qualified health care professional should provide comprehensive prenatal and postpartum care for all pregnant persons during their incarceration.

All pregnant and postpartum incarcerated persons shall receive appropriate timely, culturally responsive, and medically accurate and comprehensive care, evaluation, and treatment of existing or newly diagnosed chronic conditions, including mental health disorders and infectious diseases (Penal Code § 4023.8).

#### 706.3 BOOKING - PREGNANCY SCREENING

When booking an incarcerated person who is identified as possibly pregnant, the following steps shall be taken:

- (a) All incarcerated persons shall be asked if they are pregnant. They shall be offered a voluntary pregnancy test upon intake or by request, within 72 hours of arrival at the detention facility and administered by medical or nursing personnel (Penal Code § 4023.8(a)).
  - If a test is declined, the incarcerated person shall be asked to sign an Informed Refusal of Pregnancy Test form, and the form shall be filed in the incarcerated person's medical file.
- (b) Incarcerated persons confirmed to be pregnant shall, within seven days of arriving at the detention facility, be scheduled for a pregnancy examination with a physician, nurse practitioner, certified nurse midwife, or physician assistant and examined as provided by Penal Code § 4023.8(d).
- (c) Pregnant incarcerated persons who appear to be under the influence of or withdrawing from alcohol or other substances shall be referred to a qualified health care professional.
- (d) The Responsible Physician, in collaboration with facility staff, shall ensure the proper clinic visits are scheduled in accordance with appropriate medical standards as provided in Penal Code § 4023.8(e).
- (e) A medical record should be opened with a notation indicating pregnancy.

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#### Health Care for Pregnant Incarcerated Persons

- (f) The incarcerated person should be interviewed by a qualified health care professional for the following information, which should be written in the medical record:
  - 1. Last menstrual period (LMP)
  - 2. Estimated date of conception (EDC)
  - 3. Estimated due date (40 weeks from EDC)
  - 4. Number of pregnancies (gravidity)
  - 5. Number of live births (parity)
  - 6. Therapeutic abortions (TAB)
  - 7. Spontaneous abortions (SAB), aka miscarriages
  - 8. Prenatal care history
  - 9. Current medications
  - 10. Any current adverse symptoms: vaginal bleeding or discharge, abdominal cramping or pain (if yes, notify on-site or on-call physician)
  - 11. High-risk factors, if known: drug or alcohol use/abuse, smoking, previous pregnancy problems, other medical problems (cardiac issues, seizures, diabetes/DM, hypertension/HTN)
  - 12. If use of an opioid or methadone is identified, notify the on-site or on-call physician for orders. The incarcerated person shall be offered medication-assisted treatment and shall be provided information on the risks of withdrawal (Penal Code § 4023.8(i)).
- (g) Each pregnant incarcerated person should have:
  - 1. A completed special diet form ordering a pregnant diet.
  - 2. An appointment at the next available obstetric clinic if the person is 10 or more weeks gestation.
- (h) Each pregnant incarcerated person shall (Penal Code § 4023.8):
  - 1. Have access to daily prenatal vitamins in accordance with medical standards of care.
  - 2. Be assigned to the lower bunk and lower-tier housing for those housed in a multitier housing unit.

#### 706.4 HOUSING EXCEPTIONS

Incarcerated persons who are known to be pregnant may be housed in any unit appropriate for their classification, with the following exceptions:

- (a) All pregnant incarcerated persons identified at intake or the obstetric clinic to be highrisk or who are in their last trimester of pregnancy shall be housed in the medical unit.
- (b) Housing in the medical unit shall be by order of the obstetric specialist or the Responsible Physician.

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#### Health Care for Pregnant Incarcerated Persons

#### 706.4.1 INMATE LACTATION

Female inmates will be allowed to manually express her breast while in-custody.

The milk must be released from custody every 7 days. If the milk is not released or not required for the baby it will be disposed of per the health authority recommendation. If a span of 30 days passes where no milk has been released from custody, the Sheriff's Office will no longer store the milk for pick up.

In order for the Sheriff's Office to allow the storage and retrieval of breast milk the female inmate must provide a clean drug screening. The Sheriff's Office may require additional periodic drug screenings. If the drug screening detects the presence of a harmful substance the Sheriff's Office will no longer store or release the inmate's breast milk.

The Sheriff's Office will release the breast milk to a total of two requested individuals per lactating inmate. The Facility Administrator or their representative will approve the two individuals.

A family member or requested individual will be allowed to bring a breast pump into the facility for use by the inmate.

No infants will be allowed into any facility for nursing.

All Correctional Facilities will have a designated area set up to allow female inmates to manually express their breast.

The Facility will also provide secure refrigeration for the inmate's expressed milk.

In the event that a female inmate is sentenced to a jail alternative program operated by the Tulare County Sheriff's Office. The inmate will be allowed sufficient break time from a work assignment to express her breast. If the inmate does not have a breast pump one will be provided. The Sheriff's Office will provide the refrigeration of the expressed milk. In the event that the inmate is sentenced to a jail alternative program the breast milk must be taken home at the end of the workday.

Procedures for providing medically appropriate support and care-related to the cessation of lactation or weaning are provided by the responsible health authority's Pregnancy/Lactation Protocols or Medical Providers.

#### 706.5 COUNSELING AND TREATMENT REGARDING PROPER CARE

The Office will provide all necessary counseling and treatment to pregnant incarcerated persons to ensure they are receiving the proper care. To accomplish this, the following shall occur:

(a) The directions of the obstetric specialist shall be followed throughout the pregnancy and postnatal period. No non-medical staff has the unilateral authority to change or overrule an order or care recommendation made by the Responsible Physician. The Facility Commander and Responsible Physician shall develop a process by which perceived conflicts between medical orders/recommendations and safety and security interests of the detention facility can be discussed and resolved. Ultimately, the detention facility must provide adequate treatment for an incarcerated person's medical needs.

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#### Health Care for Pregnant Incarcerated Persons

- (b) The Responsible Physician shall be consulted immediately if a patient is under 10 weeks gestation and has medical concerns.
- (c) Any pregnant incarcerated person with medical problems that occur between scheduled obstetric appointments shall be seen by a qualified health care professional. If the qualified health care professional assesses the problem as urgent and a physician is not available on-site, the person shall be sent to the hospital for evaluation.
- (d) The incarcerated person shall be advised to notify health-trained custody staff immediately of the following:
  - 1. Vaginal bleeding
  - 2. Acute, persistent abdominal or pelvic pain and/or severe cramping
  - 3. Leaking fluid
  - 4. Decreased or no fetal movement
  - 5. Headache or blurred vision
  - 6. Rapid weight gain with swelling (edema)
  - 7. Abnormal vaginal discharge
  - 8. Symptoms of a urinary tract infection (UTI)
  - 9. Fever
- Postpartum examinations and additional appointments shall be scheduled by the (e) obstetric clinic as needed.
- An incarcerated person shall have the right to summon and receive the services (f) of any physician, nurse practitioner, certified nurse midwife, or physician assistant of the person's choice in order to determine pregnancy. The Facility Commander may develop reasonable rules and regulations governing the conduct of such examinations. If found to be pregnant, the incarcerated person is entitled to a determination of the extent of medical and surgical services needed from the medical professional of the person's choice. Expenses incurred by the services not provided by the Detention Facility shall be borne by the incarcerated person (Penal Code § 4023.6).

#### 706.6 RESTRAINTS

Incarcerated persons who are known to be pregnant or who are in labor shall not be placed in restraints except as provided in the Use of Restraints Policy and the Transportation of Incarcerated Persons Outside the Secure Facility Policy.

#### 706.6.1 REQUIRED PROCEDURES

The health authority shall, in cooperation with the Facility Commander, develop procedures in conformance with Penal Code § 3407 for the application and removal of restraints on pregnant incarcerated persons. The procedures shall be reviewed and updated at least every two years (15 CCR 1206).

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#### Health Care for Pregnant Incarcerated Persons

#### 706.7 ABORTIONS

An incarcerated person who chooses to have an abortion shall be given access to abortion services and be requested to sign a statement acknowledging that the person has been provided the opportunity for related counseling and chooses to have an abortion. Any financial obligations for elective abortions will be handled consistent with state law as provided in Penal Code § 4011.1 and 15 CCR 1200.

The Tulare County Sheriff's Office shall provide necessary transportation and supervision for such services. No conditions or restrictions shall be imposed upon an inmate's ability to obtain an abortion, except those contained in and permitted pursuant to the Reproductive Privacy Act (Article 2.5 (commencing with Section 123460) of Chapter 2 of Division 106 of the Health and Safety Code). Impermissible restrictions include, but are not limited to, imposing gestational limits inconsistent with state law, unreasonably delaying access to the procedure, or requiring courtordered transportation.

Staff members who object to facilitating an inmate's elective abortion (including arrangements, transportation, and security) should not be required to perform such duties. Any staff member so objecting shall notify his or her supervisor immediately so that arrangements can be made for another staff member to carry out any duties under this section. A staff member's objection shall not interfere with an inmate's rights under this section and under applicable law.

#### 706.7.1 STATE REQUIREMENTS FOR ABORTION

The Detention Facility shall not confer authority or discretion to nonmedical staff to decide if a pregnant incarcerated person is eligible for an abortion. Conditions or restrictions on abortion access shall not be imposed. Impermissible restrictions include but are not limited to imposing gestational limits inconsistent with state law, unreasonably delaying access to the procedure, or requiring court-ordered transportation (Penal Code § 4028(a)).

If the pregnant incarcerated person decides to have an abortion, the person shall be offered, but not forced to accept, all due medical care and accommodations until no longer pregnant. A pregnant incarcerated person who decides to have an abortion shall be referred to a licensed professional as specified in Business and Professions Code § 2253(b) (Penal Code § 4023.8(c)).

#### 706.7.2 REQUIRED POSTED NOTICE

The rights provided for pregnant incarcerated persons by Penal Code § 4023.6, Penal Code § 4023.8, and Penal Code § 4028 shall be posted in at least one conspicuous place that all incarcerated persons can access.

#### 706.8 ADVISEMENT AND COUNSELING

Incarcerated persons who are pregnant shall be advised of the provisions of this policy manual, the Penal Code, and the standards established by the Board of State and Community Corrections related to pregnant incarcerated persons (Penal Code § 3407(e); 15 CCR 1058.5).

A qualified health care professional or counselor shall provide comprehensive and unbiased counseling and information to pregnant incarcerated persons regarding their options, including but

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#### Health Care for Pregnant Incarcerated Persons

not limited to prenatal health care, adoption, and abortion. Staff shall not urge, force, or otherwise influence a pregnant incarcerated person's decision (15 CCR 1206(f); Penal Code § 4023.5; Penal Code § 4023.8(b)).

Pregnant incarcerated persons shall also be referred to a social worker regarding options for feeding, placement, and care of the child after birth, including the benefits of lactation (Penal Code § 4023.8(k)).

#### 706.9 INCARCERATED PERSONS IN LABOR AND POSTPARTUM CARE

Pregnant incarcerated persons who are in labor or are presumed to be in labor shall be treated as an emergency and shall be transported in the least restrictive way possible to a hospital outside the detention facility (Penal Code § 4023.8(I)).

Pregnant incarcerated persons may have an approved support person present during labor, childbirth, and postpartum recovery while hospitalized (Penal Code § 4023.8(m)).

Incarcerated persons shall be given the maximum level of privacy possible during the labor and delivery process as provided in Penal Code § 4023.8(o).

Upon an incarcerated person's return to the detention facility, a physician, nurse practitioner, certified nurse midwife, or physician assistant shall provide a postpartum examination within one week from childbirth and as needed for up to 12 weeks postpartum, and shall determine whether the incarcerated person may be cleared for full duty or if medical restrictions are warranted. Postpartum incarcerated persons shall be given at least 12 weeks of recovery after childbirth before they are required to resume normal activity (Penal Code § 4023.8).

#### 706.9.1 INCARCERATED PERSON ACCESS TO NEWBORN CARE

The Responsible Physician should ensure than an incarcerated person is provided access to newborn care that includes access to appropriate assessment, diagnosis, care, and treatment for infectious diseases that may be transmitted from the incarcerated person to the infant (Penal Code § 4023.8(f)).

#### 706.9.2 NOTICE OF SERVICES AFTER INCARCERATION

The Responsible Physician should ensure that eligible incarcerated persons who give birth after incarceration are provided notice of, access to, and written application for community-based programs serving pregnant, birthing, or lactating incarcerated persons (Penal Code § 4023.8(j)).

## **Inmate Medical Fees**

## **Health Authority**

#### 708.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the responsibility of the health authority as arranging for all levels of health services, assuring the quality of all health services, identifying lines of medical authority for the inmate health program, and assuring that inmates have access to all health services.

The policy also establishes properly monitored processes, policies, procedures, and mechanisms to ensure that the contracted scope of services is adequately and efficiently delivered.

The health authority is defined as the Responsible Physician, health services administrator, or health agency responsible for providing all health care services or coordinating the delivery of all health care services (see the Health Care Administrative Meetings and Reports Policy).

#### **708.2 POLICY**

The health authority is responsible and accountable for all levels of health care and has the final authority regarding clinical issues within this detention facility. The health authority is responsible for establishing, implementing, and annually reviewing/revising policies for all clinical aspects of the health care program and for monitoring the appropriateness, timeliness and responsiveness of care and treatment. The health authority also approves all medical decisions and protocols.

#### 708.3 SELECTION PROCESS

The Sheriff or the authorized designee shall select a health authority using an existing office procurement or selection process. The individual or organization selected shall be designated as the health authority for inmate health care on behalf of the facility.

Aside from any monetary or term considerations, the contract between the Office, and the selected individual or organization shall minimally include:

- (a) Language establishing the scope of services being contracted and the type of health care service needed.
- (b) Job descriptions, minimum qualifications, and performance expectations for contract personnel.
- (c) Language requiring the contractor to develop appropriate measures and review processes for assessing the quality, effectiveness, and timeliness of the services provided and periodically reporting those findings to the facility.
- (d) Identification of a Responsible Physician, who shall serve as the medical authority on treatment matters requiring medical expertise and judgment.
- (e) Language regarding the minimum frequency that the health authority shall be present at the facility.
- (f) The roles and responsibilities of staff in ensuring that the contractor may adequately deliver services in a safe and secure environment.
- (g) A written plan for coordinating medical care from multiple health care services.

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#### Health Authority

- (h) A written plan for the collection and maintenance of inmate health records that is compliant with the Health Insurance Portability and Accountability Act (HIPAA).
- (i) Identification of a dispute resolution process for the contracted parties and for inmates who may be questioning treatment plans.
- (j) Language and a plan addressing liability and indemnification for issues related to inmate health care.

The health authority shall be authorized and responsible for making decisions about the deployment of health resources and the day-to-day operation of the health services program. If the health authority is other than a physician, any final clinical judgments shall rest with a single, designated, Responsible Physician.

The health authority or the authorized designee will meet at least monthly with custody representatives to discuss the health care program and any issues that require correction or adjustment.

Security regulations are applicable to facility staff and health care personnel (15 CCR 1200(a)).

#### 708.4 PROVISION OF HEALTH CARE

The health authority is responsible for arranging the availability of health care services. The qualified health care professionals should determine what medical services are needed on a case-by-case basis. The Facility Commander shall provide the administrative support for making the health care services available to inmates. Clinical decisions are the sole province of qualified health care professionals and should not be countermanded by non-health care professionals.

If routine health services are provided by medical personnel outside this facility, all office policies regarding treatment, transfer, transportation, or referral of emergencies shall be followed.

The health authority is responsible for ensuring that the health services manual complies with all applicable state and federal law and that a review and update is conducted annually.

An annual audit of the quality and adequacy of health care services shall be done, with corrective action taken when deficiencies are identified (15 CCR 1202).

#### 708.5 LACTATION PROGRAM

The health authority, in cooperation with the Facility Commander, shall develop a program with written procedures for lactating inmates to express breast milk for feeding their infants or toddlers, cessation of lactation or weaning, and for maintaining their breast milk supply pending delivery to an approved person or the inmate's release (Penal Code § 4002.5).

The health authority should ensure that the policy is posted in all locations where medical care is provided and is communicated to members who interact with or oversee pregnant or lactating inmates (Penal Code § 4002.5).

Refer to Custody Policy 706.4.1 - Inmate Lactation

## **Transfer Screening**

#### 709.1 PURPOSE AND SCOPE

This policy recognizes that inmates are frequently transferred within the correctional authority's system and to facilities outside the system. This policy establishes a process for medical screening of transferred inmates to ensure continuation of care and to avoid unnecessary diagnostics.

#### **709.2 POLICY**

It is the policy of this office that inmates who are transferred to another detention facility, correctional system or health care facility will be screened prior to transfer to ensure that the receiving facility can assume and continue proper care. Medical needs of the inmate will be clearly communicated to the receiving facility, including the ongoing treatment plan, scheduled surgeries and outside appointments.

Inmates who are transferred to other facilities shall be sent with a discharge summary that includes information about the inmate's medical and mental health condition, the current treatment plan and any medications, if needed (15 CCR 1206(n)).

#### 709.3 TRANSFERS

Any inmate being transferred to another correctional or health care facility will be medically screened prior to transfer as described below.

The medical screening should include:

- (a) A determination of whether the inmate is being treated for a medical, mental health or dental problem.
- (b) A determination of whether the inmate has any apparent, current medical, mental health or dental needs or complaints.
- (c) What medication, if any, the inmate is presently prescribed.
- (d) Whether the inmate has any evidence of abuse or trauma.
- (e) Whether the inmate has any physical deformities or special daily living assistance needs.
- (f) The inmate's classification and clearance status (i.e., general population, segregation).
- (g) Whether the inmate has any pending follow-up appointments or requirements.

Completed discharge summaries, including the medical screening results, shall accompany inmates being transferred to another office's jurisdiction to ensure that the receiving health care service can assume and continue necessary care. A release of information authorization is not required.

Current health conditions

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#### Transfer Screening

- Current treatments and medications
- Upcoming appointments and diagnostic studies
- Allergies
- Copies of any health information that is critical to continuity of care

If the receiving facility requests a copy of the medical record, it will be supplied within five working days.

The discharge summary and any related medical records being transferred shall be placed in a file or envelope that maintains the confidentiality of the inmate's medical information. The transporting personnel shall be provided separate written instructions regarding medication or health interventions, including necessary precautions that are required en route. The transporting personnel shall also document on the transfer log the date, time and name of the person receiving the inmate and the medical records.

#### 709.3.1 EXTENDED TRANSPORTATION OF INMATES

When an inmate will be in transfer status for several days and housed temporarily at various custody facilities along the way, a medical transfer packet shall be prepared by the qualified health care professional in a form that will advise the temporary housing facilities of any medical needs of the inmate. When medically appropriate, a small supply of medication should be provided with the medical transfer packet so it will be available to the temporary housing facility as needed.

#### 709.4 RECEIVING TRANSFERRED INMATES

When an inmate being transferred to this facility arrives without a full and comprehensive medical transfer packet from another facility, the inmate shall be medically screened and receive a comprehensive health appraisal in accordance with the Medical Screening Policy and Health Appraisals Policy. The medical department of the sending facility should be promptly contacted to determine if the transferred inmate has any medical needs that require immediate attention or any scheduled surgeries or appointments with community health care services. Arrangements should then be made with the sending facility for the delivery of a more detailed review of the inmate's medical needs.

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## **Medical Screening**

#### 710.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a medical screening process for newly booked incarcerated persons so that medical, mental health, and dental issues are properly identified and addressed, and to obtain a medical clearance when necessary.

#### **710.2 POLICY**

It is the policy of this office that a medical screening be performed on all incarcerated persons upon arrival at the intake area to ensure that existing, emergent, and urgent health care, dental, or mental health needs are identified, risks are assessed, and incarcerated persons with contagious and communicable diseases are properly classified and housed for their health and the health of the general population (15 CCR 1051; 15 CCR 1206.5(a); 15 CCR 1207).

#### 710.3 ELEMENTS OF MEDICAL SCREENING

The medical screening shall be performed by health services personnel when available, but may also be performed by health-trained correctional staff. The Responsible Physician, in cooperation with the Facility Commander, shall establish protocols for use by health-trained correctional staff during the medical screening. All completed medical screenings should be forwarded to the Responsible Physician. A review of any positive finding shall be performed by a qualified health care professional.

Regardless of training, no incarcerated person should be allowed to conduct health care evaluations or provide treatment to any other incarcerated person.

All incarcerated persons shall complete a medical screening as part of the booking process. If an arrestee refuses to cooperate with the medical screening, the screener will complete as much of the health assessment as reasonably possible and the arrestee will be closely observed until the arrestee cooperates with the remainder of the screening process.

The Responsible Physician should work cooperatively with the Facility Commander to develop the medical screening forms, which should be applicable for general health, mental health, and suicide screening purposes. The forms should be completed no later than 24 hours after the arrival of an incarcerated person but prior to an incarcerated person being housed in the general population. All medical screening forms shall be forwarded to the medical unit and the qualified health care professionals shall be alerted to those that need priority attention.

#### 710.3.1 MEDICAL SCREENING INQUIRY

The medical screening inquiry should include a review of the incarcerated person's prior detention facility medical record, if any, and document the following:

History of infectious or communicable diseases that are considered serious in nature;
 current treatment, symptoms, medications, chronic illness, or health issues, including

communicable diseases, or special health requirements, and/or dietary needs (15 CCR 1051)

- Acute dental problems
- Past and recent serious communicable disease symptoms (e.g., chronic cough, coughing up bloody sputum, lethargy, weakness, weight loss, loss of appetite, fever, night sweats) (15 CCR 1051)
- Mental illness, including psychiatric hospitalizations within the last three months
- Gender issues
- History of or current suicidal ideation
- Acute allergies
- History of or current prescription or illegal drug use, including the time of last use
- History or current symptoms of substance abuse withdrawal
- Current, recent, or suspected pregnancy; any history of gynecological problems and present use and method of birth control
- Appearance or history of developmental disability, body deformities, or other physical abnormalities
- Incarcerated persons who have given birth in the past year and are charged with murder or attempted murder of their infants shall be referred to mental health services at the time of booking (15 CCR 1207.5)
- Any other health issues as identified by the Responsible Physician

Upon request, incarcerated persons shall be allowed to continue the use of birth control as prescribed by a physician, nurse practitioner, certified nurse midwife, or physician assistant. All incarcerated persons shall be furnished with information and education regarding the availability of family planning services. (PC 4023.5(a)-(b)).

Qualified health care professionals should assist in developing specific mental health medical screening questions and should provide training in analyzing incarcerated person responses. The Responsible Physician should establish the role of the qualified health care professional in the medical screening process.

Should the medical screening identify a need for a more comprehensive medical assessment of the incarcerated person, a qualified health care professional should initiate appropriate follow-up action, which may include transporting the incarcerated person to an off-site medical facility.

#### 710.3.2 MEDICAL SCREENING OBSERVATION

The staff member completing the medical screening observation shall document the following observations:

- Appearance (e.g., sweating, tremors, anxious, disheveled)
- Behavior (e.g., disorderly, appropriate, insensible)

- State of consciousness (AVPU):
  - Alert spontaneously responsive
  - Verbal requires verbal stimulation to respond
  - Pain requires painful stimulation to respond
  - Unresponsive does not respond
- Ease of movement (e.g., body deformities, gait)
- Breathing (e.g., persistent cough, hyperventilation)
- Skin (e.g., lesions, jaundice, rashes, infestations, bruises, scars, recent tattoos, needle marks or other indications of drug abuse)
- Any other observable health symptoms

The Facility Commander and the Responsible Physician should develop a procedure through which it can be reliably determined what prescription medications the incarcerated person is taking and the medical urgency for continuing those medications without interruption.

#### 710.3.3 DOCUMENTATION

Written documentation of the medical screening should include the name of the screener, the date and time, and the following information:

- Immediate or scheduled referral to a medical, dental, or mental health professional
- Guidance regarding housing placement, including disciplinary detention if necessary (15 CCR 1051)
- Guidance regarding activity limitations and work assignment
- The incarcerated person's responses to questions asked by the interviewer
- Other individualized observations and recommendations.

The initial medical screening should become part of the incarcerated person's medical record and should be retained in accordance with established records retention schedules.

#### 710.4 MEDICAL SCREENING DISPOSITIONS

Persons who are brought to the facility and are obviously in need of immediate medical attention shall be referred to an emergency medical facility for clearance. Conditions that require a medical clearance prior to booking include but are not limited to the following:

- Unconsciousness
- Uncontrolled bleeding
- Significant injuries from a motor vehicle accident
- Significant injuries from an altercation
- Significant injuries from handcuffs or other restraint devices

- Knife wounds, gunshot wounds, or lacerations
- Exposure to pepper spray, TASER® device deployment, or blunt force trauma during arrest
- Intoxication to a degree that the individual cannot speak coherently or stand or walk unaided
- Recent drug overdose
- Suspected or known complications of pregnancy
- Active seizures
- Suspected or known complications of diabetes
- Exhibits behavior indicating a potential danger to themselves or others
- Active tuberculosis or other serious contagious diseases
- Actively suicidal
- Any other medical condition which, in the opinion of the booking personnel, should be urgently referred for evaluation by medically trained personnel

Incarcerated persons with these medical conditions are not suitable for admission to the facility until medically cleared by a qualified health care professional. This office requires medical clearance from an outside entity when such incarcerated persons are identified.

Medical clearance documentation shall include the medical diagnosis, treatment received at the emergency medical facility, any medications prescribed, any ongoing medical requirements, and any follow-up medical care that may be indicated before the arrestee is accepted for booking.

The Facility Commander is responsible for notifying local police agencies and medical facilities of the detention facility admission refusal policy and the required clearance documentation.

Based upon the information obtained during the screening process, the medical classification disposition of the incarcerated person shall be one of the following:

- General population or other appropriate cell assignment
- General population or other appropriate cell assignment and timely referral to appropriate health care services
- Immediate referral to health care services prior to housing

#### 710.5 HEALTH APPRAISAL

Generally, a comprehensive health appraisal should occur within 14 days of booking (see the Health Appraisals Policy). However, when it is appropriate and based on an incarcerated person's health condition, an early health appraisal should be recommended. An incarcerated person may also be cleared for housing in general population with a prompt referral to the appropriate health care services when it is in accordance with the incarcerated person's overall classification. Upon the identification of a mentally disordered incarcerated person who may be in a behavioral crisis,

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#### Medical Screening

a physician's opinion will be secured within 24 hours, or next sick call, whichever is earliest (15 CCR 1052).

#### 710.5.1 MEMBERS CONDUCTING HEALTH APPRAISALS

Medical screening should be completed by licensed health personnel or trained facility staff, with documentation of staff training regarding site-specific forms with appropriate disposition based on responses to questions and observations made at the time of screening (15 CCR 1207).

#### 710.5.2 TELEHEALTH

Telehealth may be incorporated into procedures used to identify and evaluate incarcerated persons who may be in a behavioral crisis (15 CCR 1052).

## **Mental Health Services**

#### 711.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure that all incarcerated persons have access to mental health services and that incarcerated persons identified as needing these services are referred appropriately.

#### 711.1.1 DEFINITION

Definitions related to this policy include:

**Mental health services** - A variety of psycho-social and pharmacological therapies, either individual or group, including biological, psychological, and social therapies to alleviate symptoms, attain appropriate functioning and prevent relapse.

#### **711.2 POLICY**

It is the policy of this office that a range of mental health services shall be available for any incarcerated person who requires them (15 CCR 1206(g); 15 CCR 1207; 15 CCR 1209).

#### 711.3 MENTAL HEALTH SERVICES

The Facility Commander should collaborate with the local public and private organizations that offer mental health services, treatment, and care to those incarcerated persons in need of such services.

In coordination with the health authority, the Responsible Physician, and the Facility Commander, such services shall include but are not limited to (15 CCR 1209):

- Identification and referral of incarcerated persons with mental health needs.
- Mental health treatment programs provided by qualified staff, including the use of telehealth.
- Crisis intervention.
- Basic mental health service provided to incarcerated persons as clinically indicated.
- Medication support services.
- Suicide prevention.
- Referral, transportation, and admission to licensed mental health facilities for incarcerated persons whose psychiatric needs exceed the treatment or housing capability of the facility (Penal Code § 4011.6; Penal Code § 4011.8).
- Provision of health services sufficiently coordinated such that care is appropriately integrated, medical and mental health needs are met, and the impact of any of these conditions on each other is adequately addressed.
- Obtaining and documenting informed consent.
- Release planning services.

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#### Mental Health Services

#### 711.4 BASIC MENTAL HEALTH SERVICES

Incarcerated persons may be referred to a qualified health care professional through a variety of methods, which include the medical screening process, the mental health appraisal process, and self-referral or staff referral. Qualified health care professionals should respond to all referrals in a timely manner and initiate the appropriate treatment services.

- (a) If the incarcerated person has received previous mental health treatment, the incarcerated person should be asked to complete a release of information form so that treatment records can be obtained.
- (b) Incarcerated persons who have been determined to be in need of ongoing mental health services after their release from this facility should be provided with information about community mental health treatment resources. Arrangements for more comprehensive mental health care may be made, if appropriate.
- (c) Incarcerated persons who are identified as being developmentally disabled should be evaluated for special housing needs. The qualified health care professional should work in cooperation with classification personnel to establish the best, reasonably available housing option.
- (d) Incarcerated persons who are suspected or known to have a developmental disability should receive a mental health appraisal by the qualified health care professional or health-trained custody staff as soon as reasonably practicable but no later than 24 hours after booking. Contact will be made with the regional center within 24 hours, excluding holidays and weekends, when an incarcerated person is suspected or confirmed to have a developmental disability. Incarcerated persons who have a developmental disability should be referred, where appropriate and available, for placement in non-correctional facilities or in units specifically designated for housing a developmentally disabled person (15 CCR 1057).
- (e) Incarcerated persons enrolled in mental health treatment, including psychiatric medication management, should be provided information regarding the risks and benefits to treatment. Informed consent documents should be signed by the incarcerated person to establish the incarcerated person's consent to treatment. The signed forms should be placed in the incarcerated person's health record and retained in accordance with established records retention schedules.
- (f) A treatment plan should be established for all incarcerated persons enrolled in mental health services.
  - Psychiatric and special needs treatment plans shall be reviewed every 180 days, at a minimum. Incarcerated persons taking psychotropic medication should be seen by a psychiatrist at least every 90 days. Incarcerated persons classified as requiring mental health special needs should be seen at least monthly by a qualified health care professional.
  - 2. Incarcerated persons enrolled in other ongoing forms of mental health treatment should have treatment plan updates completed every six months, at a minimum.
  - Incarcerated persons who present to the qualified health care professional as having notable difficulty adjusting to the correctional environment, but who are not diagnosed with a serious mental illness, should be evaluated for the

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#### Mental Health Services

appropriateness of mental health treatment. Consideration should be given to the qualified health care professional and the facility staff working together to address the issues that may be affecting the incarcerated person's ability to adjust to incarceration.

- (g) The qualified health care professional should utilize a site-specific suicide prevention program to ensure the safety of incarcerated persons who present with a risk of selfharm.
  - Qualified health care professionals should be assigned to daily rounds in the segregation unit to determine the mental health status of incarcerated persons housed there.
  - 2. Segregated incarcerated persons may be referred by the detention facility staff to qualified health care professionals for follow-up if concerns arise regarding their ability to function in disciplinary detention.
- (h) If the qualified health care professional has concerns about the level of mental health services that are required to manage an incarcerated person housed in the facility, the health authority shall be notified and the Responsible Physician shall be the decisionmaker regarding the health care needs of the incarcerated person.
  - The Responsible Physician may consult with a psychiatrist, specialist, or other health care service in determining whether the incarcerated person should be transferred to a facility that is better equipped to handle the incarcerated person's psychiatric needs.
  - 2. The Responsible Physician should notify the Facility Commander of the request to transfer the incarcerated person for medical treatment.
  - The case review and disposition of the patient should be documented in the incarcerated person's health record and retained in accordance with established records retention schedules.

Incarcerated persons determined to be in need of substance abuse treatment services should be informed of the facility programs available and shall be provided information about community substance abuse treatment resources.

## **Mental Health Screening and Evaluation**

#### 713.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the process by which all inmates receive an initial mental health screening by a qualified health professionalusing an instrument developed by qualified health care professionals. The initial mental health screening takes place at the time of booking, and is for the safety of the inmate and the general population. It helps the custody staff to make appropriate classification and housing decisions and to ensure that the treatment and intervention needs of the inmate are met.

#### **713.2 POLICY**

It is the policy of this office that all individuals booked into the facility shall receive an initial mental health screening by a qualified mental health professional, qualified mental health staff or health-trained custody staff. A more comprehensive medical appraisal shall be conducted within the first 14 days of incarceration to confirm the initial findings and to ensure that, if needed, an appropriate treatment plan that meets the individual needs of the inmate is in place (15 CCR 1052; 15 CCR 1209(a)(1)).

#### 713.3 MENTAL HEALTH SCREENING

The initial screening is designed to identify whether mental health conditions exist that require immediate or ongoing intervention. The screening shall be performed prior to the inmate being placed in general housing and should include:

- (a) Inquiry into whether the inmate is or has:
  - 1. Thoughts or history of suicidal behavior.
  - 2. Been prescribed or is taking psychotropic medication or antidepressants.
  - Been treated for mental health issues.
  - 4. A history of psychiatric treatment.
  - 5. A history of treatment for substance abuse or been treated for substance abuse.
- (b) Any observations of:
  - 1. Appearance and behavior.
  - 2. Abuse, injury or trauma.
  - 3. Symptoms of aggression, depression, psychosis.
- (c) A determination of whether the inmate is cleared for or referred to:
  - 1. General housing
  - 2. General housing with mental health referral
  - 3. Mental health emergency treatment

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#### Mental Health Screening and Evaluation

This information shall be recorded on the receiving screening form. It will become part of the inmate's health record and be retained in accordance with established records retention schedules.

#### 713.4 MENTAL HEALTH APPRAISAL

All new inmates shall receive a mental health appraisal by a qualified mental health professional within 14 days, unless documentation exists that an appraisal has been completed within the previous 90 days. Mental health appraisals should include, but not necessarily be limited to the following assessments:

- Mental health status
- Suicide potential
- Violence potential
- Previous psychiatric treatment
- Any history of treatment with psychotropic medication or antidepressants
- Substance abuse or treatment for substance abuse
- Educational history
- Sexual abuse victimization (28 CFR 115.81)
- Predatory behavior or perpetrated sexual abuse (28 CFR 115.81

#### 713.5 MENTAL HEALTH REFERRALS

Qualified mental health staff should administer a complete and thorough evaluation of inmates referred for treatment as soon as practicable but no later than 14 days from the referral. The evaluation should include:

- Review of the inmate's screening and appraisal information.
- Observations of the inmate's behavior.
- Information gathered from interviews and testing to determine the inmate's mental health condition, intellect, personality, problems and ability to deal with a custody environment.
- Collection of the Inmate's mental health history.

Following the evaluation, a plan of treatment and maintenance, which may include a complete psychological evaluation, should be developed to meet the inmate's needs.

## **Special Needs Medical Treatment**

#### 714.1 PURPOSE AND SCOPE

This purpose of this policy is the proper treatment and management of inmates with chronic diseases and special needs. This is accomplished by utilizing nationally recognized, generally accepted clinical guidelines and establishing communication between qualified health care professionals and custodial personnel.

#### 714.1.1 DEFINITIONS

Definitions related to this policy include:

**Chronic disease** - An illness or condition that affects an individual's well-being for an extended interval, usually at least six months, and generally is not curable but can be managed for optimum functioning within any limitations the condition creates in the individual.

**Chronic disease program** - The inmate has regular clinic visits during which a qualified health care professional monitors the medical condition and adjusts treatment as necessary. The program also includes patient education for symptom management.

#### **714.2 POLICY**

It is the policy of this office that all individuals identified as having chronic diseases or special needs are enrolled in a chronic disease program to decrease the frequency and severity of the symptoms, prevent disease progression and complication, and foster improved function.

When a qualified health care professional recognizes that an inmate requires accommodation due to a special need, correctional personnel should be notified in writing. Consultation between the qualified health care professional and custodial personnel should occur regarding the condition and capabilities of inmates with known special needs prior to a housing, work or program assignment, transfer to another facility or the imposition of disciplinary action.

Qualified health care professionals shall furnish special needs information regarding inmates to custodial personnel in order for them to accurately classify and house inmates in the facility. It is the responsibility of the Facility Commander or the authorized designee to ensure that inmates with special needs are receiving the proper care and that their needs are effectively communicated to custodial staff for appropriate accommodation (15 CCR 1206(g)).

#### 714.3 CLINICAL PRACTICE GUIDELINES

The Responsible Physician or the authorized designee is responsible for establishing and annually reviewing clinical protocols to ensure consistency with the National Clinical Practice Guidelines.

The clinical protocols for the management of chronic disease and special needs include, but are not limited to, the following:

- Asthma
- Communicable diseases

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#### Special Needs Medical Treatment

- Developmentally disabled inmates
- Diabetes
- Dialysis
- Frail or elderly inmates
- High blood cholesterol
- HIV
- Hypertension
- Mental illness
- Mobility impairments
- Pregnancy
- Seizure disorder
- Suicidal ideation
- Terminally ill
- Tuberculosis

#### 714.4 DOCUMENTATION

Documentation in an inmate's medical record should include information regarding the chronic disease protocols deployed, the person responsible for the various protocols, the extent to which the chronic disease protocols are being followed and should include, but not be limited to:

- The frequency of follow-up for medical evaluation.
- How the treatment plan was adjusted when clinically indicated.
- The type and frequency of diagnostic testing and prescribed therapeutic regimens.
- The prescribed instructions for diet, exercise, adaptation to the correctional environment and medication.
- Clinical justification of any deviation from the established protocol.

A master list of all chronic disease and special needs patients should be maintained by the Responsible Physician or the authorized designee.

#### 714.5 CHRONIC CARE PROGRAM

- (a) Newly incarcerated inmates shall receive a medical screening. This screening includes the documentation of any acute or chronic health problems or injuries, special needs and any medications or treatments the inmate is currently receiving.
  - 1. If the inmate has been incarcerated previously, his/her health records should be reviewed.

