# Table of Contents

## Chapter 1 - Role and Authority

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>101 - Authority and Legal Assistance</td>
<td>6</td>
</tr>
<tr>
<td>103 - Annual Review and Performance-Based Goals and Objectives</td>
<td>7</td>
</tr>
<tr>
<td>105 - Custody Manual</td>
<td>9</td>
</tr>
<tr>
<td>107 - Administrative Communications</td>
<td>10</td>
</tr>
<tr>
<td>111 - Special Assignments and Promotions</td>
<td>11</td>
</tr>
<tr>
<td>114 - Discriminatory Harassment</td>
<td>13</td>
</tr>
<tr>
<td>116 - Grievances</td>
<td>18</td>
</tr>
</tbody>
</table>

## Chapter 2 - Organization and Administration

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>200 - Drug- and Alcohol-Free Workplace</td>
<td>22</td>
</tr>
<tr>
<td>203 - Supervision of Inmates - Minimum Requirements</td>
<td>25</td>
</tr>
<tr>
<td>205 - Prohibition on Inmate Control</td>
<td>26</td>
</tr>
<tr>
<td>208 - Tool and Culinary Equipment</td>
<td>27</td>
</tr>
<tr>
<td>210 - Disposition of Evidence</td>
<td>30</td>
</tr>
<tr>
<td>212 - Records and Data Practices</td>
<td>35</td>
</tr>
<tr>
<td>214 - Research Involving Inmates</td>
<td>36</td>
</tr>
<tr>
<td>216 - Inmate Records</td>
<td>38</td>
</tr>
<tr>
<td>218 - Report Preparation</td>
<td>40</td>
</tr>
<tr>
<td>220 - Key and Electronic Access Device Control</td>
<td>43</td>
</tr>
<tr>
<td>222 - Daily Activity Logs and Shift Reports</td>
<td>46</td>
</tr>
<tr>
<td>226 - Administrative and Supervisory Inspections</td>
<td>48</td>
</tr>
<tr>
<td>228 - Perimeter Security</td>
<td>50</td>
</tr>
<tr>
<td>230 - Accessibility - Facility and Equipment</td>
<td>52</td>
</tr>
<tr>
<td>232 - News Media Relations</td>
<td>54</td>
</tr>
<tr>
<td>234 - Community Relations - Public Information Plan</td>
<td>58</td>
</tr>
<tr>
<td>236 - Victim Notification of Inmate Release</td>
<td>60</td>
</tr>
<tr>
<td>238 - Community Service Program</td>
<td>63</td>
</tr>
<tr>
<td>240 - Vehicle Safety</td>
<td>65</td>
</tr>
<tr>
<td>242 - Fitness for Duty</td>
<td>70</td>
</tr>
<tr>
<td>244 - Staffing Plan</td>
<td>73</td>
</tr>
<tr>
<td>246 - Employee Speech, Expression and Social Networking</td>
<td>75</td>
</tr>
<tr>
<td>248 - Personal Electronic Devices</td>
<td>79</td>
</tr>
</tbody>
</table>

## Chapter 3 - Recruitment Selection and Planning

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>301 - Employee Orientation</td>
<td>82</td>
</tr>
<tr>
<td>303 - Continuing Professional Education</td>
<td>83</td>
</tr>
<tr>
<td>305 - Training for Managers and Supervisors</td>
<td>84</td>
</tr>
<tr>
<td>307 - Facility Training Officer Program</td>
<td>86</td>
</tr>
<tr>
<td>310 - Training</td>
<td>89</td>
</tr>
<tr>
<td>312 - Specialized Training</td>
<td>90</td>
</tr>
<tr>
<td>314 - Firearms Training</td>
<td>91</td>
</tr>
<tr>
<td>316 - Chemical Agents Training</td>
<td>93</td>
</tr>
<tr>
<td>318 - Prison Rape Elimination Act Training</td>
<td>95</td>
</tr>
</tbody>
</table>
320 - Health Care Staff Orientation ........................................... 98
322 - Volunteer Program ......................................................... 100
324 - Briefing Training .......................................................... 106
326 - Training Plan ................................................................. 108
328 - Support Personnel Training ............................................. 111
329 - Deputy Sheriff Corrections Performance Expectations ............. 113
331 - Deputy Sheriff Corrections Sergeant Performance Expectations .. 116

Chapter 4 - Emergency Planning .............................................. 121
400 - Facility Emergencies ....................................................... 122
404 - Emergency Staffing ......................................................... 142
406 - Fire Safety ................................................................. 144
408 - Emergency Power and Communications ............................... 151
410 - Evacuation ................................................................. 153

Chapter 5 - Inmate Management .............................................. 158
500 - Population Management System ....................................... 159
502 - Inmate Counts ............................................................... 161
504 - Inmate Reception ........................................................... 164
506 - Inmate Handbook and Orientation ...................................... 177
508 - Inmate Safety Checks ...................................................... 179
509 - Guard 1 ........................................................................ 180
510 - Special Management Inmates ........................................... 184
511 - Activity Log ................................................................. 189
513 - Management of Weapons and Control Devices ....................... 191
515 - Inmate Classification ....................................................... 195
517 - Conducted Energy Device ................................................. 201
518 - Remote Electronically Activated Control Technology (R-E-A-C-T) .. 207
519 - Control of Inmate Movement ............................................ 211
521 - Use of Force ................................................................. 212
523 - Use of Restraints ............................................................ 220
527 - Searches ................................................................. 227
528 - BODY SCANNER POLICY ................................................ 236
530 - Reporting In-Custody Deaths ............................................ 249
532 - Staff and Inmate Contact .................................................. 252
534 - Transportation of Inmates Outside the Secure Facility .............. 255
536 - Safety and Sobering Cells ................................................. 257
538 - Biological Samples .......................................................... 260
540 - End of Term Release ........................................................ 263