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#### Special Needs Medical Treatment

- A special needs communication form should be completed and sent to the classification unit, the Shift Supervisor and the housing officer to ensure the inmate is properly housed.
- 3. Current medications being taken by the inmate should be verified and continued as deemed appropriate by the Responsible Physician.
- 4. A health assessment shall be completed within 14 days of incarceration and a physical examination conducted within six months of incarceration.
- 5. The status of a special needs inmate should be evaluated, at minimum, every 90 days to determine the need for the continued designation.
- (b) The Facility Commander or the authorized designee and the Responsible Physician or the authorized designee should consult with one another prior to taking action regarding any special needs inmate with regard to housing, program or work assignments, disciplinary measures or transfers to other facilities.
  - When immediate action is required and prior consultation is not reasonably practicable, that consultation should occur as soon as practicable but no later than 72 hours post-action.
- (c) Individual treatment plans are used to guide treatment for episodes of illness. The format for treatment planning may vary, but should include, at a minimum:
  - 1. The frequency of follow-up for medical evaluation and adjustment of treatment modality.
  - 2. The type and frequency of diagnostic testing and therapeutic regimens.
  - 3. When appropriate, instructions about diet, exercise, adaptation to the correctional environment and medication.
- (d) Reasonable effort should be made to obtain health information and records from previous health care services, with the consent of the inmate, when the inmate has a medical problem that was being treated prior to incarceration.
- (e) Upon transfer to another correctional facility, a summary of the inmate's current condition, medications and treatment plan will be forwarded to the receiving facility in a sealed envelope to maintain inmate privacy.
- (f) Requests for health information from community health care services must be submitted with the inmate's written consent. If the inmate does not consent, the community health care service may be advised that the person is an inmate and the health information may not be provided without the inmate's written consent.
- (g) Critical specialty medical procedures or treatment, such as dialysis, which cannot be provided at the Tulare County Sheriff's Office do not require a court order unless the care is expected to prevent the inmate from returning within 48 hours (Penal Code § 4011.5).
- (h) When inmates are sent out of this facility for emergency or specialty treatment, written information regarding the inmate's current medical status and treatment should accompany the inmate. Upon return to the facility, treatment recommendations from

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#### Special Needs Medical Treatment

outside health care services should be reviewed by the Responsible Physician or the authorized designee for any changes in the custodial environment or in-house treatment plan.

- (i) Inmates identified as developmentally disabled shall be considered for discharge planning services.
  - 1.
  - 2.
- (j) With the inmate's written consent, the health services staff should:
  - 1. Share necessary information with outside health care services.
  - 2. Arrange for follow-up appointments.
  - Arrange for transfer of health summaries and relevant parts of the health record to community providers or others assisting in planning or providing for services upon release.
- (k) Contacts with community providers should be documented via an administrative note in the patient's health record.
- (I) Patients with serious mental health issues, including those receiving psychotropic medication, will be informed about community options for continuing treatment and provided with follow-up appointments when possible.
- (m) Medications should be provided as appropriate.
- (n) The Responsible Physician is responsible for ensuring that local site-specific procedures facilitate discharge planning.

# Tulare County Sheriff's Office Custody

# **Communicable Diseases**

#### 715.1 PURPOSE AND SCOPE

This policy is intended to provide guidelines for facility staff to assist in minimizing the risk of contracting and/or spreading communicable diseases. The policy offers direction in achieving the following goals:

- (a) Managing the risks associated with bloodborne pathogens (BBP), aerosol transmissible diseases (ATD) and other potentially infectious substances.
- (b) Providing appropriate treatment for ill inmates while minimizing the risk of the spread of disease.
- (c) Making decisions concerning the selection, use, maintenance, limitations, storage and disposal of personal protective equipment (PPE).
- (d) Ensuring proper reporting to local, state and federal agencies.
- (e) Establishing procedures for the identification, education, immunization, prevention, surveillance, diagnosis, medical isolation (when indicated), treatment and follow-up care for new inmates, and for inmates or employees who have contracted a communicable disease from an ill inmate.
- (f) Providing appropriate treatment, counseling and confidentiality should an employee become exposed to a communicable disease.
- (g) Protecting the privacy rights of all personnel who may be exposed to or contract a communicable disease during the course of their duties.

#### 715.1.1 DEFINITIONS

Definitions related to this policy include:

**Aerosol transmissible disease (ATD)** - A disease or pathogen for which droplet (whooping cough, influenza, streptococcus) or airborne (measles, chickenpox, tuberculosis) precautions are required.

**Aerosol transmissible disease (ATD) exposure** - Any event in which all of the following has occurred:

- An employee has been exposed to an individual who has or is suspected to have an ATD, or the employee is working in an area or with equipment that is reasonably expected to contain aerosol transmissible pathogens associated with an ATD.
- The exposure occurred without the benefit of applicable exposure controls required by this section.
- It reasonably appears from the circumstances of the exposure that transmission of disease is likely sufficient to require medical evaluation.

**Airborne precautions** - Include the use of an Airborne Infection Isolation Room (AIIR) that meets the American Institute of Architects/Facility Guidelines Institute (AIA/FGI) standards for AIIRs, for

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#### Communicable Diseases

infectious agents such as measles, chickenpox, tuberculosis, etc., in addition to medical personnel wearing masks or respirators.

**Bloodborne pathogens (BBP)** - Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV), hepatitis C virus (HCV) and human immunodeficiency virus (HIV).

**Bloodborne pathogen exposure** - Includes, but is not limited to, the contact of blood or other potentially infectious materials with the eye, mouth, other mucous membranes, non-intact skin, needle sticks, human bites, cuts, abrasions or any contact with blood or body fluids that is synonymous with bloodborne pathogen exposure as defined by the federal Centers for Disease Control and Prevention (CDC).

**Ectoparasitic infections** - Parasites that live on the skin, such as lice (pediculosis) and scabies (sarcoptic mange). Both infections are communicable and may lead to secondary infections.

**HBV** - Hepatitis B

**HIV** - Human Immunodeficiency Virus

**Medical isolation** - Housing in a separate room with a separate toilet, hand-washing facility, soap and single-service towels, and with appropriate accommodations for showering.

NIOSH - National Institute for Occupational Safety and Health

**Nosocomial** - Acquired during hospitalization. Nosocomial infections are infections that present 48 to 72 hours after admission to a hospital.

**OSHA** - Occupational Health and Safety Administration

**Personal protective equipment (PPE)** - Respiratory equipment, garments, gloves and other barrier materials designed to reduce employee exposure to hazards.

**Source control measures** - The use of procedures, engineering controls and other devices or materials to minimize the spread of airborne particles and droplets from an individual who has or exhibits signs or symptoms of having an ATD.

**Standard precautions** - Infection control practices used to prevent the transmission of disease that can be acquired by contact with blood, bodily fluids, non-intact skin (including rashes) and mucous membranes. Applies to all inmates receiving care, regardless of diagnosis or presumed infection status.

**Universal precautions** - A set of precautions designed to prevent transmission of HIV, HBV and other bloodborne pathogens when providing first aid or health care.

#### **715.2 POLICY**

It is the policy of this office to maintain an effective program that focuses on the identification, education, immunization, prevention, surveillance, diagnosis, medical isolation (when indicated), treatment, follow-up and proper reporting to local, state and federal agencies of communicable

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#### Communicable Diseases

diseases. The program is designed to ensure that a safe and healthy environment is created and maintained for all occupants of the facility (15 CCR 1051; 15 CCR 1206.5; 15 CCR 1206(i)).

#### 715.2.1 DESIGNATED INFECTIOUS CONTROL OFFICER (DICO)

The Facility Commander shall designate an DESIGNATED INFECTIOUS CONTROL OFFICER (DICO) who shall be responsible for:

- (a) Establishing written procedures and a training program related to BBPs.
- (b) Establishing written procedures and a training program related to ATDs.
- (c) Working with the Facility Commander to develop and administer any additional related policies and practices necessary to support the effective implementation of an Exposure Control Plan (ECP), including specific symptoms that require segregation of an inmate until a medical evaluation is completed (15 CCR 1051).
- (d) Acting as a liaison during OSHA inspections and conducting program audits to maintain a current ECP.
- (e) Maintaining a current list of facility staff requiring training, developing and implementing a training program, maintaining class rosters and quizzes, and periodically reviewing the training program.
- (f) Reviewing and updating the ECP annually, on or before January 1 of each year.

Supervisors are responsible for exposure control in their respective areas. They shall work directly with the DICOand the affected employees to ensure that the proper procedures are followed.

#### 715.2.2 PROCEDURES

The ECO shall be responsible for establishing, implementing and maintaining effective written procedures for the following:

- (a) Incorporating the recommendations contained in the CDC's "Respiratory Hygiene/ Cough Etiquette in Healthcare Settings."
- (b) Screening and referring cases and suspected cases of ATD to appropriate facilities within five hours of identification.
- (c) Creating a multidisciplinary team, including the Responsible Physician, and security and administrative representatives, who will meet at least quarterly to review and discuss communicable disease issues and activities. The ECO shall retain minutes of these meetings in accordance with established records retention schedules. The ECO also shall coordinate with the local public health entity on appropriate policy and procedure.
- (d) Conducting an assessment on the incidence and prevalence of tuberculosis (TB) within the facility's population and the surrounding community. If the statistics indicate a risk, the ECO shall develop a written plan that addresses the management of TB, from testing to follow-up care.
- (e) Communicating with employees, other employers and the local health officer regarding the suspected or diagnosed infectious disease status of referred inmates, including notification of exposed employees.

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- (f) Reducing the risk of ATDs through the ECP and reviewing the plan at least annually.
- (g) Reducing the risk of exposure to BBPs (HIV, hepatitis).
- (h) Providing a system of medical services for employees who may become exposed to communicable diseases during the course of their employment.
- (i) Ensuring that all employees who have occupational exposure to communicable diseases participate in a training program at the time of their initial assignment, at least annually thereafter, and any time there is a change in working conditions.
- (j) Making all exposure and treatment plans available for employees, employee representatives and NIOSH review.

#### 715.3 COMMUNICABLE DISEASE PROGRAM COMPONENTS

#### 715.3.1 INMATE FOLLOW-UP / MEDICAL REVIEWS

Surveillance takes place throughout the period of the inmate's incarceration and is done in a variety of encounters and inspections. These include, but are not limited to, the following:

- (a) Medical screening Each newly booked inmate shall be evaluated for health care needs and signs and symptoms of infectious disease. The receiving screening includes questions regarding known symptoms of TB, HIV, sexually transmitted diseases (STDs) and HBV. The individual completing the medical screening should observe the inmate for obvious signs of infection (15 CCR 1206.5(a)).
- (b) Health assessment Inmates shall have a health assessment within the first 14 days of incarceration. The health assessment process includes screening for symptoms of communicable disease. Inmates will have a Purified Protein Derivative (PPD) test or a chest X-ray for TB and a blood test for STDs. Voluntary HIV testing is provided based on identified risk.
- (c) **Periodic health assessments** Annual testing for TB is performed on all inmates who are in the facility for one year or more.
- (d) Sick call and referrals At any time during incarceration, an inmate may request to be evaluated for an infectious disease through the sick call process. Health and correctional staff can request that an inmate be evaluated if they notice any signs of potentially infectious disease.
- (e) Contact investigation When an inmate housed in the general population develops symptoms of an infectious disease, the Responsible Physician should work cooperatively with the Facility Commander or the authorized designee and the public health department to provide appropriate screening and testing of potentially exposed persons.
- (f) Environmental health and safety inspections The health and safety of the facility environment shall be inspected by the local public health entity and reported to the Facility Commander at least quarterly in a written report. Conditions identified as adversely affecting the health and safety of the inmates and/or employees or visitors shall be promptly addressed and corrected.

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#### 715.3.2 INTAKE MEDICAL QUESTIONNAIRE

During intake, all inmates will be asked if they are experiencing any of the following symptoms:

- Chronic/persistent cough
- Coughing up blood
- Fatigue/weakness
- Fever/chills
- Unexplained weight loss
- Night sweats
- Short of breath
- Loss of appetite
- Vomiting
- Diarrhea
- Clay Colored Stool
- Tea Colored Urine
- Lower abdominal pain
- Discharge from penis/vagina
- Unexplained rash on large area of the body
- · Genital sores, blisters, ulcers
- Unprotected sex with more than 2 people in last 3 months
- IV drug use
- Currently homeless

If a positive symptom of an airborne communicable disease or TB is admitted, place the inmate in respiratory isolation and refer to ED for evaluation. If a positive symptom or risk for STI, HAV or other symptoms, notify the medical provider.

#### 715.3.3 IDENTIFICATION

Any inmate suspected of having a communicable disease will be evaluated by a qualified health care professional as soon as reasonably practicable. Inmates suspected of having communicable diseases will be appropriately isolated until disease confirmation and the period of communicability is determined. Long term housing consideration will be based upon the classification status as well as the behavior, medical needs and safety of inmates and staff. These inmates shall be examined by a qualified health care professional within 24 hours. The instructions of the qualified health care professional regarding care of the patient and sanitizing of eating utensils, clothing and bedding shall be carefully followed (15 CCR 1206.5(a); 15 CCR 1206.5(b)(6)).

#### **715.3.4 TREATMENT**

Qualified health care professionals shall provide care as directed by the Responsible Physician and consistent with scientific evidence-based medicine (15 CCR 1206.5(a)).

(a) The Responsible Physician and the Facility Commander shall collaborate on treatment planning with the public health department, as appropriate.

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(b) Complete documentation of the signs, symptoms, diagnostic results, treatment and outcome of care provided to inmates who are suspected or confirmed as having a communicable disease will be entered into the inmate's health record.

#### 715.3.5 COMMUNICATION

The Responsible Physician shall ensure the following notifications are made whenever a communicable disease is identified (15 CCR 1206.5(b)(3); 15 CCR 1206.5(b)(8)):

- (a) Notification to the public health department of all reportable diseases and conditions shall be made as soon as practicable. This is done by completing appropriate forms, and if necessary, contacting the public health department directly for situations of multiple spread occurrences.
- (b) The Responsible Physician and the Facility Commander shall be kept informed of any incidence of communicable disease.
- (c) The Facility Commander shall be apprised of any medical situation that raises the risk of disease level for inmates, correctional officers or any other staff members.

#### 715.3.6 CONTINUOUS QUALITY IMPROVEMENT

A continuous quality improvement (CQI) committee shall be formed consisting of the Responsible Physician, the Facility Commander or the authorized designee and a representative from the public health entity. The purpose of the committee is to monitor infection control issues and evaluate infection control processes to ensure effectiveness.

Monthly statistics should be collected by health care services and assembled into a report presented by the Responsible Physician or the authorized designee, detailing surveillance activities, disease identification and cases treated. The committee should meet quarterly and should discuss topics specific to infection control and communicable disease. Minutes of the meetings should be retained in accordance with established records retention schedules.

#### 715.3.7 EMPLOYEE TRAINING

The Training Unit shall provide education to all sworn staff who have contact with infected persons during the initial employee orientation and annually thereafter. The Training Lieutenant shall schedule this training and shall retain all associated records in accordance with established records retention schedules.

#### 715.3.8 DATA COLLECTION AND REPORTING

The health authority shall be responsible for ensuring the systematic collection and analysis of data to assist in the identification of problems, epidemics or clusters of nosocomial infections. All reportable illnesses as defined by the public health department shall be reported as required (15 CCR 1206.5(b) et seq.).

#### 715.3.9 STANDARD PRECAUTIONS

Standard precautions shall be used by health care practitioners to minimize the risk of exposure to blood and bodily fluids of infected patients. The health practitioners and sheriff office staff shall be responsible for establishing basic guidelines including, but not limited to (15 CCR 1206.5(b)(4)):

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- Washing hands or using hand sanitizer before and after all patient or specimen contact.
- Handling all blood and bodily fluids such as saliva, urine, semen and vaginal secretions
  as if they are known to be infectious. Where it is not possible to distinguish between
  body fluid types, all body fluids are to be assumed infectious.
- Wearing gloves for potential contact with blood and other bodily fluids.
- Placing used syringes immediately in a nearby, impermeable container. Do not recap
  or manipulate any needle in any way.
- Wearing protective eyewear and a mask if splatter with blood or other body fluids is possible.
- Handling all linen soiled with blood and/or bodily secretions as infectious.
- Processing all laboratory specimens as infectious.
- As appropriate, wearing a mask for TB and other ATDs.

#### 715.3.10 TRANSMISSION-BASED PRECAUTIONS

Transmission-based precautions may be needed in addition to universal precautions for selected patients who are known or suspected to harbor certain infections. These precautions are divided into three categories that reflect the differences in the way infections are transmitted. Some diseases may require more than one category.

- (a) Airborne precautions are designed to prevent the spread of ATDs, which are transmitted by minute particles called droplet nuclei or contaminated dust particles. These particles, because of their size, can remain suspended in the air for long periods of time, even after the infected person has left the room. Some examples of diseases requiring airborne precautions are TB, measles and chicken pox.
  - 1. An inmate requiring airborne precautions should be assigned to a designated respiratory isolation room with special ventilation requirements. The door to this room must be closed at all possible times. If an inmate must move from the isolation room to another area of the facility, the inmate should wear a mask during transport. Anyone entering the isolation room to provide care to the inmate must wear a respirator.
- (b) Droplet precautions are designed to prevent the spread of organisms that travel on particles much larger than the droplet nuclei. These particles do not spend much time suspended in the air, and usually do not travel beyond a few feet of the inmate. These particles are produced when an inmate coughs, talks or sneezes. Examples of disease requiring droplet precautions are meningococcal meningitis, influenza, mumps and German measles (rubella).
  - All staff should wear masks within 3 feet of the inmate. Inmate movement should be restricted to the minimum necessary for effective facility operations. The inmate should wear a mask during transport.

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- (c) Contact precautions are designed to prevent the spread of organisms from an infected inmate through direct (touching the inmate) or indirect (touching surfaces or objects the inmate touched) contact. Examples of inmates who might be placed in contact precautions are those infected with the following:
  - 1. Antibiotic-resistant bacteria
  - 2. Hepatitis A
  - Scabies
  - 4. Impetigo
  - 5. Lice

The following guide shall be used to determine the appropriate precautions that are necessary to reduce the risk of infection transmission while inmates are being transported. Inmates shall receive training on the disease transmission process and will be provided with appropriate barrier devices.

Precautions for Inmate Contact and Transportation

	GLOVES	SURGICAL MASKS	N95 MASKS	ISOLATION GOWNS
Contact				
Inmate	No	No	No	No
Personnel	Yes	No	No	Yes
Droplet				
Inmate	No	Yes	No	No
Personnel	No	Yes	No	Yes
Airborne				
Inmate	No	Yes	No	No
Personnel	No	No	Yes	No

#### 715.3.11 ENVIRONMENTAL HEALTH AND SAFETY

The Responsible Physician or the authorized designee shall conduct a monthly inspection of areas where health services are provided to verify the following:

- The equipment is inspected and maintained to the manufacturer's recommendations.
- The area is clean and sanitary.
- The appropriate measures are being taken to ensure the unit is occupationally and environmentally safe.

#### 715.3.12 REGULATED WASTE

The Office in coordination with the health authority, will provide for the management of biohazardous materials and waste and the establishment of a protocol for the decontamination of equipment used in medical and dental treatment. Medical and dental equipment decontamination

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shall comply with all applicable local, state and federal regulations. Precautions may include, but are not limited to:

- (a) Discarding biohazardous waste in red plastic bags marked with the word BIOHAZARD and displaying the international symbol for biohazardous material. Contaminated disposable PPE shall be discarded in these receptacles.
- (b) Whenever a large amount of fluid blood is present, an absorbent powder should be used to gelatinize the fluid, which should assist in clean up. Standard precautions shall be used when removing the product, that should then be placed in a red biohazard bag.
- (c) Used biohazard bags shall be stored in covered, rigid waste receptacles in designated locations pending weekly removal by a biohazard waste removal contractor.
- (d) Records documenting biohazardous waste removal, spore count logs and cleaning logs shall be retained in accordance with established records retention schedules.

#### 715.4 ECTOPARASITE CONTROL

Ectoparasite control will be initiated, where clinically indicated, immediately following the medical screening or when the inmate manifests signs and symptoms of lice or scabies (15 CCR 1212).

- (a) Any inmate who indicates parasitical infection upon entering the facility shall be treated by a qualified health care professional.
- (b) Any inmate suspected of having lice/scabies may be referred to sick call by a deputy.
- (c) An inmate may access sick call if he/she believes there is a problem with lice/scabies.
- (d) A qualified health care professional shall evaluate any inmate with a lice/scabies complaint. If there are positive findings, the inmate shall be treated for the infestation accordingly.
  - The lice and scabies treatment guidelines will be followed by the qualified health care professional, if a physician's order for the medication administration is obtained.
    - (a) The prescribing physician shall be notified if the inmate is pregnant, as certain medications are contraindicated for pregnant women. An alternative topical application must be prescribed in these situations.
    - (b) Documentation in the medical record should include the patient's symptoms, observations regarding the condition, patient education and prescribed treatment.
  - The inmate's clothing and linen shall be removed from his/her cell placed in a
    plastic bag and sent to the laundry. These items are considered contaminated
    and must be disinfected by:
    - (a) Machine washing (hot cycle), machine drying (hot cycle), dry cleaning or ironing, or
    - (b) Storage in a plastic bag for non-washable items for 10-14 days (head lice), seven days (pubic lice). This method is not recommended for body lice.

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- (c) Isolation is not necessary as long as clothing and bedding are properly disinfected and inmates do not share items.
  - 1. An inmate having poor hygiene should be housed in a single cell until 24 hours after beginning treatment.
  - 2. Gloves are to be used for direct contact until the inmate has been treated and the clothing/bedding have been removed for disinfecting.
- Cell mates, sexual partners and any personnel having direct hands-on contact with an infected inmate should be evaluated for prophylactic treatment because of the long incubation period of the scabies parasite.

#### 715.5 EMPLOYEE EXPOSURE CONTROL

All facility staff that may come in contact with another person's blood or bodily fluids shall follow these procedures and guidelines. For the purposes of this policy, contact with blood or bodily fluids is synonymous with BBP exposure.

All employees shall use the appropriate barrier precautions to prevent skin and mucous membrane exposure whenever contact with blood or bodily fluid is anticipated. Disposable gloves shall be worn, if reasonably possible, before making physical contact with any inmate and when handling the personal belongings of an inmate.

Should gloves come in contact with blood or other bodily fluids, the gloves shall be disposed of as contaminated waste. Care should be taken to avoid touching other items (e.g., pens, books and personal items in general) while wearing disposable gloves in a potentially contaminated environment. All procedures involving blood or other potentially infectious materials shall be done in a way to minimize splashing, spraying or otherwise generating droplets of those materials.

Eating, drinking, smoking, applying lip balm and handling contact lenses shall be prohibited in areas where the potential for exposure exists.

#### 715.5.1 IMMUNIZATIONS

All facility staff members who may be exposed to, or have contact with, a communicable disease shall be offered appropriate treatment immunization. The ability of staff to provide health care services is predicated on a safe and secure working environment where employees feel safe to do their work, and assures public safety.

Staff shall also receive a TB test prior to job assignment and voluntary annual testing thereafter, at no cost to the employee.

The HBV immunization shall be available to all employees who have direct inmate contact and who test negative for HBV antibodies. The immunization is voluntary and provided at no cost to the employee. Employees who decline the offer of immunization and/or test shall be required to sign a waiver. Employees receiving immunization and testing shall be required to sign a consent form. Employees may reverse their decision to decline at any time by signing a consent form.

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#### 715.5.2 PERSONAL PROTECTIVE EQUIPMENT (PPE)

The PPE is the last line of defense against communicable disease. Therefore, the following equipment is provided to all personnel to assist in the protection against such exposures:

- Disposable latex gloves
- Safety glasses or goggles
- Rescue mask with a one-way valve
- Alcohol (or similar substance) to flush skin

The PPE should be inspected at the start of each shift and must be replaced immediately after each use and when it becomes damaged.

#### 715.5.3 DECONTAMINATION OF PERSONAL PROTECTIVE EQUIPMENT

After using any reusable PPE, it shall be washed or disinfected and stored appropriately. If it is not reusable (e.g., disposable gloves), it shall be discarded in a biohazard waste container.

Any PPE that becomes punctured, torn or loses its integrity shall be removed as soon as reasonably feasible. The employee shall wash up and replace the PPE if the job has not been terminated. If the situation resulted in a contaminated non-intact skin event, the affected area shall be decontaminated as described below.

A contaminated reusable PPE that must be transported prior to cleaning shall be placed into a biohazard waste bag. Gloves shall be worn while handling the biohazard waste bag and during placement into the biohazard waste container. The gloves shall be included with the waste.

#### 715.5.4 DECONTAMINATION OF SKIN AND MUCOUS MEMBRANES

Personnel shall wash their hands as soon as possible following the removal of potentially contaminated gloves. Antibacterial soap and warm water or an approved disinfectant shall be used, paying particular attention to the fingernails.

If an employee's intact skin contacts someone else's blood or body fluids or other potentially infectious materials, the employee shall immediately wash the exposed part of his/her body with soap and warm water and/or an approved disinfectant as soon as possible. If the skin becomes grossly contaminated, body washing shall be followed by an approved hospital strength disinfectant. If large areas of the employee's skin are contaminated, the employee shall shower as soon as reasonably possible, using warm water and soap and/or an approved disinfectant. Medical treatment should be obtained.

Contaminated non-intact skin (e.g., injured skin, open wound) shall be cleaned using an approved disinfectant and then dressed or bandaged as required. Medical treatment is required. All hand, skin and mucous-membrane washing that takes place shall be done in the designated cleaning or decontamination area. Cleaning shall not be done in the kitchen, bathrooms or other locations not designated as a cleaning or decontamination area.

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#### 715.5.5 DECONTAMINATION OF CLOTHING

Contaminated clothing such as uniforms and undergarments shall be removed as soon as reasonably feasible and rinsed in cold water to prevent the setting of bloodstains. If the clothing may be washed in soap and hot water, do so as soon as reasonably possible.

If the clothing must be dry-cleaned, place it into a biohazard waste bag and give it to the DICO. The DICO will secure a dry cleaner that is capable of cleaning contaminated clothing, and shall inform the dry cleaner of the potential contamination. The cost of dry cleaning shall be paid according to labor contract agreements.

Contaminated leather boots shall be brushed and scrubbed with detergent and hot water. If the contaminant soaked through the boot, the boot shall be discarded and replaced. The cost of replacement shall be paid according to labor contract agreements.

#### 715.5.6 DECONTAMINATION OF VEHICLES

Contaminated vehicles and components such as the seats, radios and doors, shall be washed with soap and warm water and disinfected with an approved germicide as soon as reasonably feasible.

#### 715.5.7 DECONTAMINATION OF THE CLEANING AREA

The DICO shall designate a location in the facility that will serve as the area for cleaning/ decontamination. This area is to be used to keep equipment clean and sanitary and for employees to wash any potential contamination from their bodies. This area is to be thoroughly cleaned after each use and to be maintained in a clean and sanitary order at all times between each use. The application of cosmetics, smoking of cigarettes and consumption of food and drink are prohibited in this area at all times.

#### 715.6 SHARPS AND ITEMS THAT CUT OR PUNCTURE

All personnel shall avoid using or holding sharps (needles) unless they are assisting medical personnel or collecting them for evidence. Unless required for reasons related to evidence preservation, employees are not to recap sharps. If recapping is necessary, a one-handed method shall be employed to avoid a finger prick. Disposal, when possible, shall be into a puncture-proof biohazard container.

All sharps and items that cut or puncture (e.g., broken glass, razors and knives) shall be treated cautiously to avoid cutting, stabbing or puncturing one's self or any other person. In addition, if a sharp object contains known or suspected blood or other body fluids, that item is to be treated as a contaminated item. If the item is not evidence, touching it with the hands shall be avoided. Rather, use a device such as tongs or a broom and a dustpan to clean up debris. If the material must be touched, protective gloves shall be worn.

#### 715.7 POST-EXPOSURE REPORTING AND FOLLOW-UP REQUIREMENTS

In actual or suspected employee exposure incidents, proper documentation and follow-up action must occur to limit potential liabilities and to ensure the best protection and care for the employees.

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#### 715.7.1 EMPLOYEE RESPONSIBILITY TO REPORT EXPOSURE

To provide appropriate and timely treatment should exposure occur, all employees shall verbally report the exposure to their immediate supervisor and complete a written exposure report as soon as possible following the exposure or suspected exposure. That report shall be submitted to the employee's immediate supervisor. Employees should document in the exposure report whether they would like the person who was the source of the exposure to be tested for communicable diseases (15 CCR 1206.5(b)(8)).

#### 715.7.2 SUPERVISOR REPORTING REQUIREMENTS

The supervisor on-duty shall investigate every exposure that occurs as soon as possible following the incident, while gathering the following information:

- (a) Name and employee identification number of the employee exposed
- (b) Date and time of incident
- (c) Location of incident
- (d) What potentially infectious materials were involved
- (e) Source of material or person
- (f) Current location of material or person
- (g) Work being done during exposure
- (h) How the incident occurred or was caused
- (i) PPE in use at the time of the incident
- (j) Actions taken post-event (e.g., clean-up, notifications)

The supervisor shall advise the employee of the laws and regulations concerning disclosure of the identity and infectious status of a source, and of information contained in this policy regarding source testing.

If the DICO is unavailable to seek testing of the person who was the source of the exposure, it is the responsibility of the exposed employee's supervisor to ensure testing is sought according to the guidelines in this policy.

#### 715.7.3 MEDICAL CONSULTATION, EVALUATION AND TREATMENT

Any employee who was exposed or who suspects he/she was exposed to HIV or to hepatitis B or C should be seen by a physician or qualified health care professional as soon as reasonably possible.

The doctor or qualified health care professional should be given the supervisor's report and the employee's medical records relevant to the visit and examination. The blood of the exposed employee shall be tested.

The qualified health care professional will provide the DICO and/or the Office's Risk Manager with a written opinion/evaluation of the exposed employee's medical condition. This opinion should only contain the following information:

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- If a post-exposure treatment is indicated for the employee.
- If the employee received a post-exposure treatment.
- Confirmation that the employee received the evaluation results.
- Confirmation that the employee was informed of any medical condition that could result from the exposure incident and whether further treatment or evaluation will be required.
- Whether communicable disease testing from the source is warranted, and if so, which diseases the testing should include.

All other findings or diagnosis shall remain confidential and are not to be included in the written report.

#### 715.7.4 COUNSELING

The responsible medical provider shallprovide the exposed employee (and his/her family if necessary) the opportunity for counseling and consultation per Health and Safety Code §120262 (b) (1).

#### 715.7.5 CONFIDENTIALITY OF REPORTS

Most of the information involved in this process must remain confidential. The DICO shall ensure that all records and reports are kept in the strictest confidence. The DICO shall be responsible for maintaining records containing the employee's treatment status and the results of examinations, medical testing and follow-up procedures.

The Compliance Lieutenant shall be responsible for keeping the name and Social Security number of the employee and copies of any information provided to the consulting health care professional on file.

This information is confidential and shall not be disclosed to anyone without the employee's written consent (except as required by law). Test results from persons who may have been the source of an exposure are to be kept confidential as well (15 CCR 1206.5(b)(5)).

#### 715.7.6 SOURCE TESTING

Testing of a person who was the source of an exposure to a communicable disease should be sought when it is desired by the exposed employee or when it is otherwise appropriate.

There are five methods to obtain such testing. It is the responsibility of the DICO to ensure the proper testing and reporting occurs. These methods are:

- (a) Obtaining voluntary consent from any person who may be the source of an exposure to test for any communicable disease.
- (b) Filing a report with the county health officer when an employee is exposed to the bodily fluids of an arrestee. The county health officer may pursue testing for HIV or hepatitis B or C.
- (c) Seeking consent for testing or applying for a court order for HIV, hepatitis B and hepatitis C testing.

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- (d) Seeking a court order when the person who may be the source of an exposure will not consent to testing and the exposure does not fall under a statutory scheme for testing. This covers testing for any communicable disease as deemed appropriate by a qualified health care professional and documented in the request for the court order.
- (e) Under certain circumstances, a court may issue a search warrant for testing an adult when an employee of the Tulare County Sheriff's Office qualifies as a crime victim.
- (f) If the source patient is being treated, contact the responsible health care agency to have any available blood or patient sample of the source patient's blood tested per Health and Safety Code § 120262(d)(2).

#### 715.7.7 EXPOSURE FROM A NON-INMATE

Upon notification of an employee's exposure to a non-inmate (e.g., visitor, attorney, volunteer, vendor) the DICO should attempt to determine if the person who was the source of the exposure will voluntarily consent to testing. If consent is provided, the following steps should be taken:

- (a) A qualified health care professional should notify the person to be tested of the exposure and make a good faith effort to obtain voluntary informed consent from the person or his/her authorized legal representative to perform a test for HIV, hepatitis B, hepatitis C and other communicable diseases the qualified health care professional deems appropriate.
- (b) The voluntary informed consent obtained by the qualified health care professional must be in writing and include consent for three specimens of blood. The DICO should document the consent as a supplement to the Exposure Control Report.
- (c) The results of the tests should be made available to the source and the exposed employee.

If consent is not obtained, the DICO should promptly consult with the County Counsel and consider requesting that a court order be sought for appropriate testing.

#### 715.7.8 EXPOSURE FROM AN INMATE

If the DICO receives notification from an employee of a potential exposure from an inmate, the ECO should take the following steps:

- (a) Seek consent from the person who was the source of the exposure and seek a court order, if consent is refused.
- (b) Take reasonable steps to immediately contact the county health officer and provide preliminary information regarding the circumstances of the exposure and the status of the involved individuals to determine whether the county health officer will order testing.
- (c) Remain in contact with the county health officer to determine whether testing of the inmate will occur and whether the testing satisfies the medical needs of the employee.
- (d) The results of the tests should be made available to the inmate and the exposed employee.

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Since there is potential for overlap between the two statutory schemes, the DICO is responsible for coordinating the testing with the county health officer to prevent unnecessary or duplicate testing.

If the exposed employee is not covered by either statutory scheme, the DICO should seek consent or a court order in the same manner as for a non-inmate.

# Tulare County Sheriff's Office Custody

# **Coronavirus Prevention and Protection**

#### 716.1 PURPOSE AND SCOPE

The following policies have been incorporated and continue to be followed by the Tulare County Sheriff's Office to help prevent the spread of Covid-19. In the event the scope of an outbreak does not allow for strict compliance with this policy, the Tulare County Sheriff's Office will consult with local public health officials to modify the plan accordingly.

#### 716.2 FACE MASK AND FACE SHIELD PROVISIONS

As previously directed in writing and verbally, all staff and incarcerated persons must adhere to the following procedures regarding use and maintenance of face masks and face shields.

# 716.2.1 INCARCERATED PERSONS - FACE MASK AND FACE SHIELD ISSUANCE AND USE

All incarcerated persons in the Tulare County Jail system shall be issued a face mask and face shield. All incarcerated persons are required to wear both a face mask and a face shield any time they are out of their own cell.

#### 716.2.2 FACE MASK AND FACE SHIELD MAINTENANCE

- (a) Face masks will be replaced daily. If an incarcerated person requires a new mask prior to or after replacement, they will be issued a new one as needed.
- (b) Incarcerated persons are responsible for maintaining their personal face shield at all times while in custody. The incarcerated person's name and ID number will be written on the bottom of the face shield to ensure that the incarcerated persons are only wearing their own face shield.
- (c) If an incarcerated person attempts to use a face shield to inflict self-harm or behaves in a way indicating they may do so, they will not be issued a face shield to keep and maintain. Instead, the supervising deputy will provide the incarcerated person a face shield each time they exit their cell and will collect and dispose of the face shield when they return to their cell.
- (d) If an incarcerated person routinely destroys or alters the issued face shield, this will be documented and only face masks will be allowed in the incarcerated person's cell. In this circumstance, the incarcerated person will be provided a new face shield each time they exit the cell, and it will be collected and disposed of when the incarcerated person returns to the cell.

#### 716.2.3 INCARCERATED PERSON COMPLIANCE

(a) Incarcerated persons are required to wear both the face mask and face shield anytime they are out of their own cells. In the event an incarcerated person refuses to wear the issued face mask and/or face shield, the incarcerated person will not be allowed outside of their cell until they cooperate with wearing both the face mask and face shield. These incidents will be documented in an incarcerated person infraction report and in the unit logbook (Red Book).

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- (b) Incidents of intentional destruction or alteration of face masks or face shields will also be documented in an incarcerated person infraction report and in the unit Red Book.
- (c) In the event an incarcerated person notifies staff that they cannot wear a face mask or face shield for medical reasons, staff shall consult with a supervisor.

# 716.2.4 FACE MASK PROVISIONS: FACILITY STAFF AND TCSO EMPLOYEES HAVING CONTACT WITH INCARCERATED PERSONS

As previously directed in writing and verbally, all detentions staff are required to wear a face mask and face shield, or approved eye protection, in all Tulare County jail facilities, when social distancing is not possible. Anytime this policy cannot be followed due to exigent circumstances, the incident will be reported to the shift supervisor in writing with an explanation as to the circumstances. Blatant disregard or violation of this policy will result in disciplinary action.

#### 716.3 SOCIAL DISTANCING

As previously directed in writing and verbally, the following directives shall continue to be followed.

#### 716.3.1 VISITATION

In March 2020, the Tulare County Sheriff's Office suspended all contact visitation in all jail facilities including all volunteer programs. Legal visits are conducted through glass on site at the facility, or via video conference.

#### 716.3.2 SHOWERS

Incarcerated persons shall only be allowed to shower one at a time in the shower areas. If the facility has a dormitory type setting or other multiple showers in one common area, only the number of incarcerated persons that can be kept six feet apart are allowed to shower at one time.

#### **716.3.3 BATHROOMS**

Incarcerated persons are encouraged to utilize their own bathrooms in their cells whenever possible. In the event an incarcerated person must utilize a multi-person bathroom, only the number of incarcerated persons that can be kept six feet apart are allowed in the bathroom area at one time. In the event there is an emergency and more incarcerated persons have a necessity to be in the bathroom area, they will be encouraged to physically distance as much as possible and to wear their face mask and face shield if possible.

#### 716.3.4 DAY ROOM AND YARD AREAS

Incarcerated persons are reminded to socially distance (six feet apart) while in the day room and yard areas and must wear their issued face masks and shields while in the day room and yard areas. Staff will continue to allow only the number of incarcerated persons out to program at one time that allows for six feet of distance in the day rooms and the yard areas.

Incarcerated persons failing to abide by the posted Red Line rules within each facility and through the incarcerated persons rules and regulations handbook may receive discipline. Any incarcerated person that receives discipline for violating the Red Line rules will have the opportunity to formally

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file a grievance. All grievances will be reviewed according to the existing department grievance policy.

#### 716.3.5 DISPENSING MEDICATION

Medication is dispensed at the incarcerated person's cell. (There are no lines to receive medication). The health care provider and Tulare County Sheriff's Office staff member accompanying the health care provider must each wear face masks, face shields and gloves as medication is dispensed. If medication cannot be dispensed through the port in the door and the cell door must be opened, the incarcerated person must wear their face mask and shield unless the type of medication being taken prevents this.

#### 716.4 ISOLATION, QUARANTINE, OBSERVATION AND COVID - 19 TESTING

As of July 14, 2020, Tulare County Sheriff's Office, in collaboration with Tulare County Health and Human Services (HHSA) and Wellpath, has adhered to the following plan with regard to the positive COVID -19 test results, and the prevention of spreading the virus. All fresh bookings and all incarcerated persons who have been exposed or tested positive are housed in the Isolation, Quarantine, and Observation units at the Adult Pre-Trial Facility, per the protocols below.

The Isolation and Quarantine units can house up to 97 incarcerated persons. The Observation unit can house 200 incarcerated persons. Additional exposed or positive incarcerated persons can be housed in facility Outpatient Housing Units (OPH) or in single cells within other units as necessary. In the case of a mass outbreak within a single unit, the Tulare County Sheriff's Office will isolate, quarantine and cohort incarcerated persons in accordance with. Policy 716.4.4.

#### 716.4.1 ISOLATION UNIT

Incarcerated persons who test positive will be isolated for 14 days and must be symptom free for the last 3 days of isolation. If they are not symptom free for the last 3 days, then the isolation period will be extended an additional 7 days until symptom free for the last 3 days. If they are symptom free they can return to general population. The Isolation Unit is a distinct and separate set of cells located in the Adult Pre-Trial Facility. These cells are located on the top tier of the unit. Incarcerated persons are only allowed out of their cells to take care of personal hygiene and gather supplies to clean their cells. Incarcerated person time out of the cell shall be no less than 45 minutes daily. Incarcerated persons in this unit must wear a face shield and face mask anytime the incarcerated person is out of their cell. Each incarcerated person in isolation is housed individually in a single cell. This housing arrangement has been approved by HHSA and Wellpath.

#### 716.4.2 QUARANTINE UNIT

Incarcerated persons that have been exposed to a positive case of COVID -19 will be monitored by Wellpath daily. They will be tested at day(s) 1, 7 and 14. If all tests come back negative and they are symptom free, they will be transferred back to general population. If they test positive they will be moved to the isolation tier to begin the 14 days of isolation protocol. If at any time these incarcerated persons refuse to test, they will be extended from a 14 to 21 day quarantine.

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Once they have reached the 21 day mark and have shown no signs nor symptoms for the last 24 hours of the quarantine and deemed cleared by Wellpath, they are released back to general population. The quarantine unit is a distinct and separate unit located at the Adult Pre-Trial facility which houses quarantined incarcerated persons separately from isolation incarcerated persons. All quarantined incarcerated persons are housed on the bottom tier of this unit in a single cell. If quarantine numbers climb high enough to require housing of two quarantine incarcerated persons together this can be accomplished in accordance with space requirements.

Incarcerated persons in the quarantine unit may exit their cells only to take care of personal hygiene and gather supplies to clean their cells. incarcerated person time out of the cell shall be no less than 45 minutes daily. Incarcerated persons in this unit must wear a face shield and mask anytime the incarcerated person is out of their cell. This housing arrangement has been approved by HHSA and Wellpath.

#### 716.4.3 OBSERVATION UNIT

All fresh bookings are tested for Covid-19 upon booking. If the arrestee shows symptoms of Covid-19 at the time of booking, they will be tested and sent to the negative air flow cells or available dedicated cell pending test results. If the incarcerated person tests positive, they will be sent to the isolation unit. If they test negative they will be sent to the quarantine unit and the above listed protocols will be followed. All others will be sent to the observation unit and will be monitored daily by Wellpath. If the incarcerated person is symptom free after 14 days, they will be tested and if negative moved into general population. If at any time during the observation period an incarcerated person displays signs or symptoms they will be immediately moved to quarantine. If the incarcerated person refuses to test and shows no signs or symptoms, the incarcerated person will be moved to the quarantine unit and held there an additional 7 days. Once this time period has elapsed, the incarcerated person shows no signs or symptoms, and is deemed safe by Wellpath medical personnel, they will be released to be housed in general population.

All fresh incarcerated persons booked into the Tulare County Corrections Division are housed at the Adult Pre-Trial Facility in one of five observation units. These units are distinct and separate from "General Population" units. They are two-person cells. incarcerated persons are housed together with like classification and with incarcerated persons that are booked within close time frames. If housed together and booked on different days, observation is extended for the longer housed incarcerated person. These incarcerated persons are allowed out of their cells no less than 45 minutes daily, to take care of personal hygiene, make phone calls and clean their cells. Incarcerated persons in the observation units must wear face masks and face shields any time they are out of their cells. This housing arrangement has been approved by both HHSA and Wellpath.

# 716.4.4 MASS OUTBREAK PLAN AND COHORTING PROTOCOLS **Mass Outbreaks withing Single Housing Unit**

In the event of a mass outbreak in a single housing unit, the current guidelines set by the California Department of Public Health (CDPH) and Centers for Disease Control (CDC) will be followed to the extent practicable, in consultation with local public health officials. If the scope or circumstances of

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an outbreak are such that the following protocols cannot reasonably be followed, the Tulare County Sheriff's Office will consult with local public health officials to develop reasonable alternatives.

As used in this policy, "confirmed positive" means an individual with COVID-19 infection diagnosed by viral diagnostic test, which could be either antigen or PCR. Negative antigen tests in symptomatic individuals will be confirmed with PCR.

As used in this policy, "suspected positive" means a symptomatic individual who has not yet had a diagnosis confirmed with a positive viral diagnostic test.

As used in this policy, "cohorting" refers to the practice of isolating multiple individuals who are positive for Covid-19 together or quarantining exposures and close contacts of an infected person together as a group due to a limited number of individual cells.

#### Incarcerated persons will be isolated, quarantined and cohorted within the unit as follows:

- (a) Confirmed and suspected positives will be housed on the top tier cells and the exposed/close contact individuals will be housed on the bottom tier cells.
- (b) Out of cell time/programming will be completed by all individuals who are not a confirmed or suspected positive first, individuals who are a suspected positive second, and individuals who are confirmed positive last. This will allow adequate time for proper disinfection of the unit shared program area.

#### Cohorting incarcerated persons in quarantine:

- (a) Incarcerated persons will be monitored closely for signs and symptoms of Covid-19.
- (b) Incarcerated persons will be tested at days 5-7 and 14.
- (c) Incarcerated persons who are chronic care will not program with other incarcerated persons.
- (d) Generally, each cohort will have the same last exposure date and level of exposure risk. No incarcerated persons will be added to an existing quarantine cohort after the 14-day guarantine clock has started.
- (e) Incarcerated persons who share(d) cells with confirmed COVID-19 cases will be subcohorted as much as practicable.
- (f) Incarcerated persons must wear masks and eye protection when outside of their cell.
- (g) If any incarcerated person develops symptoms, they will be tested and isolated away from the remainder of the cohort pending the results of the test.
  - 1. If the symptomatic person tests positive, the 14-day quarantine clock for the remainder of the cohort will reset to 0. Each incarcerated person in the cohort should be tested as soon as possible, and at days 5-7 and 14 from the new exposure and/or onset of symptoms.
  - If the symptomatic person tests negative, the 14-day quarantine clock for this
    incarcerated person and the remainder of the cohort does not reset. If the
    negative result is from a rapid antigen test, the symptomatic person will have
    a confirmatory PCR test before being released back to the guarantine cohort

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for the remainder of the quarantine period. Upon confirmation of the negative PCR result, the individual will be released back to the quarantine cohort as their symptoms and diagnosis allow and will be tested at the same intervals as the rest of the cohort for the duration of the quarantine period.

- 3. If the individual is not tested for SARS-CoV-2: the individual will remain under isolation and the 14-day quarantine clock for the remainder of the cohort will reset to 0 and response testing initiated.
- (h) Under this scenario, incarcerated persons undergoing intake observation will not be cohorted with those who are quarantined due to COVID-19 exposure.

#### Cohorting incarcerated persons in isolation:

- (a) Only incarcerated persons with confirmed COVID-19 will cohort together.
- (b) Incarcerated persons with laboratory confirmed COVID-19 will not cohort with:
  - Incarcerated persons with suspected but unconfirmed COVID-19
  - 2. Close contacts of incarcerated persons with confirmed or suspected COVID-19
- (c) Incarcerated persons must wear masks when outside of their cell.

#### 716.4.5 SYMPTOM SCREENING AND TESTING

Symptom screening is provided by Wellpath at intake for fresh bookings and for all other incarcerated persons Wellpath determines who are displaying symptoms of COVID-19, or housed in the observation, quarantine or isolation units. In addition to the testing administered to fresh bookings and to incarcerated persons in the observation, isolation, and quarantine units per the procedures above, COVID-19 testing is administered to incarcerated persons presenting with or complaining of Covid-19 or Flu-like symptoms, and as otherwise deemed necessary by Wellpath medical providers based upon screening criteria and clinical judgment.

Individuals who receive positive results from a rapid test will be swabbed for PCR testing and will be isolated per the above procedures and treated as COVID-19 positive pending laboratory confirmation of the positive result.

Individuals brought in as a detention only pursuant to Penal Code 849(b), to include those brought in, but cited out and/or bail bonded out during the intake process, and have a rapid positive result, will not be swabbed for PCR testing. However, the individual will be notified of the positive result, educated about covid, and provided resources on where to go to receive a PCR test or further medical screening.

#### 716.4.6 CLEANING AND SANITATION

The common areas of the observation, quarantine and isolation units are cleaned nightly using the Kaivac or Lytbot system. incarcerated persons in the observation, quarantine and isolation units are responsible for cleaning and sanitizing their cells daily. Each time an incarcerated person permanently leaves a cell, it is cleaned using the Kaivac or Lytbot system prior to a new incarcerated person being housed in the cell. Any surface touched by an incarcerated person in the observation, quarantine and isolation units is sanitized after use, including phones and showers.

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#### 716.5 REVISED LEGAL VISITATION POLICY

#### 716.5.1 IN-PERSON LEGAL VISITS

Attorneys may have non-contact visits with clients through the glass in the professional visiting area of the facility. The attorney must contact the facility and request to schedule a non-contact visit.

The attorney must contact the facility and request to schedule a non-contact visit.

#### 716.5.2 VIDEO LEGAL VISITS

For access to video legal visits, attorneys must set up a new professional account following the procedures described on the Tulare County Sheriff's Office website at:

https://tularecounty.ca.gov/sheriff/index.cfm/divisions/detentions1/detentions-operations/inmate-services/legal-professional-video-visitations/

In the event that a legal professional is unable to obtain an available time slot, or their desired time slot, in the professional video visitation schedule, and that professional needs to speak to a client due to time constraints etc., the legal professional should contact the facility and staff shall assist the legal professional in scheduling an in-person non-contact visit through the glass in the professional visiting area of the facility.

716.5.3 NOTIFICATION TO INCARCERATED PERSON OF LEGAL VISIT REQUEST Staff shall notify incarcerated persons of legal visit requests and shall document when an incarcerated person declines the visit.

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# Aids to Impairment

#### 717.1 PURPOSE AND SCOPE

This policy acknowledges the high priority of inmate health and recognizes that some inmates will require adaptive devices to assist them with daily living activities on a temporary or permanent basis.

The Tulare County Sheriff's Office has established this policy for physicians and dentists to review and evaluate the need for adaptive devices, while considering facility security concerns regarding the use of such items.

When a physician or dentist determines that the medical condition of an inmate indicates that an adaptive device is clinically appropriate, the parameters of this policy will determine if authorization for the use of such items during incarceration should be granted, and if any equipment modifications are indicated for safety or security purposes.

#### 717.1.1 DEFINITIONS

Definitions related to this policy include:

**Adaptive device** - Any orthotic, prosthetic or aid to impairment that is designed to assist an inmate with the activities of daily living or that is clinically appropriate for health, as determined by the Responsible Physician or dentist.

**Aids to impairment** - Includes, but is not limited to, eyeglasses, hearing aids, pacemakers, canes, crutches, walkers and wheelchairs.

**Orthoses** - Specialized mechanical devices, such as braces, shoe inserts or hand splints that are used to support or supplement weakened or abnormal joints, limbs and/or soft tissue.

**Prostheses** - Artificial devices designed and used to replace missing body parts, such as limbs, teeth or eyes.

#### **717.2 POLICY**

It is the policy of the Office that, in accordance with security and safety concerns, medical and dental orthoses or prostheses and other adaptive devices should be permitted or supplied in a timely manner when the health of the inmate would otherwise be adversely affected or when such devices are necessary to reasonably accommodate a disability recognized under the American with Disabilities Act (ADA) (42 USC § 12101 et seq.), as determined by the Responsible Physician or dentist (15 CCR 1206(d); 15 CCR 1207).

#### 717.3 FACILITY-OWNED MEDICAL EQUIPMENT

All adaptive devices belonging to the Office shall be marked and numbered, identifying them as office property.

(a) A medical equipment inventory form shall be completed by the intake deputy for all medical equipment issued to the inmate, regardless of who owns the property.

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(b) Upon the release of an inmate, the releasing deputy shall review the medical equipment issued to the inmate and contact the medical clinic for instructions regarding any office-owned adaptive device.

#### 717.4 MEDICAL OR DENTAL ORTHOSES, PROSTHESES OR ADAPTIVE DEVICES

The following applies to inmates with any orthopedic or prosthetic devices (Penal Code § 2656):

- (a) An inmate shall not be deprived of the possession or use of any orthopedic, orthodontic, or prosthetic device that has been prescribed or recommended and fitted by a physician or dentist (see the following exception).
- (b) Any such device that may constitute an immediate risk of bodily harm to any person in the facility or that threatens the security of the facility should be brought to the attention of the Facility Commander. If the Facility Commander has probable cause to believe such a device constitutes an immediate risk of bodily harm to any person in the facility or threatens the security of the facility, the Facility Commander may remove the device and place it in the inmate's property.
- (c) The Facility Commander shall return the device to the inmate if circumstances change and the cause for removal no longer exists.
- (d) The Facility Commander shall have the inmate examined by a physician within 24 hours after a device is removed.
- (e) The Facility Commander should review the facts with the ADA Coordinator and shall address the issue in conjunction with the Inmates with Disabilities Policy.
- (f) The physician shall inform the inmate and the Facility Commander if the removal is or will be injurious to the health or safety of the inmate. When the Facility Commander is so informed but still does not return the device, the Facility Commander shall inform the physician and the inmate of the reasons and promptly provide the inmate with a form, as specified in Penal Code § 2656, by which the inmate may petition the Superior Court for return of the appliance. The Facility Commander shall promptly file the form with the Superior Court after it is signed by the inmate. The Facility Commander should consider the following alternatives to removal of the device:
  - Reclassifying the inmate to another housing unit or administratively segregating the inmate from the general population.
  - With physician or dentist approval, modify the adaptive device to meet the medical needs of the inmate and the safety and security needs of the facility.

Once an adaptive device has been approved for use, the qualified health care professional shall enter the authorization into the inmate's health file. If the inmate requires special housing, the qualified health care professional shall document this in writing and notify custody or classification personnel appropriately. The qualified health care professional shall document the general

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condition of the prosthesis and have the inmate sign in the medical record that he/she received the prosthesis.

Any prostheses that are brought to the facility by family members or others after the inmate has been incarcerated shall be subject to a security check. The facility shall accept no responsibility for loss or damage to any adaptive device.

Inmates may be required to provide co-payments for adaptive devices supplied by the facility (Penal Code § 4011.1; Penal Code § 4011.2). Any repair or replacement of any adaptive device may be the responsibility of the inmate. If the adaptive device supplied or repaired is medically necessary and the inmate is indigent, funds for the repair shall be sought through the Inmate Welfare Fund.

#### 717.5 REQUESTS FOR MEDICAL AND DENTAL PROSTHESES

All requests for new or replacement medical or dental prostheses shall be individually evaluated by the Responsible Health Authorty or dentist and reviewed for approval by the Facility Commander. Considerations for approval shall be based upon:

- Medical needs of the inmate.
- The anticipated length of incarceration.
- The safety and security of the facility.

# Tulare County Sheriff's Office Custody

# **Detoxification and Withdrawal**

#### 718.1 PURPOSE AND SCOPE

Significant percentages of inmates have a history of alcohol and/or drug abuse. Newly incarcerated individuals may enter the facility while under the influence of a substance or they may develop symptoms of alcohol or drug withdrawal. This policy is intended to ensure that the staff is able to recognize the symptoms of intoxication and withdrawal from alcohol or drugs, and that those inmates who are intoxicated or experiencing withdrawal are provided appropriate medical treatment.

This policy also identifies protocols to be used by qualified health care professionals. These protocols are appropriate for inmates who are under the influence of alcohol or drugs or who are experiencing withdrawal from any type of substance abuse.

#### 718.1.1 DEFINITIONS

Definitions related to this policy include:

**Alcohol withdrawal** - A medical condition characterized by physiological changes that occur when alcohol intake is discontinued in an individual who is addicted to alcohol.

**Detoxification** - The process by which an individual is gradually withdrawn from drugs by the administration of decreasing doses of the drug on which the person is physiologically dependent, or a drug that is cross-tolerant to the dependent drug, or a drug that medical research has demonstrated to be effective in detoxifying the individual from the dependent drug.

#### **718.2 POLICY**

Withdrawal from alcohol or drugs can be a life-threatening medical condition requiring professional medical intervention. It is the policy of this office to provide proper medical care to inmates who suffer from drug or alcohol overdose or withdrawal.

To lessen the risk of a life-threatening medical emergency and to promote the safety and security of all persons in the facility, staff shall respond promptly to medical symptoms presented by inmates.

The Responsible Health Authority shall develop written medical protocols on detoxification symptoms necessitating immediate transfer of the inmate to a hospital or other medical facility, and procedures to follow if care within the facility should be undertaken (15 CCR 1213).

Inmates who are booked into the facility who are participating in a narcotic treatment program shall, with the approval of the director of the program, be entitled to continue in the program until conviction (Health and Safety Code § 11222).

#### 718.3 STAFF RESPONSIBILITY

Staff should remain alert to signs of drug and alcohol overdose and withdrawal. These symptoms include, but are not limited to, sweating, nausea, abdominal cramps, anxiety, agitation, tremors, hallucinations, rapid breathing and generalized aches and pains. Any staff member who suspects that an inmate may be suffering from overdose or experiencing withdrawal symptoms shall

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#### Detoxification and Withdrawal

promptly notify the Shift Supervisor, who shall ensure that a qualified health care professional is promptly notified.

#### 718.4 MEDICAL STAFF RESPONSIBILITY

The qualified health care professional will evaluate the inmate using approved protocols in order to determine the most appropriate care plan, which will be based on the patient's history, current physical status and treatment needs. Any patient who cannot be safely treated in the facility will be referred to an appropriate treatment facility off-site.

#### 718.5 PROCEDURE

Inmates who are observed experiencing severe, life-threatening intoxication (overdose) or withdrawal symptoms will be promptly seen by a physician or referred to an off-site emergency facility for treatment. Detoxification shall be conducted under medical supervision at the facility or in a hospital or community detoxification center under appropriate security conditions.

If the qualified health care professional determines that an inmate is at risk for progression to a more severe level of withdrawal, the inmate will be appropriately housed in an area where he/she can be kept under constant observation by qualified health care professionals or trained correctional staff.

#### 718.6 WITHDRAWAL AND DETOXIFICATION PROTOCOLS

Protocols are available to the qualified health care professionals to guide the care and treatment of individuals who are intoxicated or experiencing drug and/or alcohol withdrawal. These protocols, which have been developed and approved by the Responsible Physician, fall within nationally accepted guidelines and are reviewed annually.

When dealing with inmates who are in a custody situation, qualified health care professionals shall utilize detoxification protocols in accordance with local, state and federal laws.

No direct supervision is required at the time of identifying and initiating care. Overall supervision is provided by the Responsible Physician. Qualified health care professionals shall evaluate and provide care to patients utilizing written procedures and/or physician orders.

#### 718.7 ALCOHOL WITHDRAWAL SYMPTOMS CHART

The following chart describes typical symptoms of mild, moderate and severe withdrawal. It is to be used as a guide for determining when to refer inmates to a qualified health care professional. Not all symptoms are always present.

	MILD	MODERATE	SEVERE (Delirium Tremens)
ANXIETY	Mild restlessness and anxiety	Obvious motor restlessness	Extreme restlessness and agitation with appearance of intense fear is common
APPETITE	Impaired appetite	Marked anorexia	Often rejects all food and fluid except alcohol

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#### Detoxification and Withdrawal

BLOOD PRESSURE	Normal or slightly elevated systolic	Usually elevated systolic	Elevated systolic and diastolic
CONFUSION	Oriented, no confusion	Variable confusion	Marked confusion and disorientation
CONVULSIONS	No	May occur	Severe convulsions are common
HALLUCINATIONS	No hallucinations	visual and auditory hallucinations and	Visual and occasional auditory hallucinations, usually of fearful or threatening content. Misidentification of persons and frightening delusions relating to hallucinatory experiences
MOTOR CONTROL	Inner "shaky"	Visible tremulousness	Gross uncontrollable shaking
NAUSEA	Nausea	Nausea and vomiting	Dry heaves and vomiting
PULSE	Tachycardia	Pulse 100-120	Pulse 120-140
SLEEP		Marked insomnia and nightmares	Total wakefulness
SWEATING	Restless sleep or insomnia	Obvious	Extreme

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# **Clinical Decisions**

#### 719.1 PURPOSE AND SCOPE

This policy recognizes that a coordinated effort between the Responsible Health Authorityand the Facility Commander is needed to ensure an adequate health care system. It emphasizes the importance of clinical decisions being the sole responsibility of the qualified health care professional.

#### 719.1.1 DEFINITIONS

Definitions related to this policy include:

**Clinical decisions** - The process of formulating a differential diagnosis with information gathered from an inmate's medical history and physical and mental examinations, developing a list of possible causes and ordering tests to help refine the list or identify a specific disease.

**Differential diagnosis** - A systematic method of identifying unknowns or diagnosing a specific disease using a set of symptoms and testing as a process of elimination.

#### **719.2 POLICY**

Clinical decisions and actions regarding inmate health care are the sole responsibility of qualified health care professionals and should not be countermanded by others. The Responsible Health Authority shall be responsible for arranging for appropriate health resources and for determining what services are needed. The Facility Commander or the authorized designee shall be responsible for providing the custodial support to ensure a safe and secure environment for the delivery of the services and its accessibility to the inmates (15 CCR 1200(a); 15 CCR 1206(k)).

#### 719.3 MEDICAL AUTONOMY

Clinical decisions shall be made only after a thorough evaluation of the patient's complaint and physical or mental condition. The implementation of clinical decisions is to be completed in an effective and safe manner that does not violate the security regulations of the facility.

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# **Suicide Prevention and Intervention**

#### 720.1 PURPOSE AND SCOPE

This policy establishes the suicide prevention and intervention program to identify, monitor and, when necessary, provide for emergency response and treatment of incarcerated persons who present a suicide risk while incarcerated at the office detention facilities.

This policy is intended to reduce the risk of self-inflicted injury or death by providing tools to the staff that will allow a timely and organized emergency response to suicide, suicide attempts, or an incarcerated person's unspoken indications that suicide is being considered. The three key components of this plan are evaluation, training, and screening with intervention.

#### **720.2 POLICY**

It is the policy of this office to minimize the incidence of suicide by establishing and maintaining a comprehensive suicide prevention and intervention program designed to identify incarcerated persons who are at risk of suicide and to intervene appropriately whenever possible. The program shall be developed by the Facility Commander or the authorized designee and the Responsible Physician, approved by the local public health entity, and reviewed annually by the Facility Commander. A copy of this policy shall be maintained in each unit of the facility where it can be easily accessed by all staff members (15 CCR 1029(a)(8); 15 CCR 1030).

#### 720.3 SUICIDE PREVENTION TEAM

The Facility Commander in cooperation with the Responsible Physician shall establish a suicide prevention team. The team will evaluate and approve the suicide prevention and intervention program annually. The suicide prevention team will consist of qualified health care professionals and the Facility Commander or the authorized designee. The yearly evaluation will include a review of all current policies to ensure they are relevant, realistic, and consistent with the mission of the program. The program and policies will be updated as needed (15 CCR 1030).

The suicide prevention team shall also ensure that the facility is evaluated annually to identify any physical plant characteristics or operational procedures that might be modified to reduce the risk of suicide. This should be accomplished by conducting a review of suicides and suicide attempts, physical inspection, review of various facility inspection reports, and by participating in incarcerated person/management team meetings. If physical modifications are recommended, the team shall ensure the Facility Commander is promptly notified.

It shall also be the responsibility of the suicide prevention team to coordinate with the Training Lieutenant to ensure that suicide prevention training is provided in compliance with applicable statutes and standards.

#### 720.4 STAFF TRAINING

All facility staff members who are responsible for supervising incarcerated persons shall receive initial and annual training on suicide risk identification, prevention, and intervention, to include, at minimum (15 CCR 1030):

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- The provisions of this policy.
- Identification of the warning signs and indicators of potential suicide, including training on suicide risk factors.
- Identification of the demographic and cultural parameters of suicidal behavior, including incidence and variations in precipitating factors.
- Responding to suicidal and depressed incarcerated persons.
- Communication between corrections staff, court staff, and health care personnel.
- Using referral procedures.
- Housing observation and suicide watch-level procedures.
- Follow-up monitoring of incarcerated persons who attempt suicide.
- Communication between members and arresting/transporting deputies.
- A plan for mental health consultation following return from court as needed.

Recommendations for modification to suicide training should be directed to the Facility Commander, who shall review the recommendations and approve, if appropriate.

#### 720.5 SCREENING AND INTERVENTION

All incarcerated persons shall undergo medical and mental health screening during the intake process (15 CCR 1030). A portion of the intake medical screening is devoted to assessing incarcerated persons at risk for suicide. Upon an incarcerated person entering the facility, the person should be assessed by custody staff for the ability to answer medical and mental health screening questions.

Any incarcerated person who appears to be unable to answer the initial medical screening questions shall be examined by a qualified health care professional at a designated hospital and receive medical clearance before acceptance into the jail. Incarcerated persons who refuse to answer these questions shall be placed under observation until the screening can be completed, or until sufficient information is obtained to allow the staff to make appropriate decisions concerning housing and care.

Staff members shall promptly refer any incarcerated person who is at risk for suicide to classification, health services, and mental health services. The incarcerated person shall remain under direct and constant observation in a safe setting until designated staff makes appropriate health care and housing decisions (15 CCR 1030).

Special situations may arise where a screening and intervention is appropriate for an incarcerated person when the person is placed in restrictive housing, following a hearing, and after a transfer or change in classification (15 CCR 1030).

#### 720.6 SUICIDE WATCH

Incarcerated persons should only be housed on suicide watch with the approval of a qualified health care professional and the Shift Supervisor. If a qualified health care professional is

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not present in the detention facility, the Shift Supervisor may make the decision to place an incarcerated person on suicide watch but should notify a qualified health care professional as soon as practicable. incarcerated persons placed on suicide watch shall be closely monitored and housed in a cell that has been designed to be suicide resistant. Prior to housing the incarcerated person, the staff should carefully inspect the cell for objects that may pose a threat to the person's safety.

Qualified health care professionals are primarily responsible for the treatment of incarcerated persons on suicide watch. Deputies and general employees are responsible for the physical safety of incarcerated persons. All staff members should coordinate their efforts to ensure that incarcerated persons do not have the means or the opportunity to injure themselves.

An observation log shall be maintained for each incarcerated person on suicide watch. A staff member shall be designated to make a direct visual observation of the incarcerated person twice every 30 minutes at approximately 15-minute intervals. A Shift Supervisor and a qualified health care professional, if available, must observe the incarcerated person at least once every five hours. Each staff member who is required to observe the incarcerated person shall make notations in the observation log documenting the time of observation and a brief description of the person's behavior.

An incarcerated person classified as actively suicidal must be continuously monitored by direct visual observation of a deputy. While monitoring may be supplemented by video monitoring, it may never be a substitute for direct visual monitoring.

The status of suicidal incarcerated persons should be readily identifiable in a manner discernible by staff. When standard-issue clothing presents a security or medical risk to the incarcerated person or others, the incarcerated person shall be supplied with a security garment that is designed to promote the person's safety and not cause unnecessary humiliation and degradation. Use of the security garment shall be documented in the incarcerated person's health record. Suicidal persons shall not be permitted to retain undergarments or any other item that can be fashioned into an implement for hanging (e.g., plastic bags, shoelaces, sheets). Incarcerated persons shall not be permitted to keep personal property while housed on suicide watch and shall not be permitted to possess razors or other sharp objects, such as pencils, items with staples, or any other item that may be used to cause a self-inflicted injury. Physical restraints should only be used as a last resort measure. The decision to use or discontinue use of restraints should be made in consultation with qualified health care professionals.

Incarcerated persons who are not actively suicidal but who have expressed suicidal thoughts or have a recent history of self-injurious behavior should be observed by staff at irregular intervals, not to exceed every 15 minutes.

#### 720.6.1 INTERVENTION

Any suicide attempt is a medical emergency. Staff should take action to facilitate emergency medical care and preserve and collect evidence as necessary. A qualified health care professional should be summoned immediately any time the staff suspects a suicide attempt is imminent. Staff

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should take reasonable and appropriate precautions to mitigate the ability of the incarcerated persons to injure themselves, and should consider establishing and maintaining a non-threatening conversation with the person while awaiting assistance. If a qualified health care professional is not immediately available, the incarcerated person should be placed in an appropriate and safe location until such time as qualified health care professionals or the Responsible Physician is available.

Following a suicide attempt, staff should initiate a medical emergency response and initiate and continue appropriate life-saving measures until relieved by qualified health care professionals. The arriving medical staff should perform the appropriate medical evaluation and intervention. The Responsible Physician or the authorized designee should be notified in situations when referral and transportation to the emergency room of a local hospital is required (15 CCR 1030).

#### 720.6.2 NOTIFICATION

In the event of an attempted or completed suicide, the Facility Commander should be promptly notified. The Facility Commander should notify the Sheriff.

The location where a suicide or attempted suicide has occurred should be treated as a crime scene after the incarcerated person has been removed from the cell or after emergency medical care is rendered. The area should be secured and access-controlled to preserve evidence until the appropriate investigation can be completed.

All suicides or attempted suicides shall be documented in an incident report. Any injury must be documented in an incarcerated person injury report (15 CCR 1030).

All in-custody deaths, including those resulting from suicide, should be investigated and documented in accordance with the Reporting In-Custody Deaths Policy (15 CCR 1030).

#### 720.7 FOLLOW-UP

Qualified health care professionals should evaluate any incarcerated person placed in suicide watch within 24 hours of placement or at the next available physician's visit, whichever is earliest. After evaluation, qualified health care professionals should make a recommendation whether to keep the incarcerated person on suicide watch. Only a qualified health care professional may remove an incarcerated person from suicide watch.

All changes in incarcerated person status should be reported to the qualified health care professional to ensure the person receives appropriate care. The incarcerated person's health record should be updated to reflect all contacts, treatment, and any other relevant information, and the records maintained in accordance with established records retention schedules.

Although the goal of this program is to significantly reduce the risk of in-custody deaths, the ongoing care of suicidal incarcerated persons after release must also be considered. Incarcerated persons who are at risk for suicide should work with local or area mental health resources and their families after release. A deputy should complete the necessary application, documenting the reasons why the incarcerated person is believed to be suicidal. The completed application should accompany the released incarcerated person to the designated facility.

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#### 720.8 TRANSPORTATION

Incarcerated persons at risk for suicide pose additional challenges during transport and while being held in court holding facilities. The transportation staff should take reasonable steps to closely monitor at-risk incarcerated persons whenever they are transported or held in any cell that is not designated as a suicide-watch cell. All additional security and monitoring measures implemented by the staff should be documented in the incarcerated person's record. The transporting deputy should ensure that the suicide threat or other danger is communicated to personnel at the receiving facility.

## **Inmate Death - Clinical Care Review**

#### 721.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the actions and notifications required in the event of an in-custody death and the medical care received by the inmate. The policy requires that a review of all in-custody deaths be conducted to assess the appropriateness of the clinical care provided and the effectiveness of the facility's policies and procedures.

#### 721.1.1 DEFINITIONS

Definitions related to this policy include:

**Administrative review** - An assessment of the facility's emergency response actions surrounding the death of an inmate. The purpose of the administrative review is to identify areas where operations, policies and procedures may be improved.

**Clinical mortality review (CMR)** - An assessment of the medical condition of the inmate prior to treatment, the clinical care provided by contractors and the circumstances of the death. The purpose of the CMR is to identify areas of patient care or system policies and procedures that may be improved.

#### **721.2 POLICY**

It is the policy of this office that all in-custody deaths are reviewed to determine the appropriateness of the clinical care provided, to determine whether existing policies are appropriate or if revision is necessary and to identify any other issues associated with the circumstances of the death. A postmortem examination should be performed according to the laws of the jurisdiction if the cause of death is unknown, if the death occurred under suspicious circumstances or if the inmate was not under current medical care (15 CCR 1046(a)).

#### 721.3 NOTIFICATIONS

In the event of an in-custody death, all authorities with jurisdiction, including the Coroner or the authorized designee shall immediately be notified by the Facility Commander or the authorized designee at the time of death.

The Responsible Health Authority should also be notified and should coordinate with the Facility Commander, who will be responsible for notifying his/her chain of command regarding all medical issues surrounding the in-custody death.

Information regarding the individual designated by the deceased inmate for notification should be provided to the Coroner or the authorized designee, who is charged with the responsibility of making such notifications.

#### 721.4 DOCUMENTATION

The qualified health care professional on-duty at the time of the in-custody death shall ensure that all witnessed facts concerning the death are documented on the inmate's health record.

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#### Inmate Death - Clinical Care Review

The Responsible Physician should initiate a death report and document it in accordance with the Continuous Quality Improvement Policy.

#### 721.5 CLOSING THE MEDICAL RECORD

The Responsible Health Authority should review the inmate's health record to ensure appropriate entries have been made, and within 24 hours of the death have the original and a complete copy of the medical record made and delivered as follows (see the Reporting Inmate Deaths Policy):

- a. Seal the original in an envelope and retain in the custody of the Responsible Health Authority.
- b. Send the copy to the facility for inclusion into the inmate file and retain in accordance with established records retention schedules.

#### 721.6 DEATH BY SUICIDE

In the event of a suspected inmate suicide, the qualified health care professional shall make a report within 24 hours to the Responsible Health Authority containing:

- (a) The inmate's known mental health history.
- (b) The most recent known mental health treatment.
- (c) All known circumstances surrounding the suicide.

The initial CMR should be conducted by the Responsible Health Authority and, if available, a mental health care professional. The CMR should be finalized within 30 days by the Responsible Health Authority. The findings should be shared with the treating staff.

#### 721.7 DEATH REVIEW

All deaths should be reviewed within 30 to 90 days. The review shall consist of an administrative review, a CMR and a if the death was by suicide.

Treating staff shall be informed of the CMR and the administrative review findings at the quarterly continuous quality improvement meeting.

Corrective actions identified through the CMR should be implemented and monitored in accordance with the Continuous Quality Improvement Policy for systemic issues and the Inmate Safety Policy for staff-related issues.

## **Nursing Assessment Protocols**

#### 722.1 PURPOSE AND SCOPE

The purpose of this policy is to establish standards for evaluating and treating inmates with medical issues that are easily and effectively treated or triaged by nursing personnel who have been properly trained in the use of nursing assessment protocols.

#### **722.2 POLICY**

It is the policy of this office that medical care performed by personnel other than a physician shall be performed pursuant to a written protocol or order of the Responsible Health Authority.

#### 722.3 PROTOCOL DEVELOPMENT AND AUTHORIZATION

The facility's Responsible Health Authority or the authorized designee shall develop, review and authorize all nursing protocols used for the treatment of inmates, and shall develop, deliver or procure appropriate training for the nurses on their use. Each nursing assessment protocol will have a signed declaration indicating it has been reviewed and approved by the nursing administrator and the Responsible Health Authority.

The protocols developed shall be appropriate for the training and experience of the health care services staff members who will deliver the services. Each protocol shall comply with the standards of practice for the level of care the health care services staff members are authorized to provide. The protocols shall only include the use of OTC medications.

The Responsible Health Authority shall review the nursing assessment annually, revising as necessary and dating and signing approved protocols (15 CCR 1204).

## **Out Patient Housing**

#### 723.1 PURPOSE AND SCOPE

This policy recognizes that some inmates will need care for an illness or diagnosis that requires daily monitoring, daily medication and/or therapy, or assistance with daily activities at a level that requires skilled nursing intervention. Such inmates are best served in an area expressly designed and operated for providing medical care in close proximity to qualified health care professionals.

#### **723.2 POLICY**

It is the policy of this office that out patient care is provided when appropriate to meet the serious medical needs of inmates. The Medical Provider shall be responsible for developing and maintaining an out patient manual, that shall be available in out patient housing.

Admission to and discharge from out patient housing shall be controlled by medical orders or protocols issued by a qualified health care professional after a clinical evaluation and the establishment of a treatment plan.

#### 723.3 DOCUMENTATION REQUIREMENTS FOR OUT PATIENT INMATES

A complete inpatient health record shall be kept for each inmate housed in out patient housing and should include:

- The admitting order that includes the admitting diagnosis, medications, diet, activity restrictions, diagnostic tests required and frequency of vital sign monitoring and other follow-up.
- Complete documentation of the care and treatment given.
- The medication administration record.
- A discharge plan and discharge notes.

#### 723.4 OUT PATIENT HOUSING REQUIREMENTS

Inmates in out patient housing shall have access to operable washbasins with hot and cold running water at a minimum ratio of one basin for every 12 inmates, unless state or local building or health codes specify differently. Sufficient bathing facilities shall be provided in the infirmary to allow inmates to bathe daily. At least one bathing facility shall be configured and equipped to accommodate inmates who have physical impairments or who need assistance to bathe. Water for bathing is thermostatically controlled to temperatures ranging from 100 to 120 degrees.

Inmates inout patient housing shall have access to toilets and hand-washing facilities 24 hours a day and can use the toilet without staff assistance.

## **Medical Equipment and Supply Control**

#### 724.1 PURPOSE AND SCOPE

This policy outlines the control and inventory process to be utilized in accounting for all medical equipment and supplies. Medical equipment and supplies can pose a hazard for both the inmate population and the staff. Unauthorized possession of medical equipment and supplies constitutes possession of contraband. Unauthorized use of medical equipment and supplies violates inmate rules detailed in the inmate handbook. Since it is necessary to have a well-stocked medical space within the secure perimeter of the facility, there must be a plan to ensure that equipment and medical supplies are accounted for and tightly controlled.

#### **724.2 POLICY**

It is the policy of this office that all medical equipment, including sharps, dental instruments, needles and other items must be tightly controlled so they cannot be used as weapons or to facilitate the injection of drugs or other substances. Additionally, these tools and supplies must be controlled to prevent exposure to biohazards.

#### 724.3 STAFF RESPONSIBILITIES

It is the responsibility of the Facility Commander to ensure that the inmate handbook clearly defines the unauthorized possession and/or use of medical equipment and supplies as a rule violation that may result in discipline.

The Responsible Health Authority or the authorized designee shall create and maintain an inventory log for all medical equipment and supplies. This log will be utilized by medical personnel who work within the facility to track and control medical equipment and supplies. When not in use, all medical equipment and supplies shall be stored in a secure manner to prevent unauthorized access.

At the beginning of each shift, the qualified health care professional shall inventory the medical supplies and equipment within their control. Any time a disposable item is used, the log shall reflect its use and disposal. At the end of each shift, the qualified health care professional will conduct another inventory using the supply and equipment log, and reconcile any disposable supplies used during their shift.

If there is a discrepancy that indicates that medical supplies or equipment are missing, the Shift Supervisor shall be immediately notified. The Shift Supervisor shall initiate a search for the missing supplies and/or equipment. The Shift Supervisor shall document the incident and any actions taken and provide the Facility Commander with a complete report.

## **Continuation of Care**

#### 725.1 PURPOSE AND SCOPE

The purpose of this policy is to establish and maintain a proactive health system in the facility that fosters the continuation of health care needs that, if discontinued, would have a negative effect on the health of the incarcerated person. The sole objective is to maintain or improve the health of the incarcerated persons. This policy is intended to ensure that incarcerated persons receive health services in keeping with current community standards as ordered by qualified health care professionals.

#### **725.2 POLICY**

It is the policy of this office that all incarcerated persons shall have access to the continuation of care for a health issue, provided the treatment plan meets community standards. The incarcerated person's health care needs will be assessed by qualified health care professionals and continued as determined or referred after release (15 CCR 1206.5(a); 15 CCR 1210).

#### 725.3 CONTINUATION OF CARE

The Facility Commander is responsible for coordinating with the County Health Officer and Contracted Medical or Mental Health Vendor Physician to ensure that all incarcerated persons receive appropriate health care, including but not limited to:

- (a) Newly booked incarcerated persons shall have a medical screening as part of the booking and classification process. This screening includes documentation of acute or chronic health issues or conditions, existing injuries, and medications or treatments the incarcerated person is currently receiving.
  - 1. Any prior detention facility health records, including those from other facilities, should be reviewed.
  - 2. Current medications will be verified and continued as deemed appropriate by the Responsible Physician or the authorized designee.
- (b) A health assessment is completed on or before the 14th day of continuous incarceration.
- (c) Continuation of birth control measures, upon request by the incarcerated person, as prescribed by a physician, nurse practitioner, certified nurse midwife, or physician assistant (Penal Code § 4023.5).
- (d) Individual treatment plans that are used to guide treatment. The format for planning may vary but should include, at a minimum:
  - 1. The frequency of follow-up for medical evaluation and adjustment of treatment modality.
  - 2. The type and frequency of diagnostic testing and therapeutic regimens.
  - 3. When appropriate, instructions about diet, exercise, medication, and adaptation to the correctional environment.

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#### Continuation of Care

- 4. Custody staff is informed of the treatment plan when necessary to ensure coordination and cooperation in the ongoing care of the incarcerated person.
- (e) Reasonable effort should be made to obtain information and records relating to previous health care professionals, with the consent of the incarcerated person, if the incarcerated person is currently under medical care.
- (f) Upon transfer to another facility, a medical discharge summary of the incarcerated person's current condition, medications, and treatment plan will be forwarded in a sealed envelope (to maintain confidentiality) to the receiving facility.
- (g) Response to requests for health information from medical facilities and health care professionals, with the incarcerated person's written consent.
- (h) When incarcerated persons are sent out of the facility for emergency or specialty medical treatment, written information regarding the incarcerated person's reason for transfer, pertinent medical problems, and list of current medications should be sent with the incarcerated person and may be given to those providing care upon request. The name and telephone number of a contact person the medical facility can call should be included with the patient's health information. Upon the incarcerated person's return to the facility, treatment recommendations should be reviewed by the Responsible Physician or the authorized designee and appropriate plans should be made for continuing care in the facility based on the treating facility's diagnosis, recommended medications, and other treatment.
- (i) Upon release from the facility, incarcerated persons should be given written instructions for the continuation of care, including but not limited to:
  - 1. The name and contact information of health care facilities for follow-up appointments.
  - 2. Prescriptions and/or an adequate supply of medication for those with chronic medical or psychiatric conditions.

## **Continuous Quality Improvement**

#### 726.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a Continuous Quality Improvement (CQI) process of health care review in an effort to identify improvement needs in policies, processes or staff actions, and to develop and implement better health care strategies to improve the processes and outcomes of the health care services delivered at this facility.

#### **726.2 POLICY**

It is the policy of this office that an internal review and CQI process for inmate health care delivery and outcomes is developed and maintained, measurable goals and objectives are established and reviewed annually, and that the process itself is periodically reviewed and updated as needed. The process should be supervised by the Responsible Health Authority. The data evaluated should result in more effective access to services, an improved quality of care and a better utilization of resources.

#### 726.3 CQI TECHNIQUES AND MONITORING

The CQI process may be applied to any aspect of health care delivery and health service outcomes, including, but not limited to, monitoring and reviewing the following:

- Quality of the medical charts, by the Responsible Health Authority or the authorized designee
- Investigations of complaints and grievances
- Corrective action plans and plan outcomes
- Deaths in custody, suicide attempts, sentinel events, and incident and management of serious communicable disease outbreaks
- Plans for employee education and training, using investigation findings
- Records of internal review activities
- Quarterly reports to the Responsible Health Authority and Facility Commander
- Legal requirements for confidentiality of medical records
- Credentialing (assessing and confirming qualifications), privileging (authorization to provide services), and training of employees and the associated peer review processes
- Condition and effectiveness of the care environment
- Adequacy and quality of supplies and equipment
- Quality of care provided to individual patients
- Accuracy and efficiency of pharmacy services and medication administration
- Ease of access to care

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### Continuous Quality Improvement

- Risk minimization tactics
- Data describing the types, quality and quantity of care provided
- Accreditation compliance

## **Management of Health Records**

#### 727.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a uniform manner of maintaining the active health records of incarcerated persons for easy accessibility during clinical treatment, and the storage methods for inactive health records. This policy also addresses practices that will ensure the confidentiality of health record information by separating it from custody records.

#### 727.1.1 DEFINITIONS

Definitions related to this policy include:

**Protected health information** - Information that relates to the incarcerated person's past, present, or future physical or mental health or condition, the provision of medical care to the incarcerated person, or the past, present, or future payment for the provision of health care to the incarcerated person (45 CFR 160.103).

#### 727.2 POLICY

It is the policy of this office to maintain the confidentiality of incarcerated persons' protected health information. Incarcerated person health records will be maintained separately from custody records and under secure conditions, in compliance with all local, state, and federal requirements.

The Responsible Physician or the authorized designee will establish standardized facility procedures for recording information in the file and for the control and access to incarcerated person health records. Incarcerated person workers shall not have any access to incarcerated person health records.

#### 727.3 INITIATING A HEALTH RECORD

Following the initial medical screening process, the qualified health care professional shall initiate a health record for each incarcerated person. The Responsible Physician shall be responsible for developing and implementing procedures for standardized record formatting (15 CCR 1205 et seq.).

#### 727.4 CONFIDENTIALITY OF AN INCARCERATED PERSON'S HEALTH RECORDS

Information regarding an incarcerated person's health status is confidential. Active health records shall be maintained separately from custody records. Access to an incarcerated person's health record shall be in accordance with state and federal law (Health Insurance Portability and Accountability Act (HIPAA) of 1996, Public Law 104-191 and the implementing regulations) (15 CCR 1205).

The incarcerated person's protected health information may be disclosed, with the incarcerated person's written authorization, to any person so designated. A fully completed authorization for release and/or a disclosure of protected health information form shall be required prior to disclosure based upon informed consent (15 CCR 1205).

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The incarcerated person's protected health information may be disclosed by the qualified health care professional without the incarcerated person's authorization under certain circumstances and when approved by the Responsible Physician or the authorized designee. Those circumstances include:

- (a) To known qualified health care professionals who are members of the health care team responsible for the incarcerated person's care.
- (b) To custody staff regarding incarcerated persons as reasonably necessary to protect the safety, security, and good order of the facility. Examples may include information that the incarcerated person may be:
  - 1. Suicidal.
  - Homicidal.
  - 3. A clear custodial risk.
  - 4. A clear danger of injury to self or others.
  - 5. Gravely disabled.
  - 6. Receiving psychotropic medications.
  - 7. A communicable disease risk.
  - 8. In need of special housing.
- (c) To the local public health officer when an incarcerated person is part of a communicable disease investigation.
- (d) Pursuant to a court order or valid subpoena duces tecum, accompanied by satisfactory assurance that the incarcerated person has been given notice and an opportunity to file an objection or efforts have been made to secure a protective order as required under HIPAA (45 CFR 164.512).
- (e) To a law enforcement officer for purposes of a criminal investigation, to avert a serious threat to the health or safety of any person or to fulfill mandatory reporting requirements.
- (f) To a law enforcement officer when the incarcerated person has died as a result of criminal conduct.

The incarcerated person's limited protected health information may also be disclosed to a law enforcement officer for purposes of identifying or locating a suspect or when the incarcerated person is a victim of a crime. When reasonably possible, the approval of the Facility Commander should be obtained prior to disclosure.

Attorneys requesting health record information regarding an incarcerated person shall be advised that an authorization for release and/or a disclosure of medical information form or an attorney release form signed by the inmate is required.

Family members may be informed of the incarcerated person's custody status and whether the incarcerated person is receiving medical care. Family members requesting additional information must provide a proper authorization for release and/or a disclosure of medical information form.

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#### Management of Health Records

The Facility Commander, in consultation with the Responsible Physician, shall designate personnel who will be responsible for reviewing all requests for access to medical records and who will propose related policies and procedures and other activities designed to facilitate proper documentation of health care and access to records.

#### 727.4.1 ADDITIONAL STATE PRIVACY PROTECTIONS

The health services administrator and Responsible Physician or the authorized designee shall ensure that privacy protections comply with state law requirements regarding privacy and confidentiality applicable to the specific type of medical records requested, including:

- (a) Records associated with human immunodeficiency virus (HIV) or acquired immunodeficiency syndrome (AIDS) (Health and Safety Code § 121025).
- (b) Records of patients in alcohol or substance abuse treatment programs (Health and Safety Code § 11845.5).

#### 727.5 HEALTH RECORD CONTENTS

- (a) To standardize record keeping and to identify responsibilities, the following should apply to incarcerated person health records (15 CCR 1205):
  - The qualified health care professional or the authorized designee should be responsible for ensuring that all required information and forms are included in the medical records. There should also be a periodic informal review as described in the Continuous Quality Improvement Policy.
  - The qualified health care professional or the authorized designee should be responsible for ensuring incoming written findings and recommendations are returned with the incarcerated person from any offsite visit and filed in the incarcerated person's medical record.
- (b) Incarcerated persons' health records shall minimally contain but are not limited to:
  - 1. Identifying information (e.g., incarcerated person name, identification number, date of birth, gender) on each sheet in the file.
  - 2. Completed incarcerated person medical/mental health screening forms and evaluation reports.
  - 3. Health appraisal information and data forms.
  - 4. Complaints of illness or injury.
  - 5. A problem summary, containing medical and mental health diagnoses and treatments as well as known allergies.
  - Immunization records.
  - 7. Progress notes of all significant findings, diagnoses, treatments, and dispositions.
  - 8. Orders from a qualified health care professional for prescribed and administered medications and medication records in conformance with 15 CCR 1216.
  - 9. X-ray and laboratory reports and diagnostic studies.

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- A record of the date, time, and place of each clinical encounter with incarcerated persons.
- 11. Health service reports.
- 12. Individualized treatment plans when available or required.
- 13. Consent and refusal forms.
- 14. Release of information authorization forms (including HIPAA forms).
- 15. Results of specialty consultations and off-site referrals.
- 16. Special needs treatment plans, if applicable.
- 17. Names of personnel who treat, prescribe, and/or administer/deliver prescription medication.

#### 727.6 ACTIVE INCARCERATED PERSONS HEALTH RECORDS

Active incarcerated person health records will be accessible to qualified health care professionals as necessary for the provision of medical treatment and other uses allowed by law, or the Facility Commander or the authorized designee under exigent circumstances, to protect the safety, security, and good order of the facility.

All entries in the incarcerated person's health record will have the place, date, time, signature and title of each individual providing care and should be legible.

Documentation in the incarcerated person's health record is done in the subjective, objective, assessment, and plan (SOAP) format. An incarcerated person's health record is initiated at the first health encounter following the initial medical screening.

If an incarcerated person has been previously incarcerated, the previous health record should be reactivated. If a new record has been initiated and a previous record exists, medical records personnel should merge the two records in order to compile a complete history, unless mandated statutory retention schedules have provided for the destruction of one file and there is a need to create a new file.

New information shall be entered on the health record at the completion of each encounter.

All the incarcerated person's health records shall be returned to the file prior to the end of each watch.

#### 727.7 ELECTRONIC MEDICAL RECORDS

If medical records are maintained in an electronic format, the system should be structured with redundancies to ensure the records will survive any system failure.

#### 727.8 HIPAA COMPLIANCE

The Facility Commander, in consultation with the Responsible Physician, shall ensure that a health record protection and disclosure compliance plan conforming to the requirements of HIPAA is

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#### Management of Health Records

prepared and maintained. The plan should detail all necessary procedures for security and review of the access and disclosure of protected health information.

At minimum, the plan will include:

- Assignment of a HIPAA compliance officer who is trained in HIPAA compliance and will be responsible for maintaining procedures for and enforcing HIPAA requirements, including receiving and documenting complaints about breaches of privacy.
- Ongoing training on HIPAA requirements, depending on the level of access the member has to protected health information.
- Administrative, physical, and technical safeguards to protect the privacy of protected health information.
- Procedures for the permitted or required use or disclosure of protected health information and the mitigation of harm caused by improper use or disclosure.
- Protocol to ensure privacy policies and procedures, any privacy practices notices, disposition of any complaints, and other actions, activities, and designations required to be documented, are maintained for at least six years after the date of creation or last effective date, whichever is later.

# Informed Consent and Right to Refuse Medical Care

#### 728.1 PURPOSE AND SCOPE

This policy recognizes that inmates have a right to make informed decisions regarding their health care. It establishes the conditions under which informed consent should be obtained prior to treatment, when medical care may proceed without consent, the documentation process for the refusal of medical care and the retention of refusal forms.

#### 728.1.1 DEFINITIONS

Definitions related to this policy include:

**Informed consent** - The written agreement by an inmate to a treatment, examination or procedure. Consent is sought after the inmate has received the material facts about the nature, consequences and risks of the proposed treatment, the examination or procedure, the alternatives to the treatment and the prognosis if the proposed treatment is not undertaken, in a language understood by the inmate.

#### **728.2 POLICY**

It is the policy of this office that generally, all health care examinations, treatments and procedures shall be conducted with the informed consent of the inmate. Exceptions include emergencies, lifethreatening conditions and a court order (15 CCR 1214).

#### 728.3 INFORMED CONSENT

The qualified health care professional initiating treatment shall inform the inmate of the nature of the treatment and its possible side effects and risks, as well as the risks associated with not having the treatment.

For invasive procedures or any treatment where there is some risk to the inmate, informed consent is documented on a written form containing the signatures of the inmate and a health services staff witness.

A signed informed consent shall be obtained and witnessed by the prescribing psychiatrist for the initiation of psychotropic medication.

Appropriate arrangements shall be made to provide language translation services as needed before an inmate signs any informed consent form.

For minors and conservatees, the informed consent of a parent, guardian or legal custodian applies where required by law. Absent informed consent in non-emergency situations, a court order is required before involuntary treatment can be administered to an inmate.

#### 728.4 REFUSAL OF TREATMENT

When an inmate refuses medical, mental health or dental treatment or medication, he/she shall be counseled regarding the necessity of the treatment/medication and the consequences of

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#### Informed Consent and Right to Refuse Medical Care

refusal. The inmate shall then be requested to sign a form acknowledging that he/she refused an examination and/or treatment.

The form shall be filled out completely by the qualified health care professional and include the inmate's name, booking number, treatment/medication refused, the risks or consequences of refusal and the inmate's mental status. The form must be signed by the inmate and a witness.

In the event that the inmate refuses to sign, a notation to this effect shall be documented on the inmate signature line. This shall require a signed acknowledgement by two witnesses.

Documentation regarding the inmate's mental status shall be noted in the medical record, along with a brief note describing the intervention of the qualified health care professional.

The completed form is to be placed in the inmate's medical record.

It is the responsibility of the qualified health care professional to refer all refusal forms to the Responsible Physician.

Any time there is a concern about the decision-making capacity of the inmate, an evaluation shall be conducted, particularly if the refusal is for critical or acute care.

Any time an inmate refuses to take his/her medication, attend sick call or a scheduled medical appointment, a signed refusal must be obtained by the qualified health care professional.

The refusal form shall be a permanent part of the inmate's medical record.

The inmate may revoke his/her refusal at any time.

#### 728.4.1 STERILIZATION

This office shall not perform any sterilization procedure on an inmate, without the inmate's consent, unless the procedure is necessary to save the inmate's life. A sterilization procedure may be performed with the inmate's consent under the following conditions (Penal Code § 3440(b)):

- (a) Less invasive measures are not available, have been refused by the inmate or have been deemed unsuccessful.
- (b) A second physician, approved to provide medical services for the facility, but not employed by the county, confirms the need for the procedure.
- (c) The inmate has been advised of the impact and side effects of the procedure, and that refusal will not affect his/her ability to receive future medical treatment.

If a sterilization procedure is performed, this office shall provide psychological consultation before and after the procedure, as well as the appropriate medical follow-up (Penal Code § 3440(c)).

The Support Services Manager shall also submit data annually to the Board of State and Community Corrections regarding the race, age, medical justification and method of sterilization for any sterilization procedure performed (Penal Code § 3440(d)).

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#### Informed Consent and Right to Refuse Medical Care

#### 728.4.2 INVOLUNTARY ADMINISTRATION OF PSYCHOTROPIC MEDICATION

Psychotropic medication may only be administered involuntarily to an inmate in emergency circumstances or as otherwise allowed by law and only with a physician's order. The medication administered shall only be what is required to treat the emergency condition and administered for only as long as the emergency continues to exist. A court order shall be sought or legal consent shall be obtained if the Responsible Physician anticipates further dosage will be necessary or beneficial (Penal Code § 2603; 15 CCR 1217).

In cases of non-emergencies, certain conditions must be met as described in Penal Code § 2603(c) prior to the involuntary administration of the psychotropic medication, including a documented attempt to locate an available bed in a community-based treatment facility in lieu of seeking to administer involuntary medication (Penal Code § 2603).

The reason medication was involuntarily administered should be documented in the inmate's health care record.

#### **728.5 RECORDS**

The Facility Commander or the authorized designee shall work with the Responsible Physician to develop medical care consent and refusal forms and a system for retaining records in the inmate's health file in accordance with established records retention schedules.

## **Inmate Health Care Communication**

#### 729.1 PURPOSE AND SCOPE

The purpose of this policy is to establish and maintain effective communication between the treating qualified health care professionals and custody personnel. This communication is essential at all levels of the organization to ensure the health and safety of all occupants of the facility.

#### **729.2 POLICY**

It is the policy of this office that effective communication shall occur between the Facility Commander and the treating qualified health care professionals regarding any significant health issues of an inmate. All health issues should be considered during classification and housing decisions in order to preserve the health and safety of the occupants of this facility.

When a qualified health care professional recognizes that an inmate will require accommodation due to a medical or mental health condition, custody personnel shall be promptly notified in writing.

#### 729.3 NOTIFICATION TO SUPERVISORS

In the event that there is no mutual agreement regarding an individual or group of inmates who require special accommodation for medical or mental health conditions, supervisors in the respective chain of command within the health care and custody staff should address these issues.

#### 729.4 NOTIFICATION TO THE SHERIFF FOR MEDICAL RELEASE

Supervisors, through the chain of command, should advise the Sheriff when a terminally ill inmate may be appropriate for early release or medical probation under Government Code § 26605.6 because the inmate would not reasonably pose a threat to public safety and the inmate has a life expectancy of six months or less, or the inmate requires 24-hour care or acute long-term inpatient rehabilitation services.

## **Forensic Evidence**

#### 730.1 PURPOSE AND SCOPE

The purpose of this policy is to maintain credibility between the inmates and the facility's qualified health care professionals by establishing clear guidelines restricting facility health care professionals from participating in the collection of forensic evidence for disciplinary or legal proceedings.

#### 730.1.1 DEFINITION

Definitions related to this policy include:

**Forensic evidence** - Physical or psychological data collected from an inmate that may be used against the inmate in disciplinary or legal proceedings.

#### **730.2 POLICY**

Qualified health care professionals are generally prohibited from participating in the collection of forensic evidence or performing psychological evaluations for disciplinary or legal proceedings.

Qualified health care professionals should not be involved in the collection of forensic evidence except when complying with state laws requiring the collection of blood samples from inmates, provided the inmate has consented to the procedure and staff are not involved in any punitive action against the inmate.

Qualified health care professionals of this facility may collect blood or urine for testing for alcohol or drugs when it is done for medical purposes and under a physician's order. Qualified health care professionals of this facility may conduct inmate-specific, court-ordered laboratory tests and examinations or radiology procedures with the consent of the inmate.

Qualified health care professionals of this facility are prohibited from being involved in the following procedures:

- (a) Body cavity searches
- (b) Psychological evaluations for use in adversarial proceedings
- (c) Blood draws for lab studies ordered by the court
- (d) Any medical procedure, except emergency lifesaving measures, that does not have the inmate's written consent

It shall be the responsibility of the Sheriff or the authorized designee to arrange for appropriately trained professionals to collect forensic evidence for disciplinary or legal proceedings.

## **Oral Care**

#### 731.1 PURPOSE AND SCOPE

The intent of this policy is to ensure that inmates have access to dental care and treatment for serious dental needs. While the focus of this policy is primarily on urgent and emergent dental care, as with medical or mental health care, dental care is available based upon patient need.

#### **731.2 POLICY**

It is the policy of this office that oral care is provided under the direction of a dentist licensed in this state and that care is timely and includes immediate access for urgent or painful conditions. There are established priorities for care when, in the dentist's judgment, the inmate's health would otherwise be adversely affected (15 CCR 1215).

#### 731.3 ACCESS TO DENTAL SERVICES

Emergency and medically required dental care is provided to each inmate upon request. Dental services are not limited to extractions. It is the goal of dental services to alleviate pain and suffering, ensure that inmates do not lose teeth merely as a consequence of incarceration and to provide appropriate dental service whenever medically required to maintain nutrition (15 CCR 1215).

Access to dental services should be as follows:

- (a) All inmates wishing to see the dentist for a non-emergency issue shall complete a sick call form. Requests should be triaged according to the nature and severity of the problem and should be seen by a dentist according to assigned priority. Inmates requesting dental services on weekends or after hours will initially be evaluated by a qualified health care professional and referred appropriately.
- (b) If an inmate suffers obvious trauma or other dental emergency, the qualified health care professional may arrange for immediate access to a dentist or may transfer the inmate to an emergency room for treatment.
- (c) Inmates who are furloughed or sentenced to work release or another form of community release may see their own dentist pursuant to approval of scheduling arrangements with facility medical and custody staff. The inmate will be financially responsible for any payment. The Office is under no obligation to the inmate to this appointment.
- (d) Records documenting all dental treatment should be maintained in the inmate's medical record file and retained in accordance with established records retention schedules. Examination results should be recorded on a uniform dental record using a numbered system.
- (e) Medications prescribed by a dentist should be administered in accordance with pharmacy procedures and documented in the inmate's medical record.

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(f)	Necessary dental services identified by a dentist that are not available on-site should
	be provided by referral to community resources as deemed necessary by the facility
	dentist

## **Pharmaceutical Operations**

#### 732.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the procedures and protocols under which the facility must manage a pharmaceutical operation in order to comply with federal, state and local laws that govern prescribing and administering medication.

#### 732.1.1 DEFINITIONS

Definitions related to this policy include:

**Administration** - The act of giving a single dose of a prescribed drug or biological substance to an inmate. Administration is limited to qualified health care professionals and health-trained custody staff members in accordance with state law.

**Controlled substances** - Medications classified by the Drug Enforcement Administration (DEA) as Schedule II-IV (21 USC § 812).

**Delivery** - The act of providing a properly labeled prescription container (e.g., a dated container that includes the name of the individual for whom the drug is prescribed, the name of the medication, dose and instructions for taking the medication, the name of the prescribing physician and expiration dates). Under these circumstances, a single dose at a time can be delivered to the inmate, according to the written instructions, by any qualified health care professional or health-trained custody staff member.

**Dispensing** - Those acts of processing a drug for delivery or administration to an inmate pursuant to the order of a qualified health care professional. Dispensing consists of:

- Comparing directions on the label with the directions on the prescription or order to determine accuracy.
- Selection of the drug from stock to fill the order.
- Counting, measuring, compounding or preparing the drug.
- Placing the drug in the proper container and affixing the appropriate prescription label to the container.
- Adding any required notations to the written prescription.

Dispensing does not include the acts of distributing, delivery or administration of the drug. The function of dispensing is limited to pharmacists and qualified health care professionals.

**Distributing** - The movement of a drug, in the originally labeled manufacturer's container or in a labeled pre-packaged container, from the pharmacy to a health care services area.

**Dose** - The amount of a drug to be administered at one time.

**Drug** - An article recognized in the United States Pharmacopoeia and National Formulary (USP-NF), the Homeopathic Pharmacopoeia of the United States or any supplement that is intended for

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#### Pharmaceutical Operations

use in the diagnosis, cure, mitigation, treatment or prevention of disease in humans. A substance, other than food, intended to affect the structure or any function of the human body.

**Pharmaceutical operations** - The functions and activities encompassing the procurement, dispensing, distribution, storage and control of all pharmaceuticals used within the detention facility, the monitoring of inmate drug therapy, and the provision of inmate/patient drug information.

#### **732.2 POLICY**

It is the policy of this office that pharmaceutical operations meet all federal, state and local legal requirements and be sufficient to meet the needs of the facility population (15 CCR 1216).

#### 732.3 PHARMACEUTICAL OPERATIONS

- (a) The Responsible Health Authority, in conjunction with the pharmacist, shall establish a list of all prescription and non-prescription medications available for inmate use.
  - 1. Drugs approved for use in the facility should promote safe, optimum and costefficient drug therapy.
  - 2. The list should be periodically updated.
- (b) The Responsible Health Authority, in conjunction with the pharmacist, shall ensure appropriate medication storage, handling and inventory control.
- (c) The Responsible Health Authority shall inspect the pharmaceutical operation quarterly and regularly review charts on medication utilization.
- (d) The Responsible Health Authority shall be responsible for establishing and maintaining a system for storing and accounting for controlled substances. A count of syringes, needles and controlled substances shall be taken and verified as correct and documented at the change of each shift by two qualified health care professional. An incorrect count shall be reported immediately to the Shift Sergeant, who will then advise the Facility Commander. Medications shall be stored under proper conditions of security, segregation and environmental control at all storage locations.
  - 1. Medication shall be accessible only to legally authorized persons.
  - 2. Medication and device cabinets (stationary or mobile) shall be closed and locked when not in use.
  - 3. Controlled substances shall be stored and handled in accordance with DEA regulations.
  - 4. Medication requiring refrigeration shall be stored separately either in a refrigerator that is locked or in a refrigerator that is in a locked room and is used exclusively for medication and medication adjuncts. The inside temperature of this refrigerator shall be maintained between 36 and 46 degrees. The inside temperature shall be monitored and recorded daily on a refrigerator temperature log.

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- 5. Antiseptics and other medications for external use shall be stored separately from internal and injectable medications.
- (e) Medication shall be kept in pharmacist-packaged or the original manufacturer's labeled containers. Medication shall only be removed from these containers to prepare a dose for administration. Drugs dispensed to inmates who are off grounds or are being discharged from the facility shall be packaged in accordance with the provisions of federal packaging laws (15 USC § 1471 et seq.) and any other applicable state and federal law.
- (f) Medication shall be properly labeled with the label firmly affixed to the prescription package. Each label shall indicate the name, address and telephone number of the dispensing pharmacy, in addition to:
  - 1. The medication name, strength, quantity, manufacturer, manufacturer's lot number or internal control number and expiration date.
  - 2. Directions for use, dispensing date and drug order expiration date. Accessory or cautionary labels shall be applied as appropriate.
  - In cases where a multiple dose package is too small to accommodate the
    prescription label, the label may be placed on an outer container into which the
    multiple dose packages are placed.
- (g) Medication that is outdated, visibly deteriorated, unlabeled, inadequately labeled, discontinued or obsolete shall be stored in a separate secure storage area and disposed of in accordance with the following requirements:
  - Controlled substances shall be disposed of in accordance with the state and federal regulations (15 CCR 1216(b)(8)).
  - 2. Unused, outdated or discontinued doses or excess inventories of non-controlled drugs that have not been in the possession of the inmate shall be returned to the pharmacy for disposition.
  - Returned, non-controlled substances that have been in the possession of the inmate, unclaimed personal medication collected at intake, or individual doses of medication removed from the original pharmacy packaging shall be destroyed at the facility by health services staff and placed in the medical waste disposal system.
  - Pharmaceutical waste shall be separated from other types of medical waste for handling and disposal purposes, and will be discarded in designated containers distinctly identified for medical waste.
- (h) All medication preparation, storage and administration areas shall be clean, organized, illuminated, ventilated and maintained at an appropriate temperature range. Any

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#### Pharmaceutical Operations

- mobile medication cart that is not being used in the administration of medication to inmates shall be stored in a locked room that meets similar requirements.
- (i) Current drug reference information, such as a Physician's Desk Reference (PDR) or an approved website, shall be available to staff.
- (j) An annual report on the status of the pharmaceutical operation will be prepared by the pharmacist and provided to the Responsible Health Authroity and the Facility Commander.

#### 732.4 PRESCRIBING MEDICATIONS

All medications shall be prescribed in a safe and effective manner for clinically appropriate reasons and documented in the individual patient medical record. Records shall be retained in accordance with established records retention schedules (15 CCR 1216; 15 CCR 1217).

- (a) Any medication prescribed by a qualified health care professional shall specify the drug name, strength, dose, route, frequency, discontinuation date and indication for use if the medication is intended to be used as needed. Medication shall not be prescribed for an indefinite period. The qualified health care professional shall review medication regimens at specified time intervals. An order to continue or discontinue any medication shall be documented in the medical record, which will supersede any earlier orders for that medication. A physician's signature should be required on all verbal orders within 72 hours of the order.
- (b) Any medication prescription that is not complete or is questionable shall not be prepared until clarification is received from the qualified health care professional. Staff shall make an effort to obtain prescription clarification in a timely manner.
- (c) Medication shall only be ordered upon approval of the Responsible Physician. Medication shall be prescribed and ordered from the facility list of approved medications unless the Responsible Physician approves otherwise.
- (d) Some inmates may be permitted to possess and self-administer some medications when monitored and controlled, in accordance with this policy.
- (e) Apparent adverse drug reactions shall be recorded in the inmate's health record by the qualified health care professional.
- (f) The qualified health care professional shall notify the Shift Supervisor of all known medication errors in a timely manner. Medication error reports shall be completed on all known medication errors.

#### 732.5 PER DOSE MEDICATION ADMINISTRATION

Psychotropic medication, controlled substances, tuberculosis (TB) medication, seizure medication and those listed as directly observed therapy (DOT) shall be administered to inmates on a per dose basis. (15 CCR 1216(b)).

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#### Pharmaceutical Operations

- (a) Each medication ordered on a per dose basis for individual inmates shall be kept in the medication room of the facility.
- (b) Medication dispensing envelopes bearing the inmate's name, booking number, housing location and the medication and its dosing schedule shall be generated for each inmate receiving per dose medication. These shall be administered from the individually packaged supply and delivered to the patient at each scheduled medication time.
- (c) The qualified health care professional will confirm the inmate's identity prior to administering the medication by comparing the name/booking number on the dispensing envelope with the inmate's identification badge/armband.
  - 1. Inmates should have a fluid container and adequate fluid to take the medication being administered.
  - 2. The qualified health care professional should observe the inmate taking the medication to prevent "cheeking" or "palming".
  - 3. The qualified health care professional should inspect the inmate's mouth after the inmate swallows the medication to ensure it was completely ingested. If the inmate appears to be "cheeking" the medication, a chart entry will be made and a notation entered on the medication envelope, as well as the back of the Medication Administration Record (MAR). Custody staff shall be immediately notified of the suspected "cheeking" and shall follow-up with the appropriate security, corrective and/or disciplinary action.
- (d) The qualified health care professional shall record each medication administered by initialing the appropriate date and time. The qualified health care professional shall authenticate the initials by placing his/her initials, signature or name stamp in the designated area on the lower portion of the MAR. Pre-charting is not allowed.
  - In the event that medication cannot be administered (for example, the inmate is in court or the medication is not in stock), a note explaining the situation and planned action shall be made on the back of the MAR or on a progress note.
- (e) The qualified health care professional shall have inmates who refuse their medication sign a refusal form at the medication round. If the inmate willfully refuses to sign the refusal form, the qualified health care professional or health-trained custody staff member shall advise custody staff, who should attempt to resolve the situation through voluntary compliance, by reminding the inmate that a refusal to sign may lead to disciplinary action. The qualified health care professional shall also:
  - 1. Note the refusal on the medication log including the date and time.
  - 2. Review the medication logs for prior refusals.
  - 3. Document patterns of refused medications on the inmate's medical record.

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- 4. Make a reasonable effort to convince the inmate to voluntarily continue with the medication as prescribed.
- 5. Report continued refusals to the Responsible Health Authority and have the inmate complete and sign a medication refusal form.
- (f) No inmate should be deprived of prescribed medication as a means of punishment.

#### 732.6 SELF-ADMINISTRATION OF MEDICATION

Upon approval of the Responsible Health Authority or qualified health care professional, inmates may be allowed to self-administer prescribed medication other than psychotropic medication, seizure medication, controlled drugs, TB medication, any medication that is required to be DOT, or has the recognized potential for abuse (15 CCR 1216).

The qualified health care professional ordering medication should educate the inmate regarding potential side effects and the proper use of the medication (15 CCR 1216(d) et seq.).

- (a) Medication may be ordered through a pre-booking examination or medical clearance obtained at a hospital or other clinic, an emergency room visit or evaluation by an onsite qualified health care professional.
- (b) Any questions the inmate may have concerning his/her medication should be addressed at this time.
- (c) The inmate shall be instructed to carry medication at all times or to secure it in designated areas within the housing unit (15 CCR 1216(d)(4)).
- (d) All self-administered medications are to be documented on the MAR.
- (e) Upon receipt of the medication, the qualified health care professional should issue the inmate his/her medication as follows:
  - The qualified health care professional or issuing the medication should confirm correct identity by comparing the name/booking number of the self-administer package to the inmate's identification badge/armband.
  - When issuing self-administered medication, documentation on the MAR should include the number of pills issued and the qualified health care professional's or health-trained custody staff member's initials.
- (f) The continuous quality improvement coordinator should monitor inmate compliance by randomly interviewing inmates about the name, purpose, dose, schedule and possible side effects of their prescription medication and will inspect the inmates' selfadministered medication and review their medical records. Any violation of the rules will be reported to the custody liaison (15 CCR 1216(d)(6)).
- (g) Any self-administered medication may be changed to per-dose at the discretion of the medical staff if the inmate is not responsible enough to self-administer the medication or has a history of frequent rule violations. Documentation in the medical record should

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accompany any decision to change the medication to per-dose. Custody and health care staff should continuously monitor and communicate with each other regarding inmates complying with the conditions and rules for self-administered medication (15 CCR 1216(d)(2)(5)).

(h) Inmates who arrive at the facility with prescribed medication should be administered per dose for any new medications or refills until the new medication or refill is received from the pharmacy.

#### 732.7 NON-PRESCRIPTION MEDICATION

Any over-the-counter non-prescription medication available to inmates for purchase in the facility commissary shall be approved by the Facility Commander, Medical Liaison Lieutenant and the Responsible Health Authority and reviewed annually (15 CCR 1216(c)).

The Facility Commander, Medical Liaison Lieutenant and the Responsible Health Authority should establish a limit on the amount of non-prescription medication an inmate may purchase and have in his/her possession at any time. Inmates with medication in an amount above the proscribed limit may be subject to disciplinary sanctions.

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## **Release Planning**

#### 733.1 PURPOSE AND SCOPE

This office recognizes that incarcerated persons may require information and assistance with health care follow-up upon release from custody. The purpose of this policy is to establish guidelines to assist staff with providing resources for the continuity of an incarcerated person's health care after their release from custody.

#### 733.1.1 DEFINITION

Definitions related to this policy include:

**Release planning** - The process of providing sufficient resources for the continuity of health care to an incarcerated person before their release to the community.

#### **733.2 POLICY**

The qualified health care professional should work with correctional staff to ensure that incarcerated persons who have been in custody for 30 or more days and have pending release dates, as well as serious health, dental, or mental health needs, are provided with medication and health care resources sufficient for the incarcerated person to seek health care services once released.

The Facility Commander or the authorized designee shall be responsible for ensuring that release preparation curriculum and materials are developed and maintained for this purpose, and that community resource information is kept current. Release planning should include:

- (a) Resources for community-based organizations that provide health care services, housing, funding streams, employment, and vocational rehabilitation.
- (b) Lists of community health professionals.
- (c) Discussions with the incarcerated person that emphasize the importance of appropriate follow-up care.
- (d) Specific appointments and medications that are arranged for the incarcerated person at the time of release.
- (e) All incarcerated persons shall be offered family planning services at least 60 days prior to a scheduled release date. Upon request, any incarcerated person shall be furnished with information about available services necessary to meet their family planning needs at the time of their release. (PC 4023.5(c)).

#### 733.3 PREPARATION FOR RELEASE

Upon notification of the imminent release of an incarcerated person who has been identified as having serious medical or mental health needs, release planning shall include the following:

(a) A medical screening shall be conducted to assess the incarcerated person's immediate medical needs, and arrangements should be made for community follow-up where needed, including sufficient medication.

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Release Planning

#### 733.4 RELEASE PLANNING RECORDS

All records of community referrals, transfer forms, logs, documentation of release planning, lists of medication provided, records release authorization forms, and any other relevant documents shall be maintained in the incarcerated person's health file and retained in accordance with established records retention schedules.

## **Privacy of Care**

#### 734.1 PURPOSE AND SCOPE

This policy recognizes that inmates have a right to privacy and confidentiality regarding their health-related issues. It also recognizes inmates' right to health care services that are provided in such a manner as to ensure that privacy and confidentiality, and encourage inmates use and trust of the facility's health care system.

#### 734.1.1 DEFINITION

Definitions related to this policy include:

**Clinical encounters** - Interactions between inmates and health care professionals involving a treatment and/or an exchange of confidential health information.

#### **734.2 POLICY**

It is the policy of this office that, in order to instill confidence in the health care system by the inmate population, all discussions of health-related issues and clinical encounters, absent an emergency situation, will be conducted in a setting that respects the inmate's privacy and encourages the inmate's continued use of health care services.

#### 734.3 CLINICAL EVALUATIONS

Emergency evaluations and rendering of first aid should be conducted at the site of the emergency, if reasonably practicable, with transfer to the medical clinic or emergency room as soon as the inmate is stabilized.

Custody personnel should only be present to provide security if the inmate poses a risk to the safety of the qualified health care professional or others.

Chapter 8 -	<b>Environmental</b>	Health
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## **Sanitation Inspections**

#### 800.1 PURPOSE AND SCOPE

The Tulare County Sheriff's Office has established a plan to promote and comply with the environmental safety and sanitation requirements established by applicable laws, ordinances and regulations. This policy establishes a plan of housekeeping tasks and inspections required to identify and correct unsanitary or unsafe conditions or work practices in this facility.

#### 800.2 RESPONSIBILITIES

The Facility Commander or designee will ensure that the safety and sanitation plan addresses, at a minimum, the following (15 CCR 1280):

- (a) Schedules of functions (e.g., daily, weekly, monthly or seasonal cleaning, maintenance, pest control, safety surveys)
- (b) Self-inspection checklists to identify problems and to ensure cleanliness of the facility.
- (c) Procedures, schedules and responsibilities for coordinating annual inspections by the county health department, including how deficiencies on the inspection report are to be corrected in a timely manner.
- (d) A list of approved equipment, cleaning compounds, chemicals and related materials used in the facility, and instructions on how to operate, dilute or apply the material in a safe manner.
- (e) Record-keeping of self-inspection procedures, forms and actions taken to correct deficiencies.
- (f) Training requirements for custody staff and inmate workers on accident prevention and avoidance of hazards with regard to facility maintenance.

Consideration should be given to general job descriptions and/or limitations relating to personnel or inmates assigned to carrying out the plan. Specialized tasks, such as changing air filters and cleaning ducts or facility pest control, are more appropriately handled by the Office or by contract with private firms.

Inmates engaged in sanitation duties shall do so only under the direct supervision of qualified custody staff. When inmate work crews are used, additional controls should be implemented to account for all equipment and cleaning materials.

All staff shall report any unsanitary or unsafe conditions to a supervisor. Staff shall report repairs needed to the physical plant and to equipment by submitting a work order to a supervisor. Shift Supervisors will conduct cleaning inspections on a daily basis. The Facility Commander or the authorized designee will conduct weekly safety and sanitation inspections of the facility.

#### 800.3 WORK ORDERS

All reports of unsafe or unsanitary conditions, as well as repairs needed to the physical plant and equipment, shall be documented in a work order. The Facility Commander will designate a staff person to receive these work orders and take appropriate action to ensure the repairs are

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#### Sanitation Inspections

made or action is taken. All work and action taken will also be documented. Requests for budget resources above and beyond already budgeted maintenance items shall be reported to the Facility Commander.

#### 800.4 SAFETY DATA SHEETS

Materials and substances used in the operation and maintenance of the facility may qualify as hazardous material. Hazardous material is required to have a companion Safety Data Sheet (SDS) that is provided by the manufacturer or distributor of the material. The SDS provides vital information on individual hazardous materials and substances, including instructions on safe handling, storage, disposal, prohibited interactions and other details relative to the specific material.

The Facility Commander shall be responsible for ensuring that a written hazard communication plan is developed, implemented and maintained at each workplace. Each area of the facility in which any hazardous material is stored or used shall maintain an SDS file in an identified location that includes (29 CFR 1910.1200(e)(1)):

- (a) A list of all areas where hazardous materials are stored.
- (b) A physical plant diagram and legend identifying the storage areas of the hazardous materials.
- (c) A log for identification of new or revised SDS materials.
- (d) A log for documentation of training by users of the hazardous materials.

#### 800.4.1 SDS USE, SAFETY AND TRAINING

All supervisors and users of SDS information must review the latest issuance from the manufacturers of the relevant substances. Staff and inmates shall have ready and continuous access to the SDS for the substance they are using while working. In addition, the following shall be completed (29 CFR 1910.1200(e)):

- (a) Supervisors shall conduct training for all staff and inmates on using the SDS for the safe use, handling and disposal of hazardous material in areas they supervise.
- (b) Upon completion of the training, staff and inmates shall sign the acknowledgement form kept with each SDS in their work area.
- (c) Staff and inmates using the SDS shall review the information as necessary to be aware of any updates and to remain familiar with the safe use, handling and disposal of any hazardous material.

#### 800.4.2 SDS DOCUMENTATION MAINTENANCE

Changes in SDS information occur often and without general notice. Any person accepting a delivery, addition or replacement of any hazardous material shall review the accompanying SDS. If additions or changes have occurred, the revised SDS shall be incorporated into the file and a notation shall be made in the SDS revision log.

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#### Sanitation Inspections

Supervisors shall review SDS information in their work areas semiannually to determine if the information is current and that appropriate training has been completed. Upon review, a copy of the SDS file and all logs shall be forwarded to the Maintenance Supervisor or the authorized designee.

#### 800.4.3 SDS RECORDS MASTER INDEX

The Maintenance Supervisor or the authorized designee will compile a master index of all hazardous materials in the facility, including locations, along with a master file of SDS information. He/she will maintain this information in the safety office (or equivalent), with a copy to the local fire department. Documentation of the semiannual reviews will be maintained in the SDS master file. The master index should also include a comprehensive, current list of emergency phone numbers (e.g., fire department, poison control center) (29 CFR 1910.1200(g)(8)).

#### 800.4.4 CLEANING PRODUCT RIGHT TO KNOW ACT

In addition to SDS information, printable information regarding ingredients of certain products used by staff and inmates shall be readily accessible and maintained in the same manner as an SDS (Labor Code § 6398.5; Health and Safety Code § 108952(f); Health and Safety Code § 108954.5(c)).

#### 800.5 POLICY

It is the policy of the Office to maintain a safe and sanitary facility. To accomplish this goal, the Office will maintain a written plan that contains schedules and procedures for conducting weekly and monthly sanitation inspections of the facility.

## **Housekeeping and Maintenance**

#### 801.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines to ensure that the facility is kept clean and in good repair in accordance with accepted federal, state and county standards.

#### **801.2 POLICY**

The Facility Commander shall establish housekeeping and maintenance plans that address all areas of the facility. The plan should include, but is not limited to (15 CCR 1280):

- Schedules that determine the frequency of cleaning activities on a daily, weekly or monthly timetable, by area of the facility.
- Supervision of the staff and inmates to ensure proper implementation of the procedures and to ensure that no inmate supervises or assigns work to another inmate.
- Development and implementation of an overall sanitation plan (e.g., cleaning, maintenance, inspection, staff training, inmate supervision).
- Development of inspection forms.
- All inmate responsibilities, which should be included in the inmate handbook.
- A process to ensure that deficiencies identified during inspections are satisfactorily corrected and documented.
- Detailed processes for the procurement, storage and inventory of cleaning supplies and equipment.
- A process for the preventive maintenance of equipment and systems throughout the facility.
- Staff supervision of the provision and use of cleaning tools and supplies.

To the extent possible, cleaning and janitorial supplies shall be nontoxic to humans. Any poisonous, caustic or otherwise harmful substances used for cleaning shall be clearly labeled and kept in a locked storage area.

#### 801.3 SANITATION SCHEDULE

A daily, weekly and monthly cleaning schedule will be established by the housing unit supervisor. The facility staff should implement a site specific plan for cleaning and maintenance of each area of the detention facility (e.g., housing, food preparation, laundry, loading dock/trash storage, barber shop, warehouse, common areas). The following recommendations include, but are not limited to, specific areas and items:

- (a) Daily cleaning:
  - 1. Sweep and then wet mop the entire jail floor

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#### Housekeeping and Maintenance

- 2. Clean all cell block areas
- 3. Empty all trash receptacles
- Clean all toilets and sinks
- Clean all showers
- (b) Weekly cleaning:
  - 1. Dust bars and window ledges
  - 2. Clean air conditioning/heating grates
  - 3. Clean mattresses (mattresses are also to be cleaned prior to being issued to a new inmate)
  - 4. Pour water down floor drains to test for flow
- (c) Monthly cleaning:
  - 1. Walls
  - 2. Ceilings
  - 3. Bunk pans

#### 801.4 TRAINING

All custodial staff and inmate workers assigned cleaning duties shall receive instruction commensurate with their tasks, including proper cleaning techniques, the safe use of cleaning chemicals and areas of responsibility.

#### 801.5 INSPECTION CHECKLIST

The Facility Commander or the authorized designee should develop an inspection checklist that includes the cleaning and maintenance items that will be checked by supervisors on a daily, weekly and monthly basis throughout the facility.

The inspection checklist will closely correspond to the established cleaning and maintenance schedule.

Inspection checklists shall be forwarded to the Facility Commander or the authorized designee for annual review, filing and retention as required by the established records retention schedule.

# **Physical Plant Compliance with Codes**

#### 802.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the timeline, process and responsibilities for facility maintenance, inspections and equipment testing in compliance with all applicable federal, state and local building codes.

#### 802.2 POLICY

It is the policy of this office that all construction of the physical plant (renovations, additions, new construction) will be reviewed and inspected in compliance with all applicable federal, state and local building codes. All equipment and mechanical systems will be routinely inspected, tested and maintained in accordance with applicable laws and regulations.

#### 802.3 COMPLIANCE WITH CODES AND STATUTES

Plumbing, sewage disposal, solid waste disposal and plant maintenance conditions will comply with rules and regulations imposed by state regulatory entities governing such practices.

#### 802.4 RESPONSIBILITIES

The Facility Maintencance Supervisor shall be responsible for establishing and monitoring the facility maintenance schedule and inspection schedules. The Facility Maintenace Supervisor will keep the Facility Commander briefed on all maintenance issues.

Copies of the local jurisdiction's applicable health and sanitation codes shall be kept in the facility by the Facility Commander or the authorized designee. The Facility Commander or the authorized designee is responsible for developing internal health and sanitation inspection checklists, for maintaining valid licensing and sanitation certificates and inspection reports, and for proof of corrective actions.

#### 802.5 PROCEDURE

All safety equipment (e.g., emergency lighting, generators, and an uninterruptible power source (UPS)) shall be tested monthly. All completed inspection forms shall be kept on file for review by the appropriate office committees or external agencies.

Any remodeling or new construction shall have prior approval of the local fire, building and health authorities. Any required plans and permits will be procured prior to the commencement of any changes to the facility.

The following areas of the facility shall be inspected and evaluated for functionality, wear, and rodent or pest infestation. The list is not meant to be all inclusive:

- Admissions
- Food services
- Inmate housing
- Laundry

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#### Physical Plant Compliance with Codes

- Barbershop
- Loading dock/trash storage
- Warehouse
- Water systems and plumbing
- Emergency generators
- Fire safety equipment
- The entire physical structure of the facility, including, roof, walls, exterior doors, mechanical systems and lighting

# **Water Supply**

#### 803.1 PURPOSE AND SCOPE

The Tulare County Sheriff's Office recognizes the importance of providing the facility with safe, potable water. The purpose of this policy is to establish guidelines for testing the facility's water to ensure that the water is safe to consume.

#### 803.2 POLICY

In compliance with standards set by law, this facility will ensure the continued supply of safe potable water for use by inmates, staff and visitors through rigorous annual testing of water supplies (42 USC § 300f et seq.).

#### 803.3 PROCEDURE

The Facility Commander, Compliance Lieutenant, and County Designated Department/Designee shall ensure that the facility's potable water source is tested by an independent public or private testing service at least once each year. Water quality will be certified to be in compliance with all state and local regulations. Corrective measures shall be promptly taken if the test results fall below acceptable regulatory standards.

In the event that water testing reveals any significant hazards to the inmates or staff at the facility, the Sheriff, Facility Commander and the Office health authority shall take immediate action to mitigate the problem.

The testing results, valid certificates of the sampling entity and the testing laboratory shall be kept in accordance with established records retention schedules.

Where the facility's water supply is obtained from a private source, the source shall be properly located, constructed and operated to protect it from contamination and pollution and the water shall meet all current standards set by the applicable state and/or local authority regarding bacteriological, chemical and physical tests for purity.

For facilities not served by a public or regulated private water supply, the water should be tested daily by the local authority within the facility's jurisdiction.

### **Vermin and Pest Control**

#### 804.1 PURPOSE AND SCOPE

The purpose of this policy is to establish inspection, identification and eradication processes designed to keep vermin and pests controlled in accordance with the requirements established by all applicable laws, ordinances and regulations of the local public health entity.

#### **804.2 POLICY**

It is the policy of this office that vermin and pests be controlled within the facility (15 CCR 1280). The Facility Commander or the authorized designee shall be responsible for developing and implementing this policy, in cooperation with the Medical Provider and the local public health entity, for the sanitation and control of vermin and pests, and to establish medical protocols for treating inmate clothing, personal effects and living areas, with specific guidelines for treating an infested inmate (15 CCR 1264).

#### 804.3 PEST CONTROL SERVICES

The Facility Commander or the authorized designee shall be responsible for procuring the services of a licensed pest control professional to perform inspections of the facility at least monthly and to treat areas as required to ensure that vermin and pests are controlled.

#### 804.4 PREVENTION AND CONTROL

Many infestations and infections are the result of a recently admitted inmate who is vermin infested or whose property is vermin infested. Most infestations are spread by direct contact with an infected person or with infested clothing and bedding. Inmates with lice or mites should be treated with approved pediculicides as soon as the infestation is identified to avoid spreading it. To reduce the chance of further transmission, separate quarters for inmates undergoing treatment for lice should be used as described in the Communicable Diseases Policy.

Because the use of the treatment chemicals can cause allergic reactions and other negative effects, treatment should be done only when an infestation is identified and not as a matter of routine.

Clothing, bedding and other property that is suspected of being infested shall either be removed from the facility or cleaned and treated by the following methods, as appropriate or as directed by the pest control provider or the Responsible Physician (15 CCR 1264):

- Washing in water at 140 degrees for 20 minutes
- Tumbling in a clothes dryer at 140 degrees for 20 minutes
- Dry cleaning
- Storing in sealed plastic bags for 30 days
- Treating with an insecticide specifically labeled for this purpose

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#### Vermin and Pest Control

Head lice and their eggs are generally found on the head hairs. There may be some uncertainty about the effectiveness of some available pediculicides to kill the eggs of head lice. Therefore, some products recommend a second treatment seven to 10 days after the first. During the interim, before the second application, eggs of head lice could hatch and there is a possibility that lice could be transmitted to others.

Pubic lice and their eggs are generally found on the hairs of the pubic area and adjacent hairy parts of the body, although they can occur on almost any hairy part of the body, including the hair under the arm and on the eyelashes.

Pubic lice and their eggs are generally successfully treated by the available pediculicides. However, when the eyelashes are infested with pubic lice and their eggs, a physician should perform the treatment.

Successful treatment depends on careful inspection of the inmate and proper application of the appropriate product. The area used to delouse inmates needs to be separate from the rest of the facility. All of the surfaces in the treatment area must be sanitized. There must be a shower as part of the delousing area.

The supervisor shall document the date of treatment, the area treated, the pest treated and the treatment used.

## **Inmate Safety**

#### 805.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a safety program to reduce inmate injuries by analyzing causes of injuries and identifying and implementing corrective measures.

#### **805.2 POLICY**

The Tulare County Sheriff's Office will provide a safe environment for individuals confined at this facility, in accordance with all applicable laws, by establishing an effective safety program, investigating inmate injuries and taking corrective actions as necessary to reduce accidents and injury (15 CCR 1280).

The Sheriff shall appoint a staff member who will be responsible for the development, implementation and oversight of the safety program. This program will include, but not be limited to:

- A system to identify and evaluate hazards, including scheduled inspections to identify unsafe conditions.
- Analysis of inmate injury reports to identify causes and to recommend corrective actions.
- Establishment of methods and procedures to correct unsafe and/or unhealthful conditions and work practices in a timely manner.

#### 805.3 INVESTIGATION OF REPORTED INMATE INJURY

Whenever there is a report of an injury to an inmate that is the result of accidental or intentional acts, other than an authorized force options by custody staff, the Sheriff or the authorized designee will initiate an investigation to determine the cause of the injury and develop a plan of action whenever a deficiency is identified. Injuries resulting from force option incidents will be investigated and reported in accordance with the Force Option Policy.

#### **805.4 INVESTIGATION REPORTS**

The Shift Supervisor shall ensure that reports relating to an inmate's injury are completed and should include the following:

- Incident reports
- Investigative reports
- Health record entries
- Any other relevant documents

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#### Inmate Safety

#### 805.5 ANNUAL REVIEWS

The Sheriff or the authorized designee shall conduct an annual review of all injuries involving inmates for the purpose of identifying problem areas and documenting a plan of action to abate circumstances relating to inmate injuries.

The plan of action should include, but not be limited to:

- The area where the deficiencies have been identified.
- Strategies to abate the deficiency.
- Resources needed to correct a deficiency.
- The person or persons responsible for taking corrective action and the target completion date.

**Incarcerated Person Hygiene** 

#### 806.1 PURPOSE AND SCOPE

This policy outlines the procedures that will be taken to ensure the personal hygiene of every incarcerated person in the Tulare County Sheriff's Office detention facility is maintained. The Tulare County Sheriff's Office recognizes the importance of each incarcerated person maintaining acceptable personal hygiene practices by providing adequate bathing facilities and hair care services, and the issuance and exchange of clothing, bedding, linens, towels, and other necessary personal hygiene items.

#### **806.2 POLICY**

It is the policy of the Tulare County Sheriff's Office facility to maintain a high standard of hygiene in compliance with the requirements established by all state laws, ordinances, and regulations (15 CCR 1069). Compliance with laws and regulations relating to good incarcerated person hygiene practice is closely linked with good sanitation practices. Therefore, the need to maintain a high level of hygiene is not only for the protection of all incarcerated persons, but for the safety of the correctional staff, volunteers, contractors, and visitors.

#### 806.3 STORAGE SPACE

There should be adequate and appropriate storage space for incarcerated person bedding, linen, or clean clothing. The inventory of clothing, bedding, linen, and towels should exceed the maximum incarcerated person population so that a reserve is always available (15 CCR 1263).

The facility should have clothing, bedding, personal hygiene items, cleaning supplies, and any other items required for the daily operation of the facility, including the exchange or disposal of soiled or depleted items. The assigned staff shall ensure that the storage areas are properly maintained and stocked. The Facility Commander should be notified if additional storage space is needed.

#### 806.3.1 BEDDING ISSUE

Upon entering a living area of the Tulare County Sheriff's Office detention facility, every incarcerated person who is expected to remain overnight shall be issued bedding and linens including but not limited to (15 CCR 1270):

- (a) Sufficient freshly laundered blankets to provide comfort under existing temperature conditions. Blankets shall be exchanged and laundered in accordance with facility operational laundry rules.
- (b) One clean, firm, nontoxic, fire-retardant mattress (16 CFR 1633.1 et seq.).
  - Mattresses will be serviceable and enclosed in an easily cleanable, nonabsorbent material and conform to the size of the bunk. Mattresses will be cleaned and disinfected when an incarcerated person is released or upon reissue.

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#### Incarcerated Person Hygiene

- 2. Mattresses shall meet the most recent requirements of the State Fire Marshal, the Bureau of Home Furnishings' test standard for penal mattresses, and any other legal standards at the time of purchase (15 CCR 1272).
- 3. Mattresses shall be free of holes and tears. Mattresses with holes, tears, or that lack sufficient padding shall be replaced upon request with mattresses that meet the requirements of 15 CCR 1270 (15 CCR 1271).
- (c) Two sheets or one sheet and a clean mattress cover.
  - Two blankets or a sleep bag may be issued in place of one mattress cover or one sheet at the request of the incarcerated person.

Linen exchange, including towels, shall occur at least weekly and shall be documented in the daily activity log (15 CCR 1271). The Shift Supervisor shall review the daily activity log at least once per shift.

The Facility Commander or the authorized designee shall conduct both scheduled and unannounced inspections of the facility to ensure that bedding issuance policies and procedures are carried out in accordance with the applicable laws and regulations.

#### 806.3.2 CLOTHING ISSUE

An incarcerated person admitted to the facility for 72 hours or more and assigned to a living unit shall be issued a set of facility clothing. The issue of clothing appropriate to the climate for incarcerated persons shall include but is not limited to: (15 CCR 1260):

- Clean socks.
- Clean outer garments.
- Clean undergarments (e.g., shorts, undershirt, bra and two pairs of panties).
- Footwear.

Incarcerated persons who are issued a change of clothing upon admission to the facility may have their personal clothing returned after laundering, at the discretion of the Facility Commander.

All issued and exchanged clothing shall be clean and free of holes or tears, reasonably fitted, durable, and easily laundered and repaired. Undergarments shall be clean, free of holes or tears, and substantially free of stains. Individuals shall be able to select the garment type more compatible with their gender identity and gender expression (15 CCR 1260).

Clothing shall be exchanged twice each week, at a minimum (15 CCR 1262). All exchanges shall be documented on the daily activity log. The Shift Supervisor or unit supervisor shall review the daily activity log at least once per shift.

Additional clothing may be issued as necessary for changing weather conditions or as seasonally appropriate. An incarcerated person's personal undergarments and footwear may be substituted for the institutional undergarments and footwear, provided there is a legitimate medical necessity for the items and they are approved by the medical staff.

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#### Incarcerated Person Hygiene

Each incarcerated person assigned to a special work area, such as food services, medical, farm, sanitation, mechanical, and other specified work, shall be clothed in accordance with the requirements of the job, including any appropriate protective clothing and equipment, which shall be exchanged as frequently as the work assignment requires. All issued clothing shall be clean, free of holes and tears (15 CCR 1261).

The Facility Commander or the authorized designee shall conduct both scheduled and unannounced inspections of the facility to ensure that clothing issuance policies and procedures are carried out in accordance with the applicable laws and regulations.

The Facility Commander or the authorized designee shall ensure that the facility maintains a sufficient inventory of extra clothing to ensure each incarcerated person shall have neat and clean clothing appropriate to the season.

An incarcerated person's excess personal clothing shall be mailed, picked up by, or transported to a designated family member or stored in containers designed for such purpose. All incarcerated person personal property shall be properly identified, inventoried, and secured. Incarcerated persons shall sign and receive a copy of the inventory record.

#### 806.4 LAUNDRY SERVICES

Laundry services shall be managed so that daily clothing, linen and bedding needs are met.

#### 806.5 INCARCERATED PERSON ACCOUNTABILITY

To ensure incarcerated person accountability, incarcerated persons are required to exchange item for item when clean clothing, bedding, and linen exchange occurs.

Prior to being placed in a housing unit, incarcerated persons shall be provided with an incarcerated person handbook listing this requirement.

#### 806.6 PERSONAL HYGIENE OF INCARCERATED PERSONS

Personal hygiene items, hair care services, and facilities for showers will be provided in accordance with applicable laws and regulations. This is to maintain a standard of hygiene among incarcerated persons in compliance with the requirements established by state laws as part of a healthy living environment.

Each incarcerated person held more than 24 hours who does not have the following personal care items because of either indigency or the absence of an incarcerated person canteen shall be issued the following items (15 CCR 1265):

- Toothbrush
- Dentifrice
- Soap
- Comb
- Shaving implements

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#### Incarcerated Person Hygiene

 Sanitary pads, panty liners, and tampons shall be issued to all incarcerated persons as requested at no cost (Penal Code § 4023.5)

The Facility Commander or the authorized designee may modify this list to accommodate the use of liquid soap and shampoo dispensers. Personal hygiene items should be appropriate for the incarcerated person's gender. Additional hygiene items shall be provided to incarcerated persons upon request, as needed.

Personal care items shall be issued within the first 12 hours of a housing assignment. Incarcerated persons shall not be required to share personal care items or disposable razors (15 CCR 1265). Used razors are to be disposed into approved sharps containers. Other barbering equipment capable of breaking the skin must be disinfected between individual uses, as prescribed by the California Board of Barbering and Cosmetology to meet the requirements of 16 CCR 979 and 16 CCR 980 (15 CCR 1267(c)).

Incarcerated persons, except those who may not shave for reasons of identification in court, shall be allowed to shave daily (15 CCR 1267(b)). The Facility Commander or the authorized designee may suspend this requirement for any incarcerated person who is considered a danger to others.

#### 806.7 BARBER AND COSMETOLOGY SERVICES

The Facility Commander or the authorized designee shall be responsible for developing and maintaining a schedule for hair care services provided to the incarcerated person population and will have written policies and procedures for accessing these services (see the Grooming Policy). The Facility Commander shall ensure that the rules are included in the incarcerated person handbook.

#### 806.7.1 SCHEDULE FOR HAIR CARE SERVICES

Incarcerated persons shall have the ability to receive hair care services once per month (15 CCR 1267(b)). Records of hair care services shall be documented in the daily activity log.

Prior to being placed in a housing unit, incarcerated persons will be given an incarcerated person handbook, which details how to request hair care services.

#### 806.8 AVAILABILITY OF PLUMBING FIXTURES

Incarcerated persons confined to cells or sleeping areas shall have access to toilets and washbasins with hot and cold running water that is temperature controlled. Access shall be available at all hours of the day and night without staff assistance.

The minimum number of plumbing fixtures provided for incarcerated persons in housing units is:

- One sink/washbasin for every 10 incarcerated persons (24 CCR 1231.3.2(2)).
- One toilet to every 10 incarcerated persons (urinals may be substituted for up to onethird of the toilets in facilities for male incarcerated persons) (24 CCR 1231.3.1).

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#### Incarcerated Person Hygiene

#### 806.9 INCARCERATED PERSON SHOWERS

Incarcerated persons will be allowed to shower upon assignment to a housing unit and at least every other day thereafter, or more often if possible. Absent exigent circumstances, no person shall be prohibited from showering at least every other day following assignment to a housing unit. If showering is prohibited, it shall be approved by the Facility Commander or the authorized designee, and the reasons for prohibition shall be documented (15 CCR 1266).

There should be one shower for every 20 incarcerated persons unless federal, state, or local building or health codes differ. Showering facilities for incarcerated persons housed at this facility shall be clean and properly maintained. Water temperature shall be periodically measured to ensure a range of 100 to 120 degrees for the safety of incarcerated persons and staff, and shall be recorded and maintained (24 CCR 1231.3.4).

Transgender and intersex incarcerated persons shall be given the opportunity to shower separately from other incarcerated persons (28 CFR 115.42).

#### 806.10 DELOUSING MATERIALS

Delousing materials and procedures shall be approved through consultation with the Responsible Physician or qualified health care professionals.

#### 806.11 ADDITIONAL PRIVACY REQUIREMENTS

Incarcerated persons shall be permitted to shower, perform bodily functions, and change clothing without non-medical staff of the opposite sex viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Staff of the opposite sex shall announce their presence when entering an incarcerated person housing unit (28 CFR 115.15).

**Chapter 9 - Food Services** 

### **Food Services**

#### 900.1 PURPOSE AND SCOPE

The Office recognizes the importance of providing nutritious food and services to incarcerated persons to promote good health, to reduce tension in the detention facility, and ultimately support the safety and security of the detention facility. This policy provides guidelines on the preparation of food services items and dietary considerations for incarcerated persons housed in the facility.

#### 900.2 POLICY

It is the policy of this office that food services shall provide incarcerated persons with a nutritionally balanced diet in accordance with federal, state, and local laws, and with regulations for daily nutritional requirements (15 CCR 1241 et seq.).

The food services operation shall be sanitary and shall meet the acceptable standards of food procurement, planning, preparation, service, storage, and sanitation in compliance with Food and Drug Administration (FDA) and United States Department of Agriculture (USDA) requirements and standards set forth in Health and Safety Code § 113700 et seq. (15 CCR 1245(a)).

#### 900.3 FOOD SERVICES MANAGER

The food services manager shall be responsible for oversight of the day-to-day management and operation of the food services area, including:

- Developing, implementing, and managing a budget for food services.
- Ensuring sufficient staff is assigned and scheduled to efficiently and safely carry out all functions of food services operations.
- Establishing, developing, and coordinating appropriate training for staff and incarcerated person workers.
- Developing a menu plan that meets all nutrition and portion requirements and can be produced within the available budget.
- Developing procedures for food found to be contaminated, expired, showing signs of spoilage, or otherwise not fit for human consumption (15 CCR 1243).
- Other duties and activities as determined by the Facility Commander.

#### 900.4 MENU PLANNING

All menus shall be planned, dated, and available for review at least one month in advance of their use. Records of menus and of foods purchased shall be kept on file for one month. Menus shall provide a variety of foods and should consider food flavor, texture, temperature, appearance, and palatability. Menus shall be approved by a registered dietitian or nutritionist before being served to ensure the recommended dietary allowance for basic nutrition meets the needs of the appropriate age group. The dietitian shall ensure that the meals meet the nutritional and hot food requirements of 15 CCR 1240 and 15 CCR 1241(15 CCR 1242).

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Any changes to the meal schedule, menu, or practices should be carefully evaluated by the food services manager in consultation with the Facility Commander, dietician, medical staff, and other professionals, and shall be recorded. All substitutions will be of equal or better nutritional value and meet the caloric requirements set forth in 15 CCR 1241. If any meal served varies from the planned menu, the change shall be noted in writing on the menu and/or production sheet.

Menus as planned, including changes, shall be evaluated by a registered dietitian at least annually (15 CCR 1242). Facility menus shall be evaluated at least quarterly by the food services supervisory staff to ensure adherence to established daily servings.

Copies of menus, foods purchased, annual reviews, and quarterly evaluations should be maintained by the food services manager in accordance with established records retention schedules.

#### 900.5 FOOD SAFETY

Temperatures in all food storage areas should be checked and recorded at the beginning of each shift, but shall be checked and recorded at least once daily. Holding temperatures for cold and hot foods shall be checked and recorded every two hours. Hot food shall be reheated to 165 degrees if it falls below 135 degrees at any time.

All reach-in or walk-in refrigerators and cold storage must maintain food temperature as outlined in the Food Storage Policy.

One sample for each meal served shall be dated and maintained under refrigeration for testing in the event of a food-borne illness outbreak. Sample meals shall be discarded at the end of three days if no food-borne illness is reported.

Food production shall be stopped immediately if there is any sewage backup in the preparation area or if there is no warm water available for washing hands. Food production shall not resume until these conditions have been corrected (15 CCR 1245(a)).

#### 900.6 THERAPEUTIC DIETS

The food services manager shall be responsible for ensuring that all incarcerated persons who have been prescribed therapeutic diets by qualified health care professionals are provided with compliant meals. A therapeutic diet manual, which includes samples of medical diets, shall be maintained in the health services and food services areas for reference and information.

More complete information may be found in the Prescribed Therapeutic Diets Policy.

Persons who are known to be pregnant or lactating shall be provided a balanced, nutritious diet approved by a physician (15 CCR 1248).

#### 900.7 RELIGIOUS DIETS

The food services manager, to the extent reasonably practicable, will provide special diets for incarcerated persons in compliance with the parameters of the Religious Programs Policy and the Religious Land Use and Institutionalized Persons Act (RLUIPA).

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#### Food Services

When religious diets are provided, they shall conform to the nutritional and caloric requirements for non-religious diets (15 CCR 1241).

#### 900.8 FOOD SERVICES REQUIREMENTS

All reasonable efforts shall be made to protect incarcerated persons from food-borne illness. Food services staff shall adhere to sanitation and food storage practices and there shall be proper medical screening and clearance of all food handlers in accordance with the Food Services Workers' Health, Safety and Supervision Policy (15 CCR 1230).

Food production and services will be under staff supervision. Food production, storage, and food-handling practices will follow the appropriate federal, state, or local sanitation laws (15 CCR 1246).

#### 900.9 MEAL SERVICE PROCEDURE

Incarcerated person meals that are served in a dining room or dayroom should be provided in space that allows groups of incarcerated persons to dine together, with a minimum of 15 square feet of space per incarcerated person. A dining area shall not contain toilets or showers in the same room without appropriate visual barriers.

Meals shall be served at least three times during each 24-hour period. At least one meal must include hot food. Any deviation from this requirement shall be subject to the review and approval of a registered dietitian to ensure that incarcerated persons receive meals that meet nutritional quidelines.

Incarcerated persons must be provided a minimum of 15 minutes dining time for each meal. There must be no more than 14 hours between a substantial evening meal and breakfast. A substantial evening meal is classified as a serving of three or more menu items at one time, including a high-quality protein, such as meat, fish, eggs, or cheese. The meal shall represent no less than 20 percent of the day's total nutrition requirements. If more than 14 hours pass between meals, approved snacks will be provided. If a nourishing snack is provided at bedtime, up to 16 hours may elapse between the substantial evening meal and breakfast. A nourishing snack is classified as a combination of two or more food items from two of the four food groups, such as cheese and crackers or fresh fruit and cottage cheese.

Incarcerated persons who miss, or may miss, a regularly scheduled meal must be provided with a beverage and a sandwich or substitute meal. Approved snacks should be served to incarcerated persons on medical diets in less than the 14-hour period if prescribed by the Responsible Physician or registered dietitian. Incarcerated persons on medical or therapeutic meals who miss their regularly scheduled meal will be provided with their prescribed meal (15 CCR 1240).

As the meal time approaches, facility staff should direct the incarcerated persons to get dressed and be ready for meals. Incarcerated persons should be assembled and a head count taken, to verify all incarcerated persons in the housing location are present. Staff should be alert to signs of injury or indications of altercations, and should investigate any such signs accordingly. Staff should remain alert to the potential for altercation during incarcerated person movement and meals. Meals shall be served under the direct supervision of staff.

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#### Food Services

Staff should direct an orderly filing of incarcerated persons to the dining room or assigned seating in the dayroom. Staff should identify incarcerated persons who have prescribed therapeutic or authorized religious diets so those incarcerated persons receive their meals accordingly.

It shall be the responsibility of the deputies to maintain order and enforce rules prohibiting excessive noise and intimidation of other incarcerated persons to relinquish food during mealtime.

The dining room shall have an area designated for incarcerated persons who have been prescribed a longer time to eat by qualified health care professionals, a dietitian, or as deemed appropriate by a supervisor.

To the extent reasonably practical, an adequate number of food services staff and correctional personnel should supervise meal service in central dining areas. If reasonably possible, the supervisor should be present.

The Shift Supervisor should make every attempt to be present during meal services in central dining areas to assess the meal service process, the quality of food, and any health or security issues.

In the interest of security, sanitation, and vermin control, incarcerated persons shall not be allowed to take food from the dining area to their housing areas.

#### 900.10 EMERGENCY MEAL SERVICE PLAN

The food services manager shall establish and maintain an emergency meal service plan for the facility (15 CCR 1243(k)).

Such a plan should ensure that there is at least a seven-day supply of food maintained in storage for incarcerated persons. In the event of an emergency that precludes the preparation of at least one hot meal per day, the Facility Commander may declare an "Emergency Suspension of Standards" pursuant to 15 CCR 1012 for the period of time the emergency exists.

During an emergency suspension, the food services manager shall assign a registered dietician to ensure that minimum nutritional and caloric requirements are met (15 CCR 1242). The Facility Commander shall notify the Board of State and Community Corrections (BSCC) in writing in the event the suspension lasts longer than three days. The emergency suspension of food service standards shall not continue more than 15 days without the approval of the chairperson of the BSCC (15 CCR 1012).

In the event that the incarcerated person food supply drops below that which is needed to provide meals for two days, the Facility Commander or the authorized designee shall purchase food from wholesale or retail outlets to maintain at least a four-day supply during the emergency.

Depending on the severity and length of the emergency, the Sheriff should consider requesting assistance from allied agencies through mutual aid or the National Guard.

# **Food Services Training**

#### 901.1 PURPOSE AND SCOPE

The purpose of this policy is to reduce the risk of potential injury to staff, contractors and inmate workers in the jail services areas by developing and implementing a comprehensive training program in the use of equipment and safety procedures.

#### **901.2 POLICY**

The Tulare County Sheriff's Office ensures a safe and sanitary environment is maintained for the storage and preparation of meals through the appropriate training of food services staff and inmate workers (15 CCR 1230; 15 CCR 1243(g); 15 CCR 1245(a)).

#### 901.3 TRAINING

The food and launadry services manager, under the direction of the Facility Commander, is responsible for ensuring that a training curriculum is developed and implemented in the use of equipment and safety procedures for all food services personnel, including staff, contractors and inmate workers.

The training shall include, at minimum:

- (a) Work safety practices and use of safety equipment.
- (b) Sanitation in the facility's food services areas.
- (c) Reducing risks associated with operating machinery.
- (d) Proper use of chemicals in food services areas.
- (e) Employing safe practices.
- (f) Facility emergency procedures.

A statement describing the duties and proper time schedule should be developed for each job function in the facility's kitchen and food services operation. The food and laundry services manager, at the direction of the Jail Services Manager and the Facility Commander, shall establish an employee/kitchen worker training course, and all staff or inmate workers shall be trained on how to assemble, operate, clean and sanitize kitchen equipment.

Information about the operation, cleaning and care of equipment, including manufacturer's literature, that is suitable for use as reference material shall be kept in the food services operation area. The reference material should be used in developing training on the use of the equipment and the maintenance and cleaning procedures.

Safety and sanitation shall be the primary consideration in equipment purchase and replacement. Placement and installation of equipment must be carefully planned to facilitate cleaning, sanitizing, service and repairs. The equipment must also meet any applicable government codes.

## **Dietary Guidelines**

#### 902.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure that the nutritional needs of the incarcerated person are met and that overall health is promoted through the use of balanced nutritious diets.

#### **902.2 POLICY**

It is the policy of this office that diets provided by this facility will meet or exceed the guidelines established in the current publications of the Dietary Reference Intakes (DRI) of the Food and Nutrition Board, Institute of Medicine of the National Academies, the California Food Guide (CFG) and the U.S. Department of Agriculture's Dietary Guidelines for Americans (DGA).

#### 902.3 REVIEW OF DIETARY ALLOWANCES

The food services manager is responsible for developing the facility's menus and shall ensure that all menus served by food services comply with the nutritional and caloric requirements found in the 2019 DRI, and the 2020-2025 DGA guidelines (15 CCR 1241). Any deviation from these guidelines shall be reviewed by the Sheriff and/or the Facility Commander and the Responsible Physician.

The food services manager or the authorized designee shall ensure that the facility's menus and dietary allowances are evaluated annually by a registered dietitian, and that any changes meet the DRI and DGA guidelines. A registered dietitian must approve menus before they are used (15 CCR 1242).

Menus should be evaluated at least quarterly by the food services manager or the authorized designee.

#### 902.4 MENU CYCLE PLANNING

The food services manager or the authorized designee should plan the menus one month in advance of their use.

Any changes to the menu must be recorded and kept until the next annual inspection (15 CCR 1242). Any menu substitutions must use better or similar items.

Menus should include the following minimum food group allowances per day (15 CCR 1241):

- (a) Dairy Group: Three servings of pasteurized fat-free or low-fat milk fortified with Vitamins A and D or food providing at least 250 mg. of calcium and equivalent to 8 ounces of fluid milk. One serving can be from a fortified food containing at least 150 mg. of calcium. Persons who are known to be pregnant or lactating should receive four servings of milk or milk products.
- (b) Vegetable-Fruit Group: Five servings of fruits and vegetables. At least one daily serving, or seven servings per week, shall be from each of the following three categories:
  - 1. One serving of a fresh fruit or vegetable.

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- 2. One serving of a Vitamin A source, fruit or vegetable, containing at least 200 micrograms retinol equivalents or more.
- 3. One serving of a Vitamin C source containing at least 30 mg. or more.
- (c) Grain Group: A minimum of six servings of grains, three of which must be made with whole grains.
- (d) Protein Group: Three servings of lean meat, fish, eggs, cooked dry beans, peas, lentils, nuts, peanut butter, or textured vegetable protein, equivalent to 14 grams or more of protein. The daily requirements shall be equal to three servings for a total of 42 grams per day or 294 per week. In addition, a fourth serving from the legumes category shall be served three days a week.
- (e) A daily or weekly average of the food group's requirement is acceptable.
- (f) Saturated dietary fat should not exceed 10 percent of the total calories on a weekly basis. Fat shall be added only in minimum amounts necessary to make the diet palatable. Facility diets shall consider the recommendations and intentions of the 2015-2020 DGA of reducing overall sugar and sodium levels.

Additional servings of dairy, vegetable-fruit, and grain groups must be provided in amounts to meet caloric requirements when the minimum servings outlined in the requirements above are not sufficient to meet the caloric requirements of an incarcerated person.

# Food Services Worker's Health, Safety and Supervision

#### 903.1 PURPOSE AND SCOPE

The purpose of this policy is to establish basic personal health, hygiene, sanitation and safety requirements to be followed by all food services workers and to ensure the proper supervision of jail services staff and inmate workers.

#### 903.2 POLICY

The Tulare County Sheriff's Office will ensure that meals are nutritionally balanced, safe and prepared and served in accordance with applicable health and safety laws. All inmate food services workers will be properly supervised by custody staff to ensure safety and security at all times (15 CCR 1243(h)).

#### 903.3 JAIL SERVICES MANAGER RESPONSIBILITIES

The jail services manager is responsible for developing and implementing procedures to ensure that all meals are prepared, delivered and served only under direct supervision by staff.

Work assignments shall be developed to ensure that sufficient jail services staff is available to supervise inmate food services workers. The jail services manager should coordinate with the Facility Commander to ensure that sufficient correctional staff is available to supervise inmate meal service.

The food preparation area must remain clean and sanitary at all times. The food and laundry services manager or the authorized designee shall post daily, weekly and monthly cleaning schedules for the equipment and food preparation area.

#### 903.4 MEDICAL SCREENING

The Facility Commander and Jail Service Manager shall work cooperatively with the Responsible Health Authority to develop procedures to minimize the potential for spreading contagious disease and food-borne illness. In an effort to prevent the spread of illness, the following shall be strictly observed (15 CCR 1230):

- (a) All food services workers shall have a pre-employment/pre-assignment medical examination, in accordance with local requirements, to ensure freedom from diarrhea, skin infections and other illnesses transmissible by food or utensils.
- (b) Periodic reexaminations of food services workers shall be given to ensure freedom from any disease transmissible by food or utensils.
- (c) Food services workers shall have education and ongoing monitoring in accordance with the standards set forth in the applicable government health and safety codes.

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#### Food Services Worker's Health, Safety and Supervision

- (d) A supervisor shall inspect and monitor all persons working in any food services area on a daily basis for health and cleanliness, and shall remove anyone exhibiting any signs of food-transmissible disease from any food services area.
- (e) Any person working in any food services area who is diagnosed by a qualified health care professional with a contagious illness should be excluded from the food services areas until medically cleared to return to work.
- (f) All food handlers shall wash their hands when reporting for duty and after using toilet facilities. Aprons shall be removed and secured in a clean storage area before entering the toilet facility.
- (g) Food services workers shall wear disposable plastic gloves and a protective hair covering, such as a hat or hairnet, when handling or serving food. Gloves shall be changed after each task is completed.
- (h) Any outside vendor must submit evidence of compliance with state and local regulations regarding food safety practices.
- (i) Smoking at any time is prohibited in any food services area.
- (j) Documentation of compliance with all of the above and with any other risk-minimizing efforts implemented to reduce food transmissible disease shall be maintained in accordance with established records retention schedules.
- (k) All food services workers shall report to a supervisor any information about their health and activities in accordance with health and safety codes as they relate to diseases that are transmittable through food, (e.g., open sores, runny nose, sore throat, cough, vomiting, diarrhea, fever, recent exposure to contagious diseases such as Hepatitis A or tuberculosis).

Any food services worker is prohibited from handling food or working in any food services area if he/she reports symptoms such as vomiting, diarrhea, jaundice, sore throat with fever or has a lesion containing pus, such as a boil or infected wound that is open or draining. Food service workers shall only return to work in food service areas when cleared by a qualified health care professional.

#### 903.5 TRAINING REQUIREMENTS FOR FOOD SERVICES WORKERS

The jail services manager is responsible for developing and implementing a training program for inmate food services that includes food safety, proper food-handling techniques and personal hygiene. Each inmate food services worker shall satisfactorily complete the initial training prior to being assigned to prepare, deliver or serve food. Jail services workers should receive periodic supplemental training as determined by the food and laundry services manager (15 CCR 1243(g)).

The training curriculum for inmate food services workers should include, at minimum, the following topics:

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#### Food Services Worker's Health, Safety and Supervision

- Proper hand-washing techniques and personal hygiene as it applies to food services work
- Proper application and rotation of gloves when handling food
- Proper use of protective hair coverings, such as hats or hairnets
- Wearing clean aprons and removing aprons prior to entering toilet facilities
- Maintaining proper cooking and holding temperatures for food
- Proper portioning and serving of food
- Covering coughs and sneezes to reduce the risk of food-borne illness transmission
- Reporting illness, cuts or sores to the custody staff in charge

#### 903.6 SUPERVISION OF INMATE WORKERS

Only personnel authorized to work in the food preparation area will be allowed inside. Inmate food handlers working in the kitchen must be under the supervision of a staff member (15 CCR 1243(h)). The Facility Commander will appoint at least one qualified staff member, who will be responsible for the oversight of daily activities and ensuring food safety. The appointed staff member must be certified by passing the American National Standards Institute food safety manager certification examination.

Sufficient custody staff shall be assigned to supervise and closely monitor inmate food services workers. Staff shall ensure that inmate food services workers do not misuse or misappropriate tools or utensils, and that all workers adhere to the following:

- Correct ingredients are used in the proper proportions.
- Food is maintained at proper temperatures.
- Food is washed and handled properly.
- Food is served using the right utensils and in the proper portion sizes.
- Utensils such as knives, cutting boards, pots, pans, trays and food carts used in the
  preparation, serving or consumption of food are properly washed and sanitized after
  use. Disposable utensils and dishes will not be reused.
- All utensils are securely stored under sanitary conditions when finished.

#### 903.7 SUPERVISION OF THE FOOD SUPPLY

The risk of conflict and protest is reduced when the inmate population has confidence in the safety and quality of their food. Cook staff should supervise the transport and delivery of food to the respective serving areas. Cook staff should ensure the food is protected during transportation, delivered to the right location efficiently and under the right temperatures.

Jail services staff should report any suspected breech in the safety or security of the food supply. Staff should be alert to inmate behavior when serving food, and cognizant of any comments

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concerning perceived contamination or portioning issues. Staff should report any suspicion of inmate unrest to a supervisor.

Any change to the published menu or the standard portioning should be documented and reported to the jail services manager as soon as practicable.

# **Food Preparation Areas**

#### 904.1 PURPOSE AND SCOPE

This policy is intended to ensure the proper design and maintenance of the food preparation area.

#### **904.2 POLICY**

It is the policy of this office to comply with all federal, state and local laws and regulations concerning the institutional preparation of food.

#### 904.3 COMPLIANCE WITH CODES

The Facility Commander along with the Jail Sevice Manager is responsible for ensuring that food preparation and service areas are in compliance with all applicable laws and regulations and that food preparation areas are sanitary, well lit, ventilated and have adequate temperature-controlled storage for food supplies (15 CCR 1245(a)).

Any physical changes in the food preparation area, such as changing equipment or making major menu changes (from cold production to hot food), must be approved by the local public health entity to ensure adequate food protection.

Living or sleeping quarters are prohibited in the food preparation and food services areas (Health and Safety Code § 114286).

The food preparation area must avoid cross contamination and remain free from vermin infestation (Health and Safety Code § 114259).

#### 904.4 CONSTRUCTION REQUIREMENTS

All remodeling and new construction of food preparation areas shall comply with federal, state and local building codes, comply with food and agricultural laws and standards and include any required approvals from any local regulatory authority (Health and Safety Code § 113700 et seq.).

The food preparation area shall be sized to include space and equipment for adequate food preparation for the facility's population size, type of food preparation and methods of meal services.

Floors, floor coverings, walls, wall coverings and ceilings should be designed, constructed and installed so they are smooth, non-absorbent and attached so that they are easily cleanable (Health and Safety Code § 114268; Health and Safety Code § 114271).

Except in the area used only for dry storage, porous concrete blocks or bricks used for interior walls shall be finished and sealed for a smooth, non-absorbent, easily cleanable surface.

Food storage areas shall be appropriately clean, sized, typed and temperature-controlled for the food being stored (Health and Safety Code § 114047).

Lighting throughout the kitchen and storage areas shall be sufficient for staff and inmates to perform necessary tasks (Health and Safety Code § 114252).

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#### Food Preparation Areas

Mechanical ventilation of sufficient capacity to keep rooms free of excessive heat, steam, condensation, vapors, obnoxious odors, smoke and fumes shall be provided if necessary (Health and Safety Code § 114149(a)).

All equipment used in the food preparation area shall be commercial grade and certified by the American National Standards Institute or approved by a registered environmental health professional/sanitarian (Health and Safety Code § 114130).

Dishwashing machines will operate in accordance with the manufacturer recommendations and hot water temperatures will comply with federal, state and local health requirements (Health and Safety Code § 114101).

Equipment must be smooth, easy to clean, and easy to disassemble for frequent cleaning. Equipment should be corrosion resistant and free of pits, crevices or sharp corners.

Dry food storage must have sufficient space to store a minimum of 15 days of supplies and be stored in compliance with the provisions of Health and Safety Code § 114047.

#### 904.5 TOILETS AND WASHBASINS

Adequate toilet and washbasin facilities shall be located in the vicinity of the food preparation area for convenient sanitation and proper hygiene. Toilet facilities shall be completely enclosed and shall have tight-fitting, self-closing, solid doors, which shall be closed except during cleaning and maintenance.

Signs shall be conspicuously posted throughout the food preparation area and in each restroom informing all food services staff and inmate workers to wash their hands after using the restroom. Signs shall be printed in English and in other languages as may be dictated by the demographic of the inmate population.

To reduce the potential for contaminants being brought into the food preparation area, toilet facilities in the vicinity of the food preparation area should be limited to use by the jail services staff and inmate workers only. Anyone working in the food services area must store their aprons in a designated clean area before entering the toilet facilities.

The jail and laundry services manager shall be responsible for procedures to ensure:

- (a) All fixtures in the toilet facilities are clean and in good operating condition.
- (b) A supply of toilet tissue is maintained at each toilet at all times. Toilet facilities used by women shall have at least one covered waste receptacle.
- (c) The hand-washing station located adjacent to the toilet facility has warm water available and is kept clean and in good operating condition. Single-dispensing soap and a method for drying hands shall be provided at all times (Health and Safety Code § 113953.3).

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### Food Preparation Areas

If the toilet facility is outside of the kitchen area, food services workers must wash their hands after using the toilet facility and again upon returning to the kitchen area before preparing or serving food.

# **Food Budgeting and Accounting**

#### 905.1 PURPOSE AND SCOPE

The purpose of this policy is to establish processes that will enable the facility's food services to operate within its allocated budget, and for the development of specifications for purchasing food, equipment and supplies for the delivery of food services.

#### 905.2 POLICY

The Tulare County Sheriff's Office food services facilities shall serve nutritious meals in an efficient and cost-effective manner in accordance with applicable laws and standards (15 CCR 1243(i)).

#### 905.3 JAIL SERVICES MANAGER RESPONSIBILITIES

The jail services manager is responsible for establishing a per meal, per inmate budget for food, equipment and supplies that are needed for the effective operation of the facility food services. This includes monitoring purchases according to the budgeted weekly and monthly spending plans.

The volume for purchasing should be based upon the food services needs and storage availability. The jail services manager is responsible for establishing and maintaining detailed records and proper accounting procedures, and should be prepared to justify all expenditures and establish future budget requirements.

#### 905.4 PROCEDURE

The jail services manager is responsible for ensuring that food services are delivered in an efficient and cost-effective manner by employing the following procedures, including, but not limited to:

- (a) Developing an annual budget that is realistically calculated according to previous spending data and available revenue, and lists all anticipated costs for the food services operation for the coming year.
- (b) Establishing a per meal, per inmate cost using an inventory of existing supplies and planned purchases, minus the anticipated ending inventory (15 CCR 1243(i)).
- (c) Ensuring that accurate meal record data is collected and maintained. Meal records should include, but not be limited to, the date and time of service and the number of:
  - 1. Meals prepared and served for each meal period.
  - 2. Meals served per location.
  - 3. Prescribed therapeutic diet meals served.
  - Authorized religious diet meals served.
  - 5. Authorized disciplinary isolation diet meals served.
- (d) Ensuring that food is purchased from an approved wholesale/institutional vendor to ensure food safety.

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#### Food Budgeting and Accounting

- (e) Bulk-purchasing nonperishable items to maximize the budget dollars (15 CCR 1243(b)).
- (f) Continuous monitoring and improvement to minimize poor food management and/or accounting, including, but not limited to:
  - Following planned menus.
  - 2. Inspection of food deliveries to ensure the right quantity is delivered and the condition of the food is acceptable.
  - 3. Purchasing food that is in season.
  - 4. Purchasing the grade of product best suited to the recipe.
  - 5. Following standard recipes.
  - 6. Producing and portioning only what is needed.
  - 7. Minimizing food production waste and establishing appropriate food storage and rotation practices, including proper refrigeration.
  - 8. When reasonably practicable, responding to the inmate's food preferences.
  - 9. Establishing minimum staffing requirements based on the layout and security requirements of the facility.
  - Budgeting adequately for equipment repair and replacement, factoring in any labor cost savings, the need for heavy-duty equipment with corrections packages for safety, and inmate abuse.
- (g) Establishing purchasing specifications, which are statements of minimum quality standards and other factors, such as quantity and packaging. A basic specification should contain (15 CCR 1243(b)):
  - 1. The common name of the product.
  - 2. The amount to be purchased.
  - 3. The trade, federal or other grade or brand required.
  - 4. The container size and either an exact, or a range of the number of pieces in a shipping container.
  - 5. The unit on which prices are to be quoted (e.g., 6/#10 cans, 10/gallons).
- (h) Establishing accounting procedures for financial statements and inventory control.
- (i) Maintaining records of invoices, purchase orders, meal count sheets, food production records, therapeutic and religious diet records, inventory of food, supplies and equipment for the required period of time, as mandated by the governing body of the facility.

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#### Food Budgeting and Accounting

#### 905.5 REPORTING

The food and laundry services manager is responsible for ensuring that accurate meal record data is collected and maintained. Meal records should include, but not be limited to, the number of (15 CCR 1243(j)):

- (a) Meals prepared and served for each meal period.
- (b) Meals served per location.
- (c) Prescribed therapeutic diet meals served.
- (d) Authorized religious diet meals served.
- (e) Authorized disciplinary isolation diet meals served.

## **Inspection of Food Products**

#### 906.1 PURPOSE AND SCOPE

The purpose of this policy is to establish methods by which the Food and Drug Administration (FDA) and/or the United States Department of Agriculture (USDA) inspections and/or approvals are conducted on any food products grown or produced within the detention facility system.

#### **906.2 POLICY**

The Tulare County Sheriff's Office will ensure the safety and quality of all food products grown or produced at this facility through routine inspections and approvals, as required by law.

#### 906.2.1 FOOD INSPECTION PROCEDURES

The jail services manager is responsible for developing procedures for ensuring that all food used in the food services operation has been inspected and/or approved to standards established by statute, and that the delivery of all food to the detention facility kitchens and to the inmates occurs promptly to reduce the risk of any food-borne illness or contamination.

The jail services manager shall establish inspection procedures in accordance with established standards and statutes. Such procedures shall include, but are not limited to:

- (a) The FDA or USDA inspection and/or approval of all food products grown or produced by this facility prior to distribution.
- (b) A system of periodic audits and inspections of the facility and of all raw material suppliers, either by custody staff or by a third-party vendor.
- (c) A system of thorough documentation of all inspection and approval processes, training activities, raw material handling procedures, activities, cleaning and sanitation activities, cleanliness testing, correction efforts, record-keeping practices and the proper use of sign-off logs shall be developed and implemented.
- (d) Processes of evaluating the effectiveness of training, and validating cleanliness through testing (e.g., swabs, bioluminescence and visual, taste and odor evaluations), shall be created and implemented. Records of all such activities shall be documented.
- (e) Documentation of any recommendations for continuous quality improvement and their implementation, with the intent of eliminating deficiencies. Documentation should include a post-deployment verification of the correction.
- (f) The jail services manager is responsible for ensuring adherence to the following practices, including, but not limited to:
  - 1. The scope of food products being grown or processed internally is well-defined.
  - 2. All critical processes are validated to ensure consistency and compliance with specifications.
  - 3. Any changes to the process are evaluated for effectiveness.

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#### Inspection of Food Products

- 4. There are clearly, written instructions and procedures for the staff and inmates to follow.
- 5. The staff and inmates are trained to perform all established tasks and document all necessary procedures.
- Physical barriers for separating raw and cooked food-processing areas are established and maintained.
- 7. The traffic flow of workers is designed to minimize the risk of any cross-contamination.
- 8. All drains are used and cleaned properly, within industry standards.
- 9. Proper equipment and/or tools are provided and designated for specific use.
- 10. All persons working in the food services areas are wearing proper clothing and protective devices at all times.
- 11. All persons working in the food services areas wash their hands properly and frequently.
- 12. Only authorized personnel are allowed in the food processing areas.
- 13. Only potable water is used for growing or washing produce.
- 14. The distribution of all prepared food is done in a manner that reduces the risk of food-borne illness or contamination.

# **Food Services Facilities Inspection**

#### 907.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for inspecting food services areas and facilities to ensure a safe and sanitary environment for staff and inmates.

#### **907.2 POLICY**

It is the policy of the Tulare County Sheriff's Office that the food services area be maintained in a safe, sanitary condition by conducting regularly scheduled inspections, both by facility staff and by an outside independent inspection authority as may be required by law (15 CCR 1245(a)).

#### 907.3 CLEANING AND INSPECTIONS BY STAFF

The food and laundry services manager shall ensure the dining and food preparation areas and all equipment in the food services area are inspected weekly. Adequate hot and cold water should be available in the kitchen. Water temperature of all fixtures, including washing equipment, should be checked and recorded weekly to ensure compliance with the required temperature range. Deficiencies noted by inspections shall be promptly addressed.

A cleaning schedule for each food services area shall be developed and posted for easy reference by staff, and shall include areas such as floors, walls, windows and vent hoods. Equipment, such as chairs, tables, fryers and ovens, should be grouped by frequency of cleaning as follows:

- After each use
- Each shift
- Daily
- Weekly
- Monthly
- Semi-annually
- Annually

The food and laundry services manager is responsible for establishing and maintaining a record-keeping system to document the periodic testing of sanitary conditions and safety measures, in accordance with established records retention schedules. At the direction of the Facility Commander or the authorized designee, the food and laundry services manager shall take prompt action to correct any identified problems.

#### 907.3.1 SAFETY INSPECTION CHECKLIST

The following items should be part of the daily inspection:

- Lighting is adequate and functioning properly.
- Ample working space is available.

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#### Food Services Facilities Inspection

- Equipment is securely anchored.
- There are suitable storage facilities, minimizing the risk of falling objects.
- Floors are clean, dry, even and uncluttered.
- Machines have proper enclosures and guards.
- A clear fire safety passageway is established and maintained.
- Fire extinguishers and sprinkler systems are available, not expired and are tested regularly.
- The food preparation area has good ventilation.
- Furniture and fixtures are free from sharp corners, exposed metal and splintered wood.
- All electrical equipment is in compliance with codes and regulations.
- All workers wear safe clothing, hair coverings, gloves and protective devices while working.
- All workers are in good health, with no symptoms of illness or injury that would pose a risk to food safety.
- All ranges, ovens and hot holding equipment are clean and in good operating condition.
- Mixers and attachments are clean and in good operating condition.
- Dishwashing machines are clean and in good operating condition, and proper chemicals are in use.
- Water temperatures for hand sinks, ware washing sinks and dishwashing machines meet minimum acceptable temperatures.
- All hand-washing stations have free access, soap, hot and cold running water under pressure and a method to dry hands.
- Toilet facilities are in good repair and have a sufficient supply of toilet paper.
- All temperature charts and testing documents are current, accurate and periodically reviewed and verified by the food services manager.
- Only authorized personnel are allowed in the kitchen area.
- Foods are labeled and stored properly using the first-in first-out system.
- The refrigerators and freezers are in good operating condition and maintain proper temperature.
- There is no evidence of cross-connection or cross-contamination of the potable water system.

## **Food Storage**

#### 908.1 PURPOSE AND SCOPE

The purpose of this policy is to establish food storage methods that are designed to meet manufacturer's recommendations, Health and Safety Codes, state laws and local ordinances, and to safely preserve food, extend storage life and reduce food waste.

#### **908.2 POLICY**

Food and food supplies will be stored in sanitary and temperature-controlled areas, in compliance with state and local health laws and standards (15 CCR 1243(c); 15 CCR 1245(a)).

#### 908.3 PROCEDURES

The food and laundry services manager shall be responsible for establishing procedures to ensure the safe preservation and storage of food in the most cost effective manner, beginning with the receipt of the raw materials through the delivery of prepared meals.

When receiving food deliveries, the stock clerk shall inspect the order for quality and freshness, and shall ensure that the order is correct by checking the order received against the order form. All delivery vehicles shall be inspected by jail services staff to make certain that the vehicles are clean, free from vermin infestations and are maintained at the appropriate temperature for the type of food being carried.

If food quality and freshness do not meet commonly accepted standards or if it is determined that proper storage temperatures have not been maintained, the employee checking the order in will refuse the item and credit the invoice.

Any food destined for return to the vendor should be stored separately from any food destined for consumption. The food services manager will contact the vendor and arrange for replacement of the unacceptable food items.

Storage temperatures in all food storage areas should be checked and logged on a daily basis. Records of the temperature readings should be maintained in accordance with established records retention schedules.

An evaluation system should be established for food stored in any area with temperature readings outside the normal range, and should include contingency plans for menu changes, food storage relocation or food destruction, as indicated. All actions taken to ensure the safety of the food served should be documented and retained in accordance with established records retention schedules.

#### 908.4 DRY FOOD STORAGE

Canned items and dry food that does not need refrigeration should be stored in a clean, dry, secure storage area where temperatures are maintained between 50F and 80F degrees. Temperatures shall be monitored and recorded once each day on a checklist.

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#### Food Storage

All dry items shall be stored at least 6 inches off the floor and at least 6 inches away from any wall. Only full unopened cans and containers shall be stored in the storerooms. Open containers and packages shall be appropriately stored in the working or holding areas.

All storage areas will be kept locked when they are not in actual use. New food shipments shall be placed behind existing like items and rotated using a first-in first-out rotation method.

Personal clothing and personal items shall not be stored in food storage areas.

#### 908.4.1 MAINTENANCE OF DRY FOOD STORAGE AREAS

Inmate workers or staff should clean the storage areas twice each day by sweeping and mopping all floors and wiping down shelves and walls. Any damaged items should be inspected for spoilage and repackaged or discarded as appropriate. Jail services staff should inspect the storage areas to ensure they are clean and orderly. Food and Laundry Services Managers will document the inspection and record the daily temperature on the storage area checklist (15 CCR 1243(m)).

#### 908.5 REFRIGERATED AND FROZEN STORAGE

Unless health codes dictate otherwise, refrigerators must be kept between 32F and 41F degrees. Deep chill refrigerators will be set between 28F and 32F degrees for cook-chill products, dairy and meat items, to extend shelf life. Freezers shall be maintained at 32F degrees or below.

All freezer and refrigerator storage areas should have at least two thermometers to monitor temperatures. One thermometer should have a display visible to the outside. The second thermometer shall be placed in the warmest place inside the storage area. Daily temperature readings shall be recorded on the storage area checklist. Any variance outside of acceptable temperature range shall be immediately addressed.

All food must be covered and dated when stored. Cooked items shall not be stored beneath raw meats. Cleaned vegetables shall be stored separately from unwashed vegetables. Storage practices shall use a first-in first-out rotation method.

#### 908.5.1 MAINTENANCE OF REFRIGERATED AND FREEZER AREAS

Refrigeration storage units should be cleaned daily, including mopping floors and wiping down walls. A more thorough cleaning should occur weekly to include dismantling and cleaning shelves. Jail services staff should inspect the contents of freezers and storage units daily to ensure all items are properly sealed and labeled (15 CCR 1243(m)).

#### 908.5.2 STORAGE OF CLEANING SUPPLIES AND MATERIALS

The storage of soaps, detergents, waxes, cleaning compounds, insect spray and any other toxic or poisonous materials are kept in a separate, locked storage area to prevent cross contamination with food and other kitchen supplies.

#### 908.6 WASTE MANAGEMENT

The food and laundry services manager shall develop and maintain a waste management plan that ensures the garbage is removed daily (15 CCR 1243(I)). This plan also should include methods

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Food S	Storage
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to minimize the waste of edible food and to dispose of non-edible or waste food material without utilizing a landfill.

## **Prescribed Therapeutic Diets**

#### 909.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure that incarcerated persons who require prescribed therapeutic diets as a result of a diagnosed medical condition are provided with nutritionally balanced therapeutic meals that are medically approved and meet nutritional and safety standards.

#### 909.2 POLICY

It is the policy of this office to provide therapeutic diet meals as prescribed by qualified health care professionals.

#### 909.3 PROCEDURES

The Responsible Physician, in consultation with the food services manager, shall (15 CCR 1248):

- (a) Develop written procedures that identify individuals who are authorized to prescribe a therapeutic diet.
- (b) The therapeutic diets utilized by this facility shall be planned, prepared, and served with consultation from a registered dietitian.
- (c) The Facility Commander shall comply with any therapeutic diet prescribed for an incarcerated person.
- (d) The Facility Commander and the Responsible Physician shall ensure that the diet manual, which includes sample menus of therapeutic diets, shall be available to both the health services and food services workers. A registered dietitian shall review, and the Responsible Physician shall approve, the diet manual on an annual basis.

As a best practice, all therapeutic diet prescriptions should be reviewed and rewritten, if appropriate, on a quarterly basis. This is to reduce the risk of an incarcerated person developing an adverse medical condition or nutritional defect as the result of a diet that is inconsistent with the person's current medical needs. A diet request form should be made available to incarcerated persons.

Pregnant or lactating incarcerated persons shall be provided a balanced, nutritious diet approved by a physician (15 CCR 1248).

#### 909.4 STAFF COMMUNICATION/COORDINATION

It is the responsibility of the health authority to compile a daily list of all incarcerated persons who are prescribed therapeutic diets. The list should contain the following information:

- (a) Incarcerated person's name
- (b) Incarcerated person's identification number
- (c) Housing location or dining location where the meals will be delivered
- (d) Incarcerated person's therapeutic diet type
- (e) Special remarks or instructions

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#### Prescribed Therapeutic Diets

Any time incarcerated persons are assigned to a different housing area, custody staff must notify the food services personnel immediately.

#### 909.5 PREPARATION AND DELIVERY OF MEALS

The food services manager or the authorized designee is responsible for reviewing the therapeutic diet lists prepared by the Responsible Physician, counting the number and type of therapeutic meals to be served, and preparing the food according to the therapeutic menu designed by the registered dietitian.

Therapeutic diets may include snacks and oral supplements. Snacks and supplements should be distributed with regularly scheduled meal service or may be distributed with medications. Individual labels or written documents containing the following information should be prepared by the kitchen, clearly identifying each meal and any included snacks:

- (a) Incarcerated person's name
- (b) Incarcerated person's identification number
- (c) Housing location or dining location where the meals will be delivered
- (d) Incarcerated person's therapeutic diet type
- (e) A list of items provided for the meal

The custody staff responsible for meal distribution shall ensure that any incarcerated person who has been prescribed a therapeutic meal by the Responsible Physician or the authorized designee receives the prescribed therapeutic meal. Incarcerated persons who receive a therapeutic meal should sign for receipt of the meal.

Therapeutic meal receipts should be retained in the incarcerated person's medical record for an amount of time necessary to resolve any dispute about the receipt or composition of a prescribed meal.

Unless a therapeutic diet was prescribed with a specific end date, only the Responsible Physician or the authorized designee may order that a therapeutic diet be discontinued.

Incarcerated persons who are receiving therapeutic diets must receive clearance from the Responsible Physician before they may receive a religious or disciplinary diet.

If prescribed by the Responsible Physician, supplemental food shall be served to incarcerated persons more frequently than the regularly scheduled meals. An incarcerated person who misses a regularly scheduled meal shall receive the prescribed meal.

#### 909.6 THERAPEUTIC AND RELIGIOUS MEAL RECORDS

Incarcerated persons receiving prescribed therapeutic diet meals and/or authorized religious diet meals must sign a document indicating the following:

- (a) Incarcerated person's name
- (b) Incarcerated person's identification number
- (c) Dates and times of service

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#### Prescribed Therapeutic Diets

- (d) Housing location or dining location where the meals will be delivered
- (e) Incarcerated person's therapeutic diet type
- (f) A list of items provided for the meal

All information regarding a therapeutic diet is part of an incarcerated person's medical record and is therefore subject to state and federal privacy laws concerning medical records.

All meal records shall be retained in accordance with established retention schedules and applicable statutory regulations.

## **Disciplinary Separation Diet**

#### 910.1 PURPOSE AND SCOPE

This policy establishes the requirement for providing inmates disciplinary separation diets when they are ordered for disciplinary reasons. The disciplinary separation diet will only be utilized after all of the provisions of the Disciplinary Separation section of the Disciplinary Separation Policy are implemented.

#### 910.2 PROCEDURE

The food services manager shall prepare the disciplinary separation diet after receiving directions from the Facility Commander. Records of providing this diet shall be maintained by the food services manager.

The disciplinary separation diet shall be served twice during each 24-hour period and shall consist of one-half of a vegetable/meatloaf (see recipe below) per meal (or a minimum of 19 ounces of cooked loaf). The loaf shall be accompanied by two slices of whole wheat bread and at least one quart of water if the inmate does not have access to a water supply. The use of the disciplinary separation diet is an exception to the "three meals per day" policy described in the Food Services Policy (15 CCR 1247(a)).

#### 910.3 DISCIPLINARY SEPARATION DIET RECIPE

The disciplinary separation diet shall consist of the following (15 CCR 1247(b)):

- (a) 2 ½ oz. nonfat dry milk
- (b) 4 ½ oz. raw grated potato
- (c) 3 oz. raw carrots, chopped or grated fine
- (d) 1 ½ oz. tomato juice or puree
- (e) 4 ½ oz. raw cabbage, chopped fine
- (f) 7 oz. lean ground beef, turkey, or rehydrated, canned, or frozen Textured Vegetable Protein (TVP)
- (g) 2 ½ fl. oz. oil
- (h)  $1 \frac{1}{2}$  oz. whole wheat flour
- (i) 1/4 tsp. salt
- (j) 4 tsp. raw onion, chopped
- (k) 1 egg
- (I) 6 oz. dry red beans, pre-cooked before baking (or 16 oz. canned or cooked red kidney beans)
- (m) 4 tsp. chili powder

These ingredients should be shaped into a loaf and baked at 350-375 degrees for 50-70 minutes.

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It is the policy of this office to provide disciplinary separation diets as allowed by state law.

**Chapter 10 - Inmate Programs** 

## **Inmate Programs and Services**

#### 1000.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the programs and services that are available to inmates. The programs and services exist to motivate offenders toward positive behavior while they are in custody. The policy identifies the role and responsibilities of the Inmate Programs Manager, who manages a range of programs and services.

#### 1000.2 POLICY

The Tulare County Sheriff's Office will make available to inmates a variety of programs and services subject to resources and security concerns. Programs and services offered for the benefit of inmates may include social services, faith-based services, recreational activities, library access, educational/vocational training, alcohol and drug abuse recovery programs and leisure time activities (15 CCR 1070).

#### 1000.3 INMATE PROGRAMS MANAGER RESPONSIBILITIES

The Inmate Programs Manageris responsible for managing the inmate programs and services, including the following:

- (a) Research, plan, budget, schedule, and coordinate security requirements for all inmate programs and services.
- (b) Develop or procure programs and services as authorized by the Captain (15 CCR 1070).
- (c) Act as a liaison with other service providers in the community that may offer social or educational programs (e.g., school districts, Department of Social Services, health educators, substance abuse counselors).
- (d) Develop, maintain, and make available to inmates the schedule of programs and services.
- (e) Develop policies and procedures, and establish rules for the participation of inmates in the programs and services.
- (f) Develop and maintain records on the number and type of programs and services offered, as well as inmate attendance at each offering.
- (g) Establish controls to verify that the content and delivery of programs and services are appropriate for the circumstances.
- (h) Accumulate data and prepare monthly and annual reports as directed by the Captain.
- (i) Ensure inmates are not denied access to educational and vocational programs based solely on their indigent status.

#### 1000.4 SECURITY

All programs and services offered to benefit inmates shall adhere to the security and classification requirements of this facility. To the extent practicable, the Inmate Programs Manager will develop

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#### Inmate Programs and Services

individualized programs and services for inmates who are housed in high-security or administrative segregation.

#### 1000.5 DISCLAIMER

Inmate programs are provided at the sole discretion of the Tulare County Sheriff's Office in keeping with security interests, available resources and best practices.

Nothing in this policy is intended to confer a legal right for inmates to participate in any program offered other than what is required by law or that which is medically required.

## **Inmate Welfare Fund**

#### 1001.1 PURPOSE AND SCOPE

The Office is authorized to maintain a fund derived from proceeds from the commissary, vending machines, telephones and other inmate-related commerce activities to be used primarily to provide welfare and education programs for the benefit of the inmate population.

#### 1001.2 INMATE WELFARE FUND

The Inmate Programs Manager, in cooperation with the Administrative Service Captain, will establish and maintain an Inmate Welfare Fund where proceeds derived from inmate telephones, commissary profits, vending machines and other income intended for the support of inmate programs are deposited.

The Inmate Welfare Fund is allocated to support a variety of programs, services and activities benefiting the general inmate population and enhancing inmate activities and programs. This includes capital construction and improvement projects in support of such programs, services and activities (Penal Code § 4025).

#### 1001.3 INMATE WELFARE FUNDING SOURCES

Revenues and funding from the following sources shall be deposited into the Inmate Welfare Fund account:

- (a) All proceeds from commissary and canteen operations
- (b) Proceeds from vending machines made available for inmate use
- (c) Proceeds from the operation of inmate telephones
- (d) Proceeds from the sale of inmates' arts-and-crafts projects
- (e) Donations
- (f) Interest income earned by the Inmate Welfare Fund

#### 1001.4 EXPENDITURE OF INMATE WELFARE FUNDS

The Inmate Welfare Fund shall be used solely for the welfare and benefit of the inmate population or as otherwise permitted by law.

Expenditures permitted from the Inmate Welfare Fund include, but are not limited to, the following:

- (a) Education programs
- (b) Recreational goods and services, such as:
  - 1. Recreational equipment, games and sporting goods
  - 2. Televisions and cable/satellite subscriptions, video players and content media
  - 3. Library books
  - 4. Vending machines

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#### Inmate Welfare Fund

- (c) Salary and benefit costs for personnel while they are employed in positions or are performing activities solely for the benefit of inmates or to facilitate inmate programs
- (d) Welfare packages for indigent inmates
- (e) Alcohol and drug treatment programs
- (f) Office facility canteens, including vending machines available for inmate use
- (g) Inmate trust accounting system
- (h) Envelopes, postage and personal hygiene items for indigent inmates
- (i) Approved non-prescription, over-the-counter health aids for inmate use
- (j) Libraries designated for inmate use
- (k) Visiting room equipment, supplies and services
- (I) Inmate activity programs, including:
  - 1. Equipment for television viewing
  - Visiting music/entertainment groups
  - 3. Music equipment and supplies
  - 4. Activities equipment, supplies and services
  - 5. Repair of equipment purchased from the Inmate Welfare Fund
  - 6. Food or supplies for special occasions
  - 7. Inmate awards for the purpose of providing umpires or referees, and maintaining activity equipment and apparel
  - 8. Inmate tournaments and holiday events
  - 9. Inmate club activities
  - Entertainment equipment, cable or satellite subscription services and other related supplies
  - 11. Materials for faith-based programs

#### 1001.4.1 PROHIBITED EXPENDITURES OF INMATE WELFARE FUND

Except as permitted by law, the Inmate Welfare Fund shall not be used to fund activities associated with any of the following:

- (a) Security-related functions, including staff, safety equipment, radios, weapons or control devices that are specifically designated for use by the custody staff in maintaining the security, safety and order in the facility
- (b) Food service, staff costs, equipment and supplies
- (c) Medical/dental services, staff costs, equipment and supplies

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#### Inmate Welfare Fund

- (d) Maintenance and upkeep of office facilities not otherwise permitted by law
- (e) Janitorial services and supplies
- (f) Transportation to court, medical appointments or other reasons not related to inmate programs
- (g) Any other normal operating expenses incurred by the day-to-day operation of the Office

#### 1001.4.2 EXPENDITURE FOR REENTRY PROGRAMS

Expenditures from the Inmate Welfare Fund are also permitted for programs that assist indigent inmates with the reentry process within 30 days of release. These programs include work placement, counseling, obtaining proper identification, education and housing (Penal Code § 4025.5).

#### 1001.5 FINANCIAL ACCOUNTING OF INMATE WELFARE FUNDS

The Inmate Programs Manager in cooperation with the Administrative Service Captain shall maintain an accounting system to be used for purchasing goods, supplies and services that support inmate programs (see the Financial Practices Policy).

#### 1001.5.1 INMATE WELFARE FUND COMMITTEE

A committee will be established to oversee Inmate Welfare Funds. The committee will consist of the following individuals: Program Manager, Account Manager, Captain, and Detention Lieutenants. The committee will meet at least quarterly to review the IWF budget and expenditures.

#### 1001.5.2 ANNUAL REPORTING

The Facility Commander is responsible for ensuring an annual report of expenditures from the Inmate Welfare Fund is submitted annually to the County Board of Supervisors (Penal Code § 4025).

#### 1001.6 POLICY

It is the policy of this office to maintain and administer an Inmate Welfare Fund that supports inmate programs.

## **Inmate Accounts**

#### 1002.1 PURPOSE AND SCOPE

This policy establishes guidelines and procedures for managing, handling and accounting of all money belonging to inmates that is held for their personal use while they are incarcerated in this facility.

#### 1002.2 INMATE ACCOUNTS

The Office will establish an inmate account for the purpose of receiving funds from authorized sources for inmate use. A separate account will be established for each inmate when he/she is booked into this facility.

When an inmate is admitted to the jail, a written, itemized inventory of the money in the inmate's possession shall be completed. Any subsequent deposits to the inmate's fund shall be inventoried and documented. An inmate shall be issued a receipt for all money held until his/her release.

An inmate may use money in his/her inmate account for bail or to purchase items from the inmate commissary. Inmates may receive and release money while in custody. Funds will be made available to inmates for their use in accordance with the rules and regulations established by the Facility Commander.

#### 1002.3 FUNDING SOURCES

The inmate account will only accept funds for deposit from approved sources. Funds deposited into an inmate's account will first be used to settle the inmate's negative balance, should one exist.

#### 1002.3.1 DEPOSITS DURING BOOKING

With the exception of legally prescribed fees (e.g., booking fees, pay to stay), all money received during the booking process shall be deposited to the inmate's account after the inmate signs an acknowledgement agreeing to the amount.

#### 1002.3.2 DEPOSITS THROUGH THE MAIL

All funds received by mail to be deposited to an inmate's account shall be delivered to the cashier after signed acknowledgement by the inmate.

Only postal money orders and checks issued by federal, state, county or city government agencies that are received through the mail are acceptable for deposit into inmate accounts. Although cash may be accepted for deposit, it is not recommended that cash be sent through the mail. All personal checks, payroll checks and other unapproved monies will be forwarded to the personal property storage area and placed in the inmate's property bag.

#### 1002.3.3 VISITOR DEPOSITS

Only approved visitors may deposit funds into an inmate's account. The cashier may only accept postal money orders for deposit to an inmate's account.

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#### Inmate Accounts

The cashier shall post funds received to the inmate's account and prepare a validated receipt for the transaction. A copy of the transaction receipt shall be provided to both the inmate and the person making the deposit. A copy will be retained by the cashier.

Inmates will not be allowed to accumulate large sums of money in their account other than for the purpose of bail. Deposits bringing the inmate's balance over \$500 must be approved by the Facility Commander. Anything over the limit will be placed in the inmate's personal property.

#### 1002.4 AUTHORIZATION FOR SELF-BAIL

Inmates wishing to use their personal funds as bail must sign an Authorization for Self-Bail transaction document. This transaction document must be received by the cashier before the inmate's account can be debited and a receipt issued.

#### 1002.5 RELEASE OF FUNDS TO OTHER PERSONS

Inmates wishing to release all or part of their personal funds to a person who is not in custody must sign a cash withdrawal transaction document (Property Relaese Slip). That person must furnish a valid driver's license or state-issued identification card to the cashier. The cashier will then forward the cash withdrawal transaction document to the proper housing area for the inmate's signature and approval. The Facility Commander will be notified when an inmate has requested to release funds.

#### 1002.6 RELEASE FROM CUSTODY

Staff members who are responsible for the release of inmates will release the money to the inmate after the inmate endorses the property release slip.

#### 1002.7 AUTOMATED KIOSKS

The use of automated kiosks for the deposit of monies into the inmate account or to transfer inmate monies for the purchase of commissary or other authorized items will meet the financial accounting requirements of this policy and other standard financial practices.

## **Counseling Services**

#### 1003.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process for providing counseling and crisis intervention services to inmates.

#### 1003.2 POLICY

This office will provide counseling and crisis intervention services to any inmate who either requests services or is determined by a health provider to be in need of counseling or crisis intervention services. These services may be provided by:

- (a) Medical/mental health staff assigned to the facility.
- (b) Faith-based counseling by the chaplain or religious volunteers (see the Religious Programs Policy).

The Facility Commander shall ensure that request forms are available and provided to inmates who request counseling services. All inmate requests for counseling shall be forwarded to the Shift Supervisor. If an inmate displays behavior indicating a need for counseling or crisis intervention services, the deputy shall notify the Shift Supervisor. The Shift Supervisor shall assess the need and area of counseling and make a reasonable effort to provide the inmate with the requested counseling as soon as reasonably practicable with consideration given to facility security, scheduling and available resources.

#### 1003.3 NON-CRISIS COUNSELING

The Office shall, when reasonably practicable, make counseling services available to assist inmates who are being released into the community.

## **Exercise and Out of Cell Time**

#### 1004.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines and procedures ensuring that the Tulare County Sheriff's Office facility will have sufficiently scheduled exercise and out of cell time periods and sufficient space for these activities, as required by law.

#### 1004.1.1 DEFINITIONS

Definitions related to this policy include (15 CCR 1006):

**Exercise** - The opportunity for physical exertion.

**Out of Cell Time** - Time spent outside of the sleeping area, where an individual has the opportunity to exercise or participate in recreation.

**Recreation** - An individual's ability to choose from activities that occupy the attention and offer the opportunity for relaxation and may include reading, games, socialization, entertainment, education, and programs.

#### 1004.2 POLICY

It is the policy of this office to provide incarcerated persons with access to exercise opportunities, exercise equipment, and out of cell time activities in accordance with state laws or requirements.

#### 1004.3 RESPONSIBILITIES

The Facility Commander or the authorized designee shall be responsible for ensuring there is sufficient secure space allocated for physical exercise and out of cell time, and that a schedule is developed to ensure accessibility to both activities for all incarcerated persons. At least three hours per week of exercise opportunities shall be provided and at least seven hours of out of cell time distributed over a period of seven days for recreation (15 CCR 1065).

#### 1004.4 ACCESS TO EXERCISE

Incarcerated persons shall have access to exercise opportunities, including access to physical exercise outside the cell and adjacent dayroom areas, and the opportunity to exercise outdoors when weather permits.

The Shift Supervisor shall use the approved daily log sheet to document when incarcerated persons of like classification status are scheduled to exercise each day and shall record the exercise of an incarcerated person, or that the incarcerated person has declined outside exercise.

Daily log sheets should be collected monthly and forwarded to the Facility Commander. Log sheets shall be maintained in accordance with established records retention schedules.

#### 1004.5 ACCESS TO OUT OF CELL TIME

Each incarcerated person shall have access to the minimum state-required out of cell time (leisure-time) activities outside the cell and adjacent dayroom areas (15 CCR 1065). The length of time will be determined by the incarcerated person's classification status, security concerns, and

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#### Exercise and Out of Cell Time

operational schedules that preclude out of cell time during a period of time (e.g., meal times, searches, lockdown, court). The staff should ensure that the maximum time possible is provided to the incarcerated persons for this purpose.

Televisions, newspapers, table games, and other items may also be made available to enhance out of cell time time. Consideration will be given to the passive or active out of cell time needs of older incarcerated persons and incarcerated persons with disabilities.

#### 1004.5.1 USE OF THE INCARCERATED PERSON WELFARE FUND

Monies derived from the Incarcerated Person Welfare Fund may be used to purchase and maintain equipment and supplies.

#### 1004.6 SECURITY AND SUPERVISION

The staff supervising incarcerated persons during exercise and out of cell time shall document when each incarcerated person has the opportunity to exercise or recreate, and when each incarcerated person actually participates.

The supervising staff may terminate the exercise or out of cell time period and escort back to the housing unit any incarcerated person who continues to act in an aggressive or disorderly manner after being ordered to stop by the staff. Whenever an exercise or out of cell time period is involuntarily terminated, the staff will document the incident and rationale for terminating the exercise period. The Shift Supervisor will determine whether disciplinary action is warranted.

#### 1004.7 EXERCISE SPACE

Exercise areas, as specified by federal, state, and/or local laws or requirements, should be sufficient to allow each incarcerated person the required minimum amount of exercise. Use of outdoor exercise is preferred but weather conditions may require the use of covered/enclosed space. Dayroom space is not considered exercise space.

Incarcerated persons on separation status shall have access to the same facilities as other incarcerated persons unless security or safety considerations dictate otherwise. When incarcerated persons on separation status are excluded from use of regular facilities, the alternative area for exercise use shall be documented.

#### 1004.8 INABILITY TO MEET REQUIREMENTS

In the event that the incarcerated person population exceeds the ability of the facility to meet the exercise and out of cell time requirements, the facility should notify the governing body about the deficiency in space for exercise, that it may violate the law and/or the requirements, and request funds to remedy the situation. The facility should document all action taken to try to remedy the situation, including funding requests, population reduction requests, and all responses to those requests.

## Inmate Educational, Vocational and Rehabilitation Programs

#### 1005.1 PURPOSE AND SCOPE

This office provides educational and vocational programs that are designed to help inmates improve personal skills, assist in their social development and improve inmate employability after release. The ability of the office to offer educational programs is dictated by available funding, inmate classification and other required inmate programs and routines.

#### 1005.2 POLICY

The educational and vocational programs offered by the Office are available to all eligible inmates and are subject to schedule, space, personnel and other resource constraints.

Designated space for inmate education and vocational programs will, whenever practicable, be designed in consultation with the appropriate school authorities or educational/vocational service providers.

Adequate funding is required. If the funding source reduces or eliminates funding in these areas, educational and/or vocational programs may be reduced or eliminated.

While the housing classification of an inmate has the potential to pose security issues, every effort, to the extent reasonably practicable, will be made to provide individualized educational opportunities (15 CCR 1061).

#### 1005.3 INMATE PROGRAM MANAGER

The Sheriff or the authorized designee shall appoint an Inmate Programs Manager, who shall be responsible for managing all aspects of the inmate educational and vocational program. Those duties include, but are not limited to:

- (a) Conducting an annual needs assessment to determine the type of programs needed to serve the inmate population.
- (b) Developing the program plans.
- (c) Developing or directing the curricula for each educational, vocational and testing component.
- (d) Developing and implementing individualized programs for high-risk or administrative inmates, as needed.
- (e) Coordinating with corrections staff regarding the security issues associated with these programs.
- (f) Developing and maintaining records of all needs assessments, all training offered, all inmate attendees, testing records and class evaluations.

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#### Inmate Educational, Vocational and Rehabilitation Programs

(g) Forecasting the annual cost of the program and coordinating with the budget office to secure funding.

#### 1005.4 COURSE OFFERINGS

Course offerings will be subject to need, available resources, security concerns, available space and inmate classification, and may include the following:

- Basic education, General Educational Development (GED) preparation
- English as a second language (ESL)
- Basic literacy
- Substance abuse and healthy lifestyles education
- Parenting courses
- Basic computer instruction
- Basic life skills
- Vocational skills such as:
  - Cooking and food services
  - Landscaping, horticulture
  - Basic woodworking
  - Auto body and painting
  - Basic auto repair
  - Basic office skills
- Other courses as deemed appropriate by the Inmate Programs Manager

#### 1005.5 OUTREACH

Information about educational opportunities should be included in the general inmate orientation. At a minimum, inmates should receive instruction on how to request participation in the inmate education programs, along with eligibility requirements and rules for participation.

#### 1005.6 ELIGIBILITY REQUIREMENTS

Educational/vocational programming (other than televised courses) may be offered to sentenced and pretrial inmates. The Sheriff shall ensure that there is equal opportunity for participation for male and female inmates.

#### 1005.7 INMATE REQUESTS

Inmates should be given a form to request participation in the inmate education program. Inmate requests will be forwarded to the Inmate Programs Manager, who will have the facility classification staff screen and approve the request.

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#### Inmate Educational, Vocational and Rehabilitation Programs

The Inmate Programs Manager will notify the inmate whether he/she has been approved for an education program. If approved, the Inmate Programs Manager will provide instruction to the inmate on how to access the program services and will notify the affected facility staff about the inmate's scheduled attendance.

Inmates may also contact the Inmate Programs Manager at any time via an inmate message slip to request information regarding educational opportunities.

Inmates have the right to refuse to participate in programs other than work assignments or programs that are required by statute or court order.

#### 1005.8 SELF-STUDY PROGRAM

Whenever reasonably feasible, the basic educational program may be presented by self-study tutoring and videotape programming.

Inmates admitted into the GED program are issued the necessary books and supplies. Studying is done throughout the day at scheduled periods when videotape programming is presented on closed-circuit television.

Upon completion of a GED self-study program, the inmate may be given the opportunity to take the GED test.

#### 1005.9 HIGH-SECURITY/ADMINISTRATIVE SEGREGATION INMATES

To the extent reasonably practicable, high-security inmates and those held in administrative segregation may receive individual instruction in the form of a correspondence course.

#### 1005.10 REHABILITATION PROGRAM

The Office provides opportunities for rehabilitation programs that are based upon victim and community input and are fashioned in a way that gives the inmate an opportunity to make amends for the harm done.

The Sheriff and Facility Commander should work with other justice system partners to create such programs and opportunities. Examples include the following:

- Programs designed to deter domestic violence and substance abuse
- Community service, such as supervised public works projects
- Making restitution to victims
- Paying court fines

#### 1005.11 DISCLAIMER

Nothing in this policy is meant to confer a legal right for inmates to participate in any educational offering. Educational programming is provided at the sole discretion of the Sheriff and Facility Commander.

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Inmate Educational, Vocational and Rehabilitation Programs

#### 1005.12 CLASSROOM USE AND DESIGN

The demographics of the inmate population should always be considered when developing educational and other programs. Inmate classification and segregation requirements also need to be considered.

The Facility Commander should encourage and include educators in the set up and design of classrooms that have been identified for inmate education programs. To the extent reasonably possible, in consideration of the space design and the ability to provide adequate security, teachers, education managers and administrators should be consulted to ensure that their needs are met.

In addition to the traditional classroom approach to educational programming, there are several other delivery methods. These include independent study and computer education programs.

#### 1005.13 NEW CONSTRUCTION OR RENOVATION

Whenever construction of new facilities is considered, the Facility Commander may include education specialists during the design phase to ensure that the needs of education providers are met with regard to security, sound levels and educational equipment.

The Facility Commander may seek technical assistance from consultants to school districts that provide education programs in correctional settings. There are also networks of educators who can provide valuable consulting services in order to keep pace with rapidly evolving program and legislative issues that are related to education.

## **Commissary Services**

#### 1006.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a commissary program that will give inmates the opportunity to purchase specific items that are not provided to them while in custody.

#### 1006.2 POLICY

It is the policy of this office to provide commissary services so that inmates who are not on disciplinary restriction and who have funds posted to their inmate accounts may purchase items approved by the Facility Commander (Penal Code § 4025).

#### 1006.3 COMMISSARY ACCOUNTING

The Shift Supervisor shall be responsible for ensuring that all inmates who have commissary privileges have the opportunity to order and receive commissary items in a timely manner.

#### 1006.4 INMATE WELFARE PACKS

The Facility Commander or the authorized designee shall monitor the provision of welfare packs to indigent inmates. Welfare packs shall include but not be limited to:

- (a) At least two postage-paid envelopes and two sheet of paper each week to permit correspondence with family members and friends (see the Inmate Mail Policy).
- (b) Personal hygiene items, including toothbrush, toothpaste, soap, and other supplies deemed to be appropriate for indigent inmates.

The Sheriff may expend money from the Inmate Welfare Fund to provide indigent inmates with essential clothing and limited transportation expenses upon release (Penal Code § 4025(i)).

#### 1006.5 ANNUAL AUDIT OF THE COMMISSARY

The Commissary Manager should ensure that an annual audit of the commissary operation is conducted by a certified auditor. The written report prepared by the auditor should be reviewed for accuracy by the Commissary Manager and provided to the Facility Commander.

All surplus funds from the commissary operation should be deposited into the Inmate Welfare Fund or used in a manner from which the inmates will benefit. They also may be deposited and used in accordance with expenditures authorized by the board of supervisors. An itemized report on expenditures shall be submitted annually to the board of supervisors (Penal Code § 4025 (e)).

## **Library Services**

#### 1007.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for funding of library services and for providing incarcerated persons access to leisure and legal reading materials.

#### 1007.2 POLICY

It is the policy of this facility to operate a library service that provides leisure and legal reading materials to incarcerated persons.

#### 1007.3 RESPONSIBILITIES

The Facility Commander or the authorized designee is responsible for the administration of the library services and should appoint a capable member to serve as librarian to run the daily library operations. The library services shall include access via paper documents or through electronic media to legal reference materials, current information on community services and resources, and religious, educational, and recreational reading material (15 CCR 1064).

The librarian shall ensure that reading materials are provided to the general housing units and that any member assigned to assist with the delivery of library services has received the appropriate training in facility safety and security practices.

#### 1007.4 LIBRARY FUNDING AND MAINTENANCE

The Facility Commander should ensure that funding is available to operate the library. The Facility Commander may use monies from the Incarcerated Person Welfare Fund to offset the cost of salaries, services, and supplies. The librarian may enlist the assistance of the local public library system and other community organizations to maintain and update the library. Donated books and materials should be screened by the librarian for permissible content and safety prior to being distributed to incarcerated persons.

The Office may reject library materials that may compromise the safety, security, and orderly operation of this facility (see the Mail Policy for examples of materials that may be rejected).

The library shall be operated within the physical, budgetary, and security limits of the existing facility.

Books and other reading material should be provided in languages that reflect the population of the facility.

#### 1007.5 LEISURE LIBRARY MATERIALS

Each incarcerated person is allowed to have no more than two books at any given time. Existing selections must be returned before new books may be selected by an incarcerated person. Incarcerated persons who destroy or misuse books and library materials will be subject to disciplinary action and may be required to pay for the material.

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#### Library Services

#### 1007.6 LEGAL MATERIALS

All incarcerated persons shall have reasonable access to the legal system, which may include access to legal reference materials. Pro per incarcerated persons shall have priority regarding access to legal publications.

Legal information that may be provided through the library includes but is not limited to:

- Criminal code sections.
- Copies of criminal and/or civil cases.
- Copies of relevant judicial forms.

Incarcerated persons desiring access to the library or legal publications shall submit a completed legal information request to the housing deputy. Only one request per incarcerated person per week is allowed unless the inmate is a court-ordered pro per.

The housing deputy will collect completed request forms and deliver them to the librarian. Upon receipt the librarian will time stamp, log, and number the request and arrange for the incarcerated person to have access to the library or to legal research services if they are available and do not conflict with scheduling or security concerns. Records of access to legal materials and whether the requests were fulfilled or denied should be documented each day and maintained in the incarcerated person's file in accordance with established records retention schedules.

Pro per incarcerated persons may keep minimal supplies for their case in their cells (e.g., paper, letters, reference materials), provided they do not create a fire hazard or other safety or security concern.

#### 1007.7 ALTERNATE MEANS OF ACCESS TO LEGAL RESOURCES

Nothing in this policy shall confer a right to access a law library. Unless it is specified by court order, the Sheriff may provide access to legal resources by a variety of means that may include public or private legal research services (e.g., web-based legal resources).

#### 1007.8 ACCESS TO LIBRARY

Access to the incarcerated person library or to library materials shall be based on incarcerated person classification, housing location, and other factors that legitimately relate to maintaining the safety and security of the facility.

Incarcerated persons in disciplinary separation shall have the same access to reading materials and legal materials as the general population unless a restriction is directed by the court.



## Mail

#### 1008.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines for the receipt, rejection, inspection, and sending of incarcerated person mail.

#### 1008.2 POLICY

This office will provide ample opportunity for incarcerated persons to send and receive mail, subject to restriction only when there is a legitimate government interest.

#### 1008.3 MAIL GENERALLY

Incarcerated persons may, at their own expense, send and receive mail without restrictions on quantity, provided it does not jeopardize the safety of staff, visitors, or other incarcerated persons, or pose an unreasonable disruption to the orderly operation of the facility.

However, incarcerated persons are only allowed to store a limited amount of mail in their cells as determined by the Facility Commander. Excess mail will be stored with the incarcerated person's personal property and returned at the incarcerated person's release.

#### 1008.4 CONFIDENTIAL CORRESPONDENCE

Incarcerated persons may correspond confidentially with courts, legal counsel, officials of this office, elected officials, the Department of Corrections, jail inspectors, government officials, or officers of the court. This facility will also accept and deliver a fax or interoffice mail from these entities.

Foreign nationals shall have access to the diplomatic representative of their country of citizenship. Staff shall assist in this process upon request.

Facility staff may inspect incoming confidential correspondence for contraband. Facility staff may inspect outgoing confidential correspondence for contraband before it is sealed, provided the inspection is completed in the presence of the incarcerated person. In the event that confidential correspondence is inspected, staff shall limit the inspection to a search for physical items that may be included in addition to the correspondence and shall not read the content of the correspondence itself (15 CCR 1063(c)).

#### 1008.5 SUSPENSION/RESTRICTION OF MAIL PRIVILEGES

Mail privileges may be suspended or restricted upon approval of the Facility Commander whenever staff becomes aware of mail sent by an incarcerated person that involves (15 CCR 1083(f)):

- (a) Threats of violence against any member of the government, judiciary, legal representatives, victims, or witnesses.
- (b) Incoming or outgoing mail representing a threat to the security of the facility, staff, or the public.

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#### Mail

The District Attorney or County Counsel should be consulted in cases where criminal charges are considered against an incarcerated person or there is an apparent liability risk to the Office that relates to suspension or restriction of mail privileges.

#### 1008.6 PROCESSING AND INSPECTION OF MAIL BY STAFF

Staff should process incoming and outgoing mail as expeditiously as reasonably possible. All incoming and outgoing mail should be processed within 24 hours and packages within 48 hours. Mail processing may be suspended on weekends, holidays, or during an emergency situation.

Assigned deputies should open and inspect all incoming and outgoing general mail of current incarcerated persons. The incoming correspondence may be read as frequently as deemed necessary to maintain security or monitor a particular problem. Mail for incarcerated persons no longer in custody should not be opened.

Outgoing general mail may not be sealed by the incarcerated person and may be read by staff when:

- (a) There is reason to believe the mail would:
  - 1. Interfere with the orderly operation of the facility.
  - 2. Be threatening to the recipient.
  - 3. Facilitate criminal activity.
- (b) The incarcerated person is on a restricted mail list.
- (c) The mail is between incarcerated persons.
- (d) The envelope has an incomplete return address.

When mail is found to be inappropriate in accordance with the provisions of this policy or when an incarcerated person is sent material that is not prohibited by law but is considered contraband by the facility, the material may be returned to the sender or held in the incarcerated person's property to be given to the incarcerated person upon release.

Incarcerated persons are allowed to correspond with other incarcerated persons in this detention facility, as well as other jails or correctional institutions, as long as they pay for the mailing and the mailing is sent and received through the U.S. Postal Service.

Incarcerated persons shall be notified in writing whenever their mail is held or returned to the sender. Mail logs and records, justification of censoring or rejection of mail, and copies of hold or return notices shall be maintained in the incarcerated person's file in accordance with established records retention schedules.

Cash, government checks, and money orders contained in incoming incarcerated person mail shall be removed and credited to the incarcerated person's account. Personal checks may be returned to the sender or held in the incarcerated person's property to be given to the incarcerated person upon release.

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#### Mail

#### 1008.6.1 DESIGNATION OF STAFF AUTHORIZED TO READ MAIL

Only staff members designated by the Facility Commander are authorized to read incoming and outgoing non-confidential mail. These staff members should receive training on legitimate government interests for reading and censoring mail and related legal requirements (15 CCR 1063).

## 1008.6.2 CENSORSHIP OF INCOMING AND OUTGOING NON-CONFIDENTIAL CORRESPONDENCE

In making the determination of whether to censor incoming non-confidential correspondence, consideration shall be given to whether rejecting the material is rationally related to a legitimate government interest, and whether alternate means of communicating with others is available.

The impact the correspondence may have on other incarcerated persons and jail staff is also a factor. Reasonable alternatives should be considered and an exaggerated response should be avoided; for example, discontinuing delivery of a magazine because of one article.

Outgoing non-confidential correspondence shall only be censored to further a substantial government interest, and only when it is necessary or essential to address the particular government interest. Government interests that would justify confiscation of outgoing mail include:

- (a) Maintaining facility security.
- (b) Preventing dangerous conduct, such as an escape plan.
- (c) Preventing ongoing criminal activity, such as threats of blackmail or extortion, or other similar conduct.
- (d) Preventing harassment of those who have requested that no mail be sent to them by the incarcerated person.

Correspondence and material identified for censorship shall be delivered to the Shift Supervisor, who shall make the decision if such mail will be censored.

Notices should be sent to the sender of censored correspondence or publications, even when the sender is the editor or publisher. A single notification may be sent if the publication is received by multiple incarcerated persons.

#### 1008.6.3 DOCUMENTING REJECTED OR CENSORED CORRESPONDENCE

In each case where it is necessary to remove any item, or reject or censor correspondence, a written record must be made of such action, to include:

- (a) The incarcerated person name and number.
- (b) A description of the mail in question.
- (c) A description of the action taken and the reason for such action.
- (d) The disposition of the item involved.
- (e) Signature of the deputy.

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#### Mail

(f) Notification to the incarcerated person and sender (unless such notification jeopardizes any investigation or the security of the facility).

#### 1008.7 BOOKS, MAGAZINES, NEWSPAPERS, AND PERIODICALS

Unless otherwise in conflict with this policy and prohibited by the Facility Commander, incarcerated persons are permitted to purchase, receive, and read any book, newspaper, periodical, or writing accepted for distribution by the U. S. Postal Service (15 CCR 1066(a)).

Publications, magazines, or newspapers shall be accepted only if they are mailed directly from the publisher to a named incarcerated person. A current newspaper in general circulation or other like source, including a non-English alternative shall be made available to interested people (15 CCR 1066(a)).

#### 1008.8 REJECTION OF MAGAZINES AND PERIODICALS

The Office may reject magazines, periodicals, and other materials that may inhibit the reasonable safety, security, and discipline in the daily operation of this facility. Generally, books, newspapers, and magazines are accepted only if they are sent directly by the publisher. Materials that may be rejected include but are not limited to (15 CCR 1066(a)):

- Materials that advocate violence or a security breach.
- Literature that could incite racial unrest.
- Sexually explicit material, including pornographic magazines, nude pictures, or pictures or descriptions of sexually explicit activities.
- Obscene publications or writings and mail containing information concerning where
  or how such matter may be obtained; any material that would have a tendency to
  incite murder, arson, riot, violent racism, or any other form of violence; any material
  that would have a tendency to incite crimes against children; any material concerning
  unlawful gambling or an unlawful lottery; any material containing information on the
  manufacture or use of weapons, narcotics, or explosives or any other unlawful activity.
- Material that could lead to sexual aggression or an offensive environment for incarcerated persons.
- Material that could create a hostile or offensive work environment.
- Any material with content that could reasonably demonstrate a legitimate government interest in rejecting the material.

Staff shall notify the Shift Supervisor whenever a decision is made to reject books, magazines, or periodicals. The Facility Commander or the authorized designee will be responsible for making the final decision as to the specific magazines, periodicals, and other materials that will be prohibited within this facility.

Religious texts not supplied by facility-authorized entities may be accepted by the chaplain or other religious volunteer who has received training on facility rules involving contraband, and who has been approved by a supervisor to review such documents for distribution.

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Mail

#### 1008.9 FORWARDING OF MAIL

Any mail received for a former inmate should be returned to the sender with a notation that the inmate is not in custody.

# **1008.10 INDIGENT INCARCERATED PERSONS REQUESTS FOR WRITING MATERIALS** Indigent incarcerated persons shall receive writing materials on a weekly basis, as provided by an approved schedule established by the Facility Commander. Writing materials should include the following (15 CCR 1063):

- (a) At least four pre-stamped envelopes for correspondence with family and friends
- (b) At least eight sheets of writing paper
- (c) One pencil

Indigent incarcerated persons shall receive an amount of pre-stamped envelopes and writing paper sufficient to maintain communication with courts, legal counsel, officials of this office, elected officials, jail inspectors, government officials, and officials of the Board of State and Community Corrections. There shall be no limitation on the number of postage-paid envelopes and sheets of paper permitted for correspondence to the indigent incarcerated person's attorney and to the courts (15 CCR 1063(e)).

Requests shall be screened and granted based on need by the Programs Coordinator. Incarceratedpersons should not be permitted to maintain an excess supply of writing materials without the approval of a supervisor.

## **Telephone Access**

#### 1009.1 PURPOSE AND SCOPE

This policy establishes guidelines for permitting incarcerated persons to access and use telephones.

#### 1009.2 POLICY

The Detention Facility will provide access to telephones for use by incarcerated persons consistent with federal and state law. The Facility Commander or the authorized designee shall develop written procedures establishing the guidelines for access and usage (15 CCR 1067). All incarcerated persons will be shown the telephone usage rules as part of their incarcerated person orientation during the booking process and at their assigned housing unit (PC851.5, 15 CCR 1069).

#### 1009.3 PROCEDURE

Incarcerated persons housed in general population will be permitted reasonable access to public telephones at scheduled times in the dayrooms for collect calls unless such access may cause an unsafe situation for the facility, staff, or other incarcerated persons. The Facility Commander shall ensure a notice is conspicuously posted near the phones, informing incarcerated persons that non-attorney calls may be monitored and recorded.

Incarcerated persons are not permitted to receive telephone calls. Messages will only be delivered in the event of a verified emergency.

In the event of a facility emergency, or as directed by the supervisor or the Facility Commander, all telephones will be turned off.

For security reasons, incarcerated persons who are awaiting transport to another facility or release to another agency are not permitted to use the telephones.

Teletypewriter or other communication devices (e.g., videophones, third-party communications assistant) will be made available to persons who are known to have, or are perceived by others as having, hearing or speech impairments to allow them equivalent telephone access as those without these disabilities (15 CCR 1067).

Except where there are substantial reasons to justify such phone use limitations, reasons for denial of telephone access shall be documented and a copy placed into the incarcerated person's file. The rules governing the use of the telephone will be posted near the telephones.

The staff should monitor the use of public telephones to ensure incarcerated persons have reasonable and equitable access and that the rules of use are observed. Any incarcerated persons refusing to cooperate with the telephone rules may have their call terminated, telephone privileges suspended, and/or incur disciplinary action.

Requirements relating to the use of telephones during booking and reception are contained in the Reception Policy.

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#### Telephone Access

## 1009.4 USE OF TELEPHONES IN HIGH-SECURITY OR ADMINISTRATIVE SEPARATION HOUSING

Incarcerated persons who are housed in high-security or administrative separation may use the public telephones in the dayroom during the time allocated for that classification of incarcerated person to utilize that space. If portable telephones are available in the facility, persons who are housed in high-security or administrative separation units may have reasonable access to the portable telephones.

#### 1009.5 COURT-ORDERED TELEPHONE CALLS

If a court order specifying free telephone calls is received by the facility, or a supervisor determines there is a legitimate need for a free telephone call for a specific incarcerated person, the supervisor may direct that a person use a facility telephone at no charge. Calls placed from a facility telephone should be dialed by a staff member. The staff shall be responsible for ensuring that the incarcerated person is not calling a number that has been restricted by a court order or by request of the recipient. Such a call shall be recorded to the same extent authorized for calls that are not court-ordered.

#### 1009.6 ATTORNEY-CLIENT TELEPHONE CONSULTATION

At all times through the period of custody, whether the incarcerated person has been charged, tried, convicted, or sentenced, reasonable and non-recorded telephone access to an attorney shall be provided to the person at no charge to either the attorney or to the incarcerated person, in accordance with the Access to Courts and Counsel Policy.

#### 1009.7 TELEPHONE CONTRACTS AND CHARGES

The Facility Commander or the authorized designee is responsible for ensuring that rates charged to incarcerated persons are similar to those charged to the general public and that incarcerated persons are afforded a range of feasible calling options.

## **Inmate Video Visitation**

#### 1010.1 POLICY & SCOPE

It is the policy of the Tulare County Sheriff's Office to permit inmates to have visits with family, friends, attorneys, and other professionals under conditions that are consistent with the security of the facility.

It is in the penological interest of the Tulare County Sheriff's Office to provide reasonable and necessary security and safety standards, control, supervision, and oversight of inmates while receiving authorized visitors.

#### 1010.2 PROCEDURE

The Facility Lieutenant is responsible for the operation of the video visitation program. Visitation regulations include regular scheduling of visits at times that ensure reasonable access to inmates by family, friends, and others in the community. This is accomplished by off-site and on-site video visitation for members of the public and for off-site video visitation and in person on-site visits for attorneys and other professional visitors.

The Department has established limits to the length of visits by members of the public to allow reasonable access to all inmates and in consideration of other relevant factors. Attorney and other professional visits may be scheduled separately. Notice is given to visitors regarding restrictions and visiting regulations when establishing an account for purposes of video visitation and is posted for professional visits that occur in person on-site. This information is also included in the Inmate Handbook.

#### 1010.3 VISITOR APPROVAL

Upon establishing an account for video visitation, the visitor must be approved by the Tulare County Sheriff's Department staff prior to any visitation. The Facility Commander may authorize, for good cause, emergency visits beyond or in addition to normal visiting hours. Person(s) believed by substantial evidence to have a potentially detrimental effect on the inmate or to constitute a threat to security of the facility will be denied.

#### 1010.4 PUBLIC VISITING REGULATIONS VIDEO VISITATION

- (a) All inmates are allowed a minimum of three (3) twenty minute visits per week. Inmates are not required to utilize their minimum allowed time. If an inmate does not utilize their minimum allowed time for the week, the unused time does not carry over to the following week. The week is counted from Monday through Sunday.
- (b) Visiting regulations will be posted in a place accessible to the inmate and the public.
- (c) On-site video visitors shall be required to show current and valid photo ID when requesting approval for visitation. If a visitor cannot produce current valid ID, the authorization to visit will be denied.

Valid forms of ID are:

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#### Inmate Video Visitation

- Driver's license form any state (temporary driver's licenses will be allowed along with photo ID)
- Photo ID card from any state (temporary State ID's will not be allowed)
- Matricula Counsular ID
- Military or Military dependent ID
- Passport

(All of the above forms of valid ID require photograph or fingerprints and have issue dates and expiration dates.)

#### 1010.5 VIDEO VISITATION GENERAL RULES FOR THE GENERAL PUBLIC

Participation in video-visitation is a privilege, not a right. Both visitor and inmate are expected to conduct themselves in an appropriate fashion at all times during a video visit.

The Tulare County Sheriff's Department reserves the right to deny, cancel, or terminate a video visit prior to or during a video session based upon a visitor or resident inmate's misconduct. The Tulare County Sheriff's Department reserves the right to restrict visitors from participating in all future use of the system.

All video visits with the general public are recorded and subject to monitoring by the Tulare County Sheriff's Department personnel. Use of the video visitation system constitutes consent to this recording and monitoring.

- No nudity, tight fitting or provocative clothing will be allowed during the visit. Violators will be barred from off-site and on-site video visitation.
- Visitors appearing to be under the influence of alcohol or drugs; displaying items that may be considered contraband such as drugs, drug paraphernalia, weapons; or displaying gang signs, symbols, colors, etc., are subject to having the visit cancelled and barred from future visits.
- Visitors under the age of 18 must have a parent or guardian present during the visit.
- Any type of provocative or disruptive behavior will not be permitted.

#### 1010.5.1 SCHEDULING AND AVAILABILITY

Members of the general public must schedule a visit at least 24 hours in advance. Any off-site video visits must be paid for in advance prior to the visitation session. Visits can be scheduled in advance by the visitor from the GTL Video Visit Website at https://gtlvisitme.com or at our Scheduling Kiosks located at the Tulare County Main Jail or Bob Wiley Detention Facility. All on site video visitation by the general public will take place at either Main Jail or Bob Wiley facilities.

If any problems are experienced with the audio or video reception during your visit, please refer to the GTL Video Visitation web site for assistance.

1010.5.2 MAIN JAIL VIDEO VISITATION HOURS Internet Video Visits:

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## Inmate Video Visitation

8:00 a.m. to 10:00 p.m. (Monday-Sunday) (Pacific Time)

## 1010.5.3 BOB WILEY VIDEO VISITATION HOURS

Internet Video Visits:

7:45 a.m. to 11:35 a.m / 1:00 p.m. to 5:00 p.m. / 8:00 p.m. to 10:00 p.m. (Monday-Sunday) (Pacific Time).

## 1010.5.4 MEN'S CORRECTIONS AND ADULT PRE-TRIAL FACILITY VIDEO VISITATION HOURS

Internet Video Visits:

7:45 a.m. to 11:35 a.m / 1:00 p.m. to 5:00 p.m. / 8:00 p.m. to 10:00 p.m. (Monday-Sunday) (Pacific Time).

## 1010.5.5 SOUTH COUNTY DETENTION FACILITY

On-site Video Visitation Hours:

7:45 a.m. to 11:35 a.m. / 1:00 p.m. to 5:00 p.m.

Internet Video Visitation:

8:00 p.m. to 10:00 p.m.

#### 1010.5.6 SCHEDULING INFORMATION

All video visits must be scheduled at least one day in advance, but no more than one week in advance.

During video visits, the Correctional Staff will periodically monitor the visiting activity.

Video visitors with disabilities will be afforded the same visiting privileges as other visitors.

## 1010.6 DENIAL OR TERMINATION OF A VIDEO VISIT

Any violation of the visiting regulations by either the inmate or visitor can result in the immediate termination of the visit and the loss of the inmate's and/or the visitor's visiting privileges. If the inmate is found to be culpable in violation, disciplinary action may also be taken. A visit may be denied or terminated and visiting privileges suspended under the following circumstances:

- (a) Visitors under the influence of drugs or alcohol
- (b) Violation of Correctional Facility rules, including this policy, by visitor or inmate
- (c) Inappropriate displays of affection, suggestive activity, or inappropriate dress
- (d) Failure to comply with any direction from the staff; and/or other conduct or condition deemed by the Facility Commander to be dangerous or disruptive to visiting operations or to security and good order.

Any denial will be documented in the comment section in ADSI that articulates a specific reason for the visitation denial as well as approving supervisor.

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## Inmate Video Visitation

#### 1010.7 VISITING CONDITIONS

Visits will be monitored by staff. Visits will be at pre-determined times and last up to twenty (20) minutes. Longer visits may be approved by the Facility Commander for special circumstances.

## 1010.8 PROFESSIONAL VISITS

- (a) Professional visits include visits by legal personnel, Parole Officers, Probation Officers and clergy members; they will be allowed at the discretion of the On-Duty Sergeant. These visitors will also need to establish an account for video visitation.
- (b) Professional visits should be conducted during normal business hours. If this is not possible, individuals shall be referred to the On-Duty Sergeant to make other arrangements.
- (c) Visitors must possess valid identification from their respective agency and a California Driver's License or other valid picture ID.
- (d) With the approval of management, professionals may have contact visit privileges.
- (e) Professional visits will not count as a daily visit.

## 1010.8.1 PROFESSIONAL VIDEO VISITING GUIDELINES

- 1. All persons wishing to participate in a professional video visit, shall register with the approved video visitation vendor. Following all protocols and directives of the vendor for their registration.
- Once the account has been created the video visitation unit shall be responsible for verifying all credentials and making the accounts "professional". If any person does not comply with all guidelines sent out by this office, they will not be allowed to participate in video visiting.
- 3. Each person must have a verifiable account registered in their name. Only the registered person shall be authorized to utilize their account.
- 4. Any Attorney registering for an account shall provide:
  - (a) Copy of a letter on their Firm or Offices official letterhead, stating they are the attorney of record for the inmate being visited.
  - (b) Copy of their current active Bar Card.
  - (c) Copy of a Valid Driver's License or Identification Card.
- 5. Once this has been obtained and verified, the information will be kept in the visiting unit as well as on the "E" Drive under the "GTL Professional Visiting" folder.
  - (a) Each attorney will have a folder with their information and copies of all letters
- 6. If an investigator or other authorized person is to visit as a professional visitor. They will comply with above directive and
  - (a) The attorney of record shall supply a letter on their official letterhead authorizing them to visit their client.
  - (b) Copy of valid driver's license or identification card.

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## Inmate Video Visitation

- (c) Copy of any professional license (IE investigators license.)
- 7. Once the above has been met, and the professional accounts have been created. The visitors may sign up for visit.
  - 1. The visits shall be signed up for 24 hours in advance to allow time to verify accounts, credentials and if the inmate is agreeing to see said persons.
- 8. Once a visit has been scheduled and approved:
  - (a) Staff shall verify the authorization letters and credentials in the E Drive.
  - (b) Staff shall provide the inmate the "inmate authorization form" and have them fill it out. Staff will advise who the attorney is and ask if they wish to meet with them. This form will be scanned and saved into the proper folder on the E Drive. This only needs to be completed the first visit for that particular attorney. If a second attorney wishes to visit then a second form must be completed.
  - (c) Prior to allowing visit to occur the staff escorting the inmate to the device, shall ask the person visiting to physically verify their ID and Professional licensure by holding said cards up for them to read.
  - (d) Once the staff have verified the visitors identity, the visit may proceed.

## 1010.9 LEGAL VISITS

Legal personnel are defined as peace officers, attorneys, legal aides, legal clerks, private investigators and paralegals. Legal personnel shall have unlimited visitation with inmates. Legal personnel shall be required to sign in to visit inmates and provide proper identification. Contact the On-Duty Sergeant if the visitor is unable to provide proper identification. Recording equipment, cameras and purses shall not enter the facility without the permission of the Facility Commander. Inmates may refuse any legal visit.

The following legal visitors will be required to show specific ID listed below:

- Attorneys: Correctional staff shall check identification and confirm the legal status of the visiting attorney. They must possess a California State Bar card and a valid state driver's license or picture ID card.
- Legal Aides / paralegals: Correctional staff shall check identification and confirm the legal status of the aide/paralegal. They must possess a letter of authorization from a law firm and a valid state driver's license or picture ID card.
- Private Investigators: Correctional staff shall check identification and confirm the legal status of the private investigator. They must have a private investigator's credential issued by the Department of Consumer affairs and a valid state driver's license or picture ID card.
- Peace Officers: Correctional staff shall check the peace officer's agency identification card. All weapons must be placed in a gun locker before the peace officer enters the facility for an onsite visit.

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Inmate Video Visitation

#### 1010.10 VISITATION RELATED TO LEGAL DEFENSE

Visits with inmates that are related to legal defense, including attorneys, paralegals and investigators, will be permitted only in the areas designated for legal video visitation or by way of the housing unit's video visitation to assure confidentiality (15 CCR 1068(b)). Contact visits related to legal defense are to take place in the area designated for legal visitation. If there are any special circumstances relating to the contact visit, the visit may be approved by the Facility Commander.

- (a) Visits shall be of reasonable length of time to discourage any allegation the defense of the inmate was hindered due to the length of time allowed for the legally authorized visit. These visits shall be of such length of time that they do not interfere with the security, order and discipline of this facility. The permissible time for visitation should be flexible but shall not interfere with other facility schedules, such as medical examinations, meal service or other required activities.
- (b) Only materials brought to this facility by an approved legal assistant shall be allowed.
- (c) All materials shall be subject to security inspections by the staff and shall be routed through the Shift Supervisor for logging and distribution.

## 1010.11 RECORDING INMATE COMMUNICATIONS

California Penal Code § 636 prohibits the eavesdropping or recording of conversation between a prisoner and attorney, religious advisor, or physician. The inmate and attorney confidentiality will include any investigator representing the attorney. These conversations are strictly confidential and will not be monitored and recorded.

California Penal Code § 632(e) authorizes eavesdropping or recording confidential communications within a state, county, city and county, or city correctional facility. The courts have long held that with few exceptions, there are no exceptions to communication privacy within a correctional facility, except those outlined above.

Electronic surveillance or recording of inmate communication, within the confines of The Tulare County Sheriff's Office, is permitted.

## **Visitation**

## 1011.1 PURPOSE AND SCOPE

The purpose of this policy is to establish rules for visitation and to provide a process for incarcerated person visits and visitors. Visitation is a privilege and is based on space availability, schedules, and on-duty staffing.

## 1011.1.1 DEFINITIONS

Definitions related to this policy include (Penal Code § 4032):

**In-person visit** - An on-site visit that may include barriers. In-person visits include interactions in which an incarcerated person has physical contact with a visitor, the incarcerated person is able to see a visitor through a barrier, or the incarcerated person is otherwise in a room with a visitor without physical contact. "In-person visit" does not include an interaction between an incarcerated person and a visitor through the use of an on-site two-way audio/video terminal.

**Video visitation** - Interaction between an incarcerated person and a member of the public through the means of an audio-visual communication device when the member of the public is located at a local detention facility or at a remote location.

## 1011.2 POLICY

It is the policy of the Tulare County Sheriff's Office to allow incarcerated person visitation, including video visitation when applicable, as required by law.

## 1011.3 PROCEDURES

The Office shall provide adequate facilities for visiting that include appropriate space for the screening and searching of incarcerated persons and visitors and storage of visitors' personal belongings that are not allowed in the visiting area.

The Facility Commander shall develop written procedures for incarcerated person visiting, which shall provide for as many visits and visitors as facility schedules, space, and number of personnel will reasonably allow, with no fewer visits allowed than specified by 15 CCR 1062 per week, by type of facility. The procedures are subject to safety and security requirements and should consider:

- The facility's schedule.
- The space available to accommodate visitors.
- Whether an emergency or other conditions justify a limitation in visiting privileges.
- Video visitation if applicable (Penal Code § 4032; 15 CCR 1062).

The visiting area shall accommodate incarcerated persons and visitors with disabilities. Visitors with disabilities who request special accommodations shall be referred to a supervisor. Reasonable accommodations will be granted to incarcerated persons and disabled visitors to facilitate a visitation period.

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## Visitation

Visitor logs and records shall be developed and maintained in accordance with established records retention schedules.

Court orders granting a special incarcerated person visitation are subject to county legal review and interpretation.

## 1011.3.1 VISITOR REGISTRATION AND IDENTIFICATION

All visitors must register and produce a valid state, military, tribal, or other government identification. Identification will be considered valid for 90 days after expiration, provided the visitor has renewed the ID and has proof of the renewal.

- (a) The registration form must include the visitor's name, address, and the relationship to the incarcerated person.
- (b) A valid identification shall include the following:
  - 1. A photograph of the person
  - 2. A physical description of the person
- (c) An official visitor shall present proof of professional capacity. For example, attorney license/Supreme Court card, law enforcement identification, or a business card/ letterhead of the business with the visitor's name.

Failure or refusal to provide a valid identification is reason to deny a visit.

## 1011.3.2 VIDEO VISITATION NOT TO REPLACE IN-PERSON VISITATION

The Office may not substitute video visitation for in-person visitation to meet the requirements of 15 CCR 1062.

The South County Detention Facility is the only facility designed without in-person visitation space. (15 CCR 1062 (f)).

## 1011.4 AUTHORIZATION TO SEARCH VISITORS

Individuals who enter the secure perimeter of this facility are subject to search if there is reasonable cause to believe the visitor has violated the law, is wanted by a law enforcement agency, or is attempting to bring contraband onto the facility property or into the facility. All searches shall be made in accordance with current legal statutes and case law.

The area designated for a visitor to be searched prior to visiting with an incarcerated person shall have a notice posted indicating that any cellular telephone, wireless communication device, or any component thereof shall be confiscated for the period of the visitation and returned to the visitor upon departure from the facility (Penal Code § 4576(b)(3)).

## 1011.5 VISITING SCHEDULE

The Facility Commander shall designate a person to develop a schedule for incarcerated person visitation that includes daytime, evening, and weekend hours. Each incarcerated person shall receive a copy of the visitation schedule in the incarcerated person handbook at orientation. The visiting hours will also be posted in the public area of the facility.

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## Visitation

#### 1011.6 DENIAL OR TERMINATION OF VISITING PRIVILEGES

The Facility Commander or the authorized designee is responsible for defining, in writing, the conditions under which visits may be denied.

Visitation may be denied or terminated by a supervisor if the visitor poses a danger to the security of the facility or there is other good cause (15 CCR 1062). Danger to the security of the facility or other good cause includes but is not limited to the following:

- (a) The visitor appears to be under the influence of drugs and/or alcoholic beverages.
- (b) The visitor refuses to submit to being searched.
- (c) The visitor or incarcerated person violates facility rules or posted visiting rules.
- (d) The visitor fails to supervise and maintain control of any minors accompanying the visitor into the facility.
- (e) Visitors attempting to enter this facility with contraband will be denied a visit and may face criminal charges.

Any visitation that is denied or terminated early, on the reasonable grounds that the visit may endanger the security of the facility, shall have the actions and reasons documented. A copy of the documentation will be placed into the incarcerated person's file and another copy will be forwarded to the Facility Commander (15 CCR 1062).

## 1011.7 GENERAL VISITATION RULES

All visitors and incarcerated persons will be required to observe the following general rules during visitation:

- (a) A maximum of two adults and two children will be permitted to visit an incarcerated person at any one time. Children visiting incarcerated persons must be deemed age appropriate by the parent or guardian accompanying the child. Where a dispute over children visiting occurs between the incarcerated person and the parent or legal guardian, the incarcerated person will be advised to use the court for resolution. Adults must control minors while they are waiting to visit and during the visit.
- (b) An incarcerated person may refuse to visit with a particular individual.
- (c) Those incarcerated persons who are named as the restrained person in any restraining or other valid court order shall not be allowed visits from persons who are protected by the order.
- (d) Visitors must be appropriately attired prior to entry into the visitor's area of the facility.
- (e) Inappropriate clothing, such as transparent clothing, halter-tops, excessively tight or revealing clothing, hats and bandannas, or any other clothes associated with a criminal gang or otherwise deemed by the staff to be unacceptable, will not be permitted.
- (f) All visitors must have footwear.
- (g) Visitors will leave all personal items, with the exception of car keys and identification, outside of the secure area. Visitors who enter the facility with handbags, packages, or

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other personal items will be instructed to lock the items in a vehicle or locker or return at another time without the items. The facility is not responsible for lost or stolen items.

- (h) Food or drink is not permitted in the visitor's area.
- Incarcerated persons will be permitted to sign legal documents, vehicle release forms, or any other items authorized by the Shift Supervisor. Transactions of this nature will not constitute a regular visit.

#### 1011.8 SPECIAL VISITS

The Shift Supervisor may authorize special visitation privileges, taking into consideration the following factors:

- The purpose of the visit
- The relationship of the visitor to the incarcerated person
- The circumstances of the visit
- Distance traveled by the visitor

Whenever a special visit is denied, an entry into the duty log will be made. The entry will include the requesting visitor's name and the reason why the visit was denied.

## 1011.9 ATTORNEY VISITS

Incarcerated persons shall have access to any attorney retained by or on behalf of the incarcerated person, or to an attorney the incarcerated person desires to consult, in a private interview room. Staff shall not interfere with, suspend, or cancel official visits except in circumstances where the safety, security, or good order of the facility is compromised (see the Incarcerated Person Access to Courts and Counsel Policy).

## **Inmate Work Program**

## 1012.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the guidelines and requirements for the Inmate Work Program. The Inmate Work Program allows inmates to improve and/or develop useful job skills, work habits and experiences that will facilitate a successful return to the community.

## 1012.2 POLICY

The Tulare County Sheriff's Office shall operate an Inmate Work Program in such a way that the operation of inmate work programs do not pose a risk to the safety of the staff, other inmates or the public.

## 1012.3 LEGAL REQUIREMENTS

## 1012.3.1 SENTENCED INMATE WORK REQUIREMENTS

All inmates who are physically and mentally able may work if they are not assigned to other programs. Inmates shall not be required to perform work which exceeds their physical limitations. Inmates may be excused from work in order to maintain their participation in an educational, vocational or drug abuse treatment program.

## 1012.4 INMATE WORKER SELECTION

The facility supervisor shall be responsible for the selection and assignment of inmates to the various work assignments. The supervisor should solicit input from other custody staff in assisting with inmate selection and assignment. The Staff also shall take into consideration the following eligibility criteria:

- (a) Inmates who have posed a threat in the past or have been charged with escape should be carefully screened for inmate work projects.
- (b) The inmate's charges and classification are such that the inmate will not pose a security risk to other inmates, staff or the public.
- (c) The inmate's capacity to perform physical tasks will match the job requirements.
- (d) The inmate is able to learn the necessary work routines.
- (e) The special interests, abilities, craft or trade of the inmate will benefit the work assignment.

Inmates must be able to pass a health screening test in accordance with the policies contained in this manual, and must meet all statutory and regulatory requirements. Health-screening shall be done for inmates who work in the kitchen, around food products or who serve meals to the inmate population.

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## Inmate Work Program

#### 1012.5 WORK ON PUBLIC PROJECTS

Sentenced inmates may be assigned to public works projects with state, municipal and local government agencies, or to community service projects, with the approval of the Sheriff and in accordance with all applicable laws and regulations.

## 1012.6 PROHIBITION OF NONPUBLIC WORK PROJECTS

Work projects on behalf of any private individual or to an individual's private property are strictly prohibited and may constitute a violation of the law.

## 1012.7 SUPERVISION OF INMATE WORKERS

Facility staff in charge of work programs or who provide supervision of inmates assigned to work crews should adhere to the following:

- (a) Inmate workers should be provided with safety equipment, clothing and footwear commensurate with the work performed. Safety equipment may include, but is not limited to, eye protection, gloves, hardhat or headwear and sunscreen for protection from sun exposure.
- (b) Work periods shall not exceed nine 10 hours per day (except in emergency situations).
- (c) Inmate workers should be provided with work breaks to allow them to take care of personal needs.
- (d) Inmate workers shall have access to nutritious meals and a reasonable amount of time to consume those meals during their work period.
- (e) Inmates who work shifts during the early morning or late-night hours should be provided with quiet space to allow for sleep during daytime hours.
- (f) The inmate workday approximates the workday in the community.
- (g) Inmate performance is regularly evaluated and recorded.

Inmate workers shall be under the supervision of the facility staff at all times when they are on assignment through the Inmate Work Program.

Persons who are responsible for the supervision of inmates on work crews should receive training in basic areas of safety, security and reporting procedures.

Disciplinary action for inmate worker misconduct shall adhere to the Inmate Discipline Policy.

## 1012.8 INMATE WORKER TRAINING

Inmates who are assigned to work in any area that may require the handling of any chemicals or the use of any equipment shall receive training from the respective office supervisor prior to using the chemicals or equipment. Work-crew supervisors shall also train inmate workers on safety practices. Inmates should never be assigned to handle dangerous chemicals or equipment that normally require a level of expertise and competency beyond their demonstrated ability.

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## Inmate Work Program

## 1012.9 INMATE WORKER INCENTIVES

The Facility Commander is responsible for establishing a recognition program for inmates assigned to the Inmate Work Program. Recognition of inmates can be observed in the following ways:

- (a) Granting "Good Time and Work" credits as allowed by state or local law.
- (b) Using credits for sentence reduction when allowed by statute.
- (c) Granting special housing, extra privileges, recreation and special rewards, as allowed by law regulation and policy. Inmate welfare funds may be used to offset the cost of a reward program.

## **Religious Programs**

## 1013.1 PURPOSE AND SCOPE

This policy provides guidance regarding the right of inmates to exercise their religion and for evaluating accommodation requests for faith-based religious practices of inmates (15 CCR 1072).

## 1013.1.1 DEFINITIONS

Definitions related to this policy include:

**Compelling government interest** - A method for determining the constitutionality of a policy that restricts the practice of a fundamental right. In order for such a policy to be valid, there must be a compelling government interest, which is necessary or crucial to the mission of the Office, as opposed to something merely preferred, that can be furthered only by the policy under review.

**Least restrictive means** - A standard imposed by the courts when considering the validity of policies that touch upon constitutional interests. If the Office adopts a policy that restricts a fundamental religious liberty, it must employ the least restrictive measures possible to achieve its goal.

**Religious exercise** - Any exercise of religion, whether or not it is compelled by, or central to, a system of religious belief. The key is not what a faith requires but whether the practice is included in the inmate's sincerely held religious beliefs.

**Substantial burden** - For the purposes of this policy, substantial burden means either of the following:

- A restriction or requirement imposed by the Office that places an inmate in a position
  of having to choose between following the precepts of his/her religion and forfeiting
  benefits otherwise generally available to other inmates, or having to abandon one of
  the precepts of his/her religion in order to receive a benefit.
- The Office puts considerable pressure on an inmate to substantially modify his/her behavior in violation of his/her beliefs.

## 1013.2 POLICY

It is the policy of this office to permit inmates to engage in the lawful practices and observances of their sincerely held religious beliefs consistent with the legitimate governmental objectives of the facility.

#### **1013.3 CHAPLAIN**

The Sheriff shall appoint an individual to serve as the chaplain for the facility. The chaplain shall be responsible for assisting the Facility Commander with supervising, planning, directing and coordinating religious programs. The chaplain may be responsible for duties including, but not limited to:

(a) Coordinating religious services.

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## Religious Programs

- (b) Maintaining a list of accepted religious practices that have been approved by the Facility Commander and ensuring the current list is available to the staff.
- (c) Reviewing requests for religious accommodations.
- (d) Providing or arranging for grief counseling for inmates.
- (e) Distributing a variety of religious texts.
- (f) Developing and maintaining a liaison with a variety of religious faiths in the community.
- (g) Making reasonable efforts to enlist religious leaders from outside the community as necessary.
- (h) Seeking donations for religious programs from the community, when appropriate.
- (i) Working with inmate families when requested.
- (j) Periodically surveying the facility population to assist in determining whether current resources are appropriate for the inmate population.
- (k) Providing guidance to the Sheriff and the Facility Commander on issues related to religious observance.

## 1013.4 RELIGIOUS BELIEFS AND ACCOMMODATION REQUESTS

Inmates are not required to identify or express a religious belief. An inmate may designate any belief, or no belief, during the intake process and may change a designation at any time by declaring his/her religious belief in writing to the chaplain. Inmates seeking to engage in religious practices shall submit a request through the established process. Requests to engage in practices that are on the facility's list of accepted practices should be granted. Requests to engage in religious practices that are not on the approved list shall be processed as provided in this policy.

All requests for accommodation of religious practices shall be treated equally, regardless of the religion that is involved. Equal and consistent treatment of all religions and religious beliefs shall not always require that all inmates of the same religion receive the same accommodations. Requests for accommodation of religious practices shall be submitted to a supervisor. In determining whether to grant or deny a request for accommodation of a religious practice, the supervisor will work with the chaplain to determine the sincerity of the religious claim of an inmate. Requests should be denied only if the denial or reason for denial would further a compelling interest of the facility and is the least restrictive means of furthering that compelling interest.

A supervisor who does not grant the accommodation, either in part or in full, should promptly forward the request to the Facility Commander, who, after consultation with legal counsel as appropriate, should make a determination regarding the request within 10 days following the inmate's request.

A Facility Commander who does not grant an accommodation, either in part or in full, should forward the request to the Sheriff with the basis for the denial within 14 days of the inmate's original

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## Religious Programs

request being made. The Sheriff or the authorized designee will review the denial and respond to the requesting inmate as soon as reasonably practicable.

The Facility Commander and the Sheriff shall be informed of all approved accommodations. The chaplain should make any necessary notifications to staff as necessary to meet an approved accommodation.

All inmate requests for religious accommodations and related determinations shall be fully documented in the inmate's record.

## 1013.4.1 SUSPENSION OR REVOCATION OF ACCOMMODATIONS

In an emergency or extended disruption of normal facility operations, the Facility Commander may suspend any religious accommodation. The Facility Commander may also revoke or modify an approved religious accommodation if the accommodated inmate violates the terms or conditions under which the accommodation was granted.

1013.4.2 APPEALS OF SUSPENSION OR REVOCATION OF ACCOMMODATIONS Inmates may appeal the Facility Commander's denial, suspension or revocation of an accommodation through the inmate appeal process.

#### 1013.5 DIETS AND MEAL SERVICE

The Facility Commander should provide inmates requesting a religious diet, including fasting and/ or hour of dining, a reasonable and equitable opportunity to observe their religious dietary practice. This should be done within budgetary constraints and be consistent with the security and orderly management of the facility. The chaplain shall provide a list of inmates authorized to receive religious diets to the food services manager. The food services manager shall establish a process for managing religious meal accommodations.

## 1013.6 HAIRSTYLES AND GROOMING

Unless it is necessary for the health and sanitation of the facility, inmates who wear head and facial hair in the observance of their religion will generally not be required to shave or cut their hair. To the extent reasonably practicable, alternative housing may be considered to accommodate the need for religious hair and grooming, while meeting the health and sanitation needs of the facility.

Any inmate whose appearance is substantially altered due to changes in facial hair or hair length may be required to submit to additional identification photographs.

## 1013.7 RELIGIOUS TEXTS

Religious texts should be provided to the requesting inmate, if the texts available do not pose a threat to the safety, security and orderly management of the facility.

Religious texts should be requested through the Chaplin Office.

## 1013.8 UNAUTHORIZED PRACTICES OR MATERIAL

The following list, which is not intended to be exhaustive, includes materials or practices that shall not be authorized:

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## Religious Programs

- (a) Animal sacrifice
- (b) Language or behaviors that could reasonably be construed as presenting a threat to facility safety or security
- (c) Self-mutilation
- (d) Use, display or possession of weapons
- (e) Self-defense or military training
- (f) Disparagement of other religions
- (g) Nudity or sexual acts
- (h) Profanity
- (i) Use of illegal substances or controlled substances without a prescription

## 1013.9 GROUP RELIGIOUS SERVICES

Group religious services may be allowed after due consideration of the inmate's classification or other concerns that may adversely affect the order, safety and security of the facility.

Alternatives to attendance of group religious services may include, but are not limited to:

- The provision of religious books and reading materials.
- Access to religious counselors.
- Recorded religious media (e.g., DVDs, CDs, video tapes).

## 1013.10 RELIGIOUS SYMBOLS AND IMPLEMENTS

Religious symbols and implements used in the exercise of religion should generally be allowed unless the symbol or implement poses a threat to the safety and security of the facility. Alternatives to the provision of religious symbols and implements may be considered when security, safety or efficient operations may be jeopardized (e.g., substitution of a towel in lieu of a prayer rug).

#### 1013.11 RELIGIOUS GARMENTS AND CLOTHING

Inmates who practice a religion that requires particular modes of dress, garments, headgear, etc., other than standard-issue clothing, should generally be accommodated subject to the need to identify inmates and maintain security.

Head coverings shall be searched before being worn in the housing areas of the facility and shall be subject to random searches for contraband. Personal head coverings should be exchanged in favor of office-supplied head coverings when available and appropriate.

Inmates wearing headscarves or other approved coverings shall not be required to remove them while in the presence of or while visible to the opposite sex, if they so desire. Religious garments that substantially cover the inmate's head and face shall be temporarily removed during the taking of booking and identification photographs.

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## Religious Programs

To the extent reasonably practicable, alternative housing may be considered to accommodate an inmate's need for religious attire, while meeting the security needs of the facility.

#### 1013.12 FAITH- AND MORALS-BASED COUNSELING

The Facility Commander shall be responsible for establishing a plan for inmates to receive faith- and morals-based counseling from the chaplain or religious volunteers. Inmates should be reasonably accommodated, including reasonable access to clergy members and spiritual advisers, volunteer religious organizations, faith- and morals-based programs and other secular volunteer programs.

No inmate shall be required to participate in any such program.

## 1013.13 SPACE AND EQUIPMENT FOR RELIGIOUS OBSERVANCES

The Facility Commander shall ensure that there are sufficient facilities and resources for the chaplain to serve the inmate population, including providing access to areas of the facility. Space for group worship will be dictated by the availability of secure areas and the classification status of the inmates to be served. All recognized religious groups should have equal access to the space, equipment and services which the facility normally provides for religious purposes.

## 1013.14 COMMUNITY RESOURCES

The chaplain may minister his/her particular faith and any other similar faiths to inmates but should also establish contacts with clergy of other faiths who can provide services to inmates of other religious denominations.

Whenever the chaplain is unable to represent or provide faith-based services to an inmate, a religious leader or other volunteer from the community, credentialed by the particular faith, should be sought to help provide services. All individuals providing faith-based services should be supervised by the chaplain. All efforts to contact faith-based representatives should be documented and retained in accordance with established records retention schedules.

Volunteers are another valuable resource that could be utilized extensively in the delivery of the religious program (see the Volunteer Program Policy). A volunteer could ensure that religious personnel who provide programming in the facility possess the required credentials and have the security clearance to enter the facility.

The chaplain, in cooperation with the Facility Commander or the authorized designee, shall develop and maintain communication with faith communities. The chaplain shall review and coordinate with the Facility Commander regarding offers to donate equipment or materials for use in the religious programs. All communication efforts and donations should be documented and retained in accordance with established records retention schedules.

## **1013.15 TRAINING**

The Office shall provide training to facility staff on the requirements of this policy.

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## Religious Programs

The Office shall also provide training in safety and security to the chaplain. The chaplain shall approve and train clergy and religious volunteers. This includes the preparation of a training curriculum, as well as the development and maintenance of training records.

## 1013.16 STAFF RESPONSIBILITIES

Members shall not show favoritism or preference to any religion and will not discriminate or retaliate against any inmate for participating or not participating in any religion or religious practice. Inmates are not required to participate in religious programs or activities.

Facility staff will not allow their personal religious beliefs to influence them in the daily management of the inmate population, particularly as it relates to religious practices.

## **Work Release Program**

## 1014.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the guidelines and requirements for the Work Release Program. The Work Release Program allows inmates to maintain employment, support families and facilitate a successful return to the community.

## 1014.2 POLICY

It is the policy of this office to operate a voluntary Work Release Program to provide inmates with opportunities to secure or maintain employment, support families, assist in the payment of fines and penalties to the court and promote a successful return to the community (Penal Code § 4024.2(a)).

Release programs shall be conducted in accordance with state and local guidelines. In cases of pretrial release, the courts may have jurisdiction over release decisions.

#### 1014.3 **RECORDS**

The following records shall be maintained by the Facility Commander or the authorized designee on all inmates participating in the Work Release Program:

- (a) All payments and accounting associated with the Work Release Program
- (b) All contacts between the staff and employers prior to releasing inmates to work and confirming all employment information
- (c) All daily logs of time worked and payments received

# Reading Material Policy for Observation, Quarantine, and Isolation Housing Units

## 1015.1 PURPOSE AND SCOPE

The Tulare County Sheriff's Office will provide reading material to incarcerated persons who are housed in Observation, Quarantine, and Isolation Units. The reading material shall be purchased via the Incarcerated Person Welfare Fund and shall be replenished as needed at the direction of the Incarcerated Persons Programs Director.

## 1015.2 PROCEDURE

The Facility Commander shall designate one day per week allowing incarcerated persons an opportunity to select and exchange reading material. Incarcerated persons shall make their selection from the library cart and advise the deputy of their selections. While using proper PPE, the deputy shall provide the selected reading material to the incarcerated person. Incarcerated persons shall be allowed to take two books/magazines at a time.

Contaminated reading material being returned by an incarcerated person shall be placed into a plastic bin. Once all incarcerated persons have had an opportunity to exchange their reading materials, the plastic bin will be covered, and the reading material will be secured and allowed to sit untouched for a period of four days before being redistributed into the unit library.

The Housing Unit Deputy shall log the reading material exchange on the Housing Unit Log.

# Jail Based Competency Treatment Program (JBCT)

## 1016.1 PURPOSE AND SCOPE

This policy establishes program facilitation procedures for mental health inmates participating in the Jail Based Competency Treatment (JBCT) Program for restoring competency to stand trial.

## 1016.1.1 DEFINITIONS

**Jail Based Competency Treatment Program (JBCT)**: is a partnership between the California Department of State Hospitals, Tulare County Sheriff's Office, and the Tulare County contracted medical provider (Precision Psychiatric) to restore competency to PC1368 offenders deemed incompetent to stand trial (IST).

## 1016.2 POLICY

The safety and security of program participants and program staff is the responsibility of custody personnel assigned to the JBCT program.

- 1. Custody personnel assigned to JBCT will ensure security protocols are adhered to during the delivery of programs or treatments.
- 2. Custody personnel assigned to JBCT are responsible for compliance with established court orders and specific program tasks which may overlap with their daily duties. Specific orders would be those such as enforcing/standing by with Court Order IMO's as needed. Specific program task would be standing in for the duration of class/ treatment session. Daily duties would be the preparation and closing up for the day as a dedicated Unit Deputy (not responsible for sitting in on classes) will be assigned to the unit for security checks and normal unit operations 24 hours a day, 7 days a week.
- 3. A Deputy must be present at all times during treatment.

## 1016.3 PROCEDURE

Male inmates enrolled in JBCT should be housed in Housing Unit 3B. Female inmates enrolled in JBCT should be housed in housing unit 4B in accordance with their classification.

- 1. 1. Program inmates may be both male and female.
- 2. Inmates are housed in accordance with established classification and mental health criteria.
- 3. Inmates will participate in programs, classes, and treatment within their cells, the dayroom, the Level One JBCT Classroom, or the Level Two Classroom.
- 4. Programs, treatment and classes generally occur Monday through Friday, between the hours of 0800 and 1500.

## **JBCT Staff Duties:**

Custody personnel is responsible for the following duties:

1. Daily count of inmates.

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## Jail Based Competency Treatment Program (JBCT)

- 2. Conduct cell searches, security checks, and inspections of all program inmates.
- 3. Inmate movement and transfers.
- 4. Maintaining and update the JBCT log consisting of an updated daily roster of all inmates assigned to the JBCT Program broken down by name, ID Number, and cell assignment.
- 5. Work collaboratively with program staff to prepare for and assist during classes and therapy sessions, including but not limited to waking up inmates to get ready for sessions, escorting female inmates from Unit 4B to Unit 3B, and assisting with set-up of the classroom and therapy areas as needed.
- 6. Ensuring inmate participation in completing the cleaning task as they do in all units and providing incentives (additional program time, commissary type items, etc).
- 7. Provide custody presence during all classes and group sessions and assist as necessary when requested by program staff. For example, two different sessions going on at once. Two JBCT Deputies are assigned to the program daily as well as a JBCT Rove to ensure this coverage.
- 8. Document all necessary information.
- 9. Process inmate request forms, grievances, of all program inmates.
- 10. Facilitate and log cell activity, meal service, sick call, visits, medication pass, classes, and any other activities of the program, occurring during program hours.
- 11. Attend weekly treatment meetings with program staff.
- 12. Maintain accountability for program supplies and equipment for the JBCT classroom.

## Classes and Treatment:

- 1. All program inmates are expected to participate in all classes and programs.
- 2. If an inmate refuses to participate; staff will determine the reason for the refusal and document the information in the inmate management notes.
- 3. Inmates of different classifications and genders are allowed to mix during classes and treatment as approved by the JBCT Deputy, Classification, Watch Commander or the Custody Division's Administration.
- 4. Custody personnel shall be present at all times in the classroom during classes and treatment.

## Inmate Movement:

1. Inmates who require restraint for movement will not mix with any inmates who are not restrained.

## Out of Cell Activity (OCA):

- 1. If an inmate refuses or does not respond for scheduled program(s), staff will determine the reason for refusing or not responding and document the refusal.
- 2. Staff shall notify the JBCT Deputy of any refusal to participate in scheduled programming such as recreation, professional visits, visitation, and medical appointments.

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## Jail Based Competency Treatment Program (JBCT)

Medication Pass, Sick call, and Vital Checks:

- Delivery of medication and sick call takes priority over other non-emergency activities in the unit.
- 2. Staff shall escort medical personnel when administering medication.
- 3. Medical personnel shall dispense medications and check vital signs as necessary.
- 4. The inmate being examined shall be required to come to the cell door for evaluation.
- 5. If an inmate does not respond for medication, or refuses to take their medication, staff will try to determine the reason for the refusal and document the refusal in a log entry or an Incident Report. Those reports should be forwarded to JBCT personnel.
- 6. Refer to Lexipol Policy Section 916 for details regarding the administration of medications to inmates assigned to JBCT.

## Professional and Personal Visiting:

1. All visiting is accomplished in accordance with established policy and procedure.

## Commissary:

- 1. Additional commissary items may be approved by JBCT staff as part of an incentive program to increase program compliance.
- 2. If an inmate refuses or does not respond for commissary, staff will try to determine the reason for the refusal and notify the JBCT Deputy.

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## **Attachments**

Attachment

# Tulare County Sheriff's Office

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