Chapter 6 - Inmate Due Process .............................................. 273
600 - Inmate Discipline ........................................................... 274
602 - Disciplinary Separation ..................................................... 289
604 - Inmates with Disabilities .................................................... 296
606 - Inmate Access to Courts and Counsel .................................. 299
608 - Foreign Nationals and Diplomats ....................................... 303
610 - Inmate Rights - Protection from Abuse ................................ 306
<table>
<thead>
<tr>
<th>Chapter 7 - Medical-Mental Health</th>
<th>336</th>
</tr>
</thead>
<tbody>
<tr>
<td>700 - Health Care Administrative Meetings and Reports</td>
<td>337</td>
</tr>
<tr>
<td>702 - Access to Health Care</td>
<td>340</td>
</tr>
<tr>
<td>704 - Non-Emergency Health Care Requests and Services</td>
<td>343</td>
</tr>
<tr>
<td>706 - Referrals and Coordination of Specialty Care</td>
<td>345</td>
</tr>
<tr>
<td>708 - Emergency Health Care Services</td>
<td>347</td>
</tr>
<tr>
<td>710 - Health Care for Pregnant Inmates</td>
<td>351</td>
</tr>
<tr>
<td>714 - Health Authority</td>
<td>355</td>
</tr>
<tr>
<td>716 - Health Appraisals</td>
<td>358</td>
</tr>
<tr>
<td>718 - Healthy Lifestyle Promotion</td>
<td>359</td>
</tr>
<tr>
<td>720 - Transfer Screening</td>
<td>360</td>
</tr>
<tr>
<td>722 - Medical Screening</td>
<td>362</td>
</tr>
<tr>
<td>724 - Mental Health Services</td>
<td>367</td>
</tr>
<tr>
<td>726 - Mental Health Screening and Evaluation</td>
<td>370</td>
</tr>
<tr>
<td>728 - Special Needs Medical Treatment</td>
<td>372</td>
</tr>
<tr>
<td>730 - Communicable Diseases</td>
<td>376</td>
</tr>
<tr>
<td>732 - Aids to Impairment</td>
<td>393</td>
</tr>
<tr>
<td>734 - Detoxification and Withdrawal</td>
<td>395</td>
</tr>
<tr>
<td>738 - Clinical Performance Enhancement</td>
<td>398</td>
</tr>
<tr>
<td>740 - Clinical Decisions</td>
<td>400</td>
</tr>
<tr>
<td>742 - Health-Trained Staff</td>
<td>401</td>
</tr>
<tr>
<td>744 - Licensure, Certification, and Registration Requirements</td>
<td>402</td>
</tr>
<tr>
<td>746 - Inmate Assistants</td>
<td>404</td>
</tr>
<tr>
<td>748 - Suicide Prevention and Intervention</td>
<td>405</td>
</tr>
<tr>
<td>750 - Inmate Death - Clinical Care Review</td>
<td>410</td>
</tr>
<tr>
<td>752 - Nursing Assessment Protocols</td>
<td>413</td>
</tr>
<tr>
<td>754 - Infirmary Care</td>
<td>415</td>
</tr>
<tr>
<td>756 - Medical Equipment and Supply Control</td>
<td>417</td>
</tr>
<tr>
<td>758 - Continuation of Care</td>
<td>418</td>
</tr>
<tr>
<td>760 - Continuous Quality Improvement</td>
<td>420</td>
</tr>
<tr>
<td>762 - Informed Consent and Right to Refuse Medical Care</td>
<td>422</td>
</tr>
<tr>
<td>764 - Management of Health Records</td>
<td>425</td>
</tr>
<tr>
<td>766 - Inmate Health Care Communication</td>
<td>430</td>
</tr>
<tr>
<td>768 - Forensic Evidence</td>
<td>438</td>
</tr>
<tr>
<td>770 - Oral Care</td>
<td>439</td>
</tr>
<tr>
<td>772 - Pharmaceutical Operations</td>
<td>441</td>
</tr>
<tr>
<td>774 - Release Planning</td>
<td>448</td>
</tr>
<tr>
<td>776 - Privacy of Care</td>
<td>450</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Chapter 8 - Environmental Health</th>
<th>451</th>
</tr>
</thead>
<tbody>
<tr>
<td>800 - Sanitation Inspections</td>
<td>452</td>
</tr>
<tr>
<td>Chapter</td>
<td>Section</td>
</tr>
<tr>
<td>-----------------</td>
<td>----------------------------------</td>
</tr>
<tr>
<td>802</td>
<td>Hazardous Waste and Sewage Disposal</td>
</tr>
<tr>
<td>804</td>
<td>Housekeeping and Maintenance</td>
</tr>
<tr>
<td>806</td>
<td>Physical Plant Compliance with Codes</td>
</tr>
<tr>
<td>808</td>
<td>Water Supply</td>
</tr>
<tr>
<td>810</td>
<td>Vermin and Pest Control</td>
</tr>
<tr>
<td>812</td>
<td>Inmate Safety</td>
</tr>
<tr>
<td>814</td>
<td>Inmate Hygiene</td>
</tr>
<tr>
<td>900</td>
<td>Food Services</td>
</tr>
<tr>
<td>902</td>
<td>Food Services Training</td>
</tr>
<tr>
<td>904</td>
<td>Dietary Guidelines</td>
</tr>
<tr>
<td>906</td>
<td>Food Services Worker's Health, Safety and Supervision</td>
</tr>
<tr>
<td>908</td>
<td>Food Preparation Areas</td>
</tr>
<tr>
<td>910</td>
<td>Food Budgeting and Accounting</td>
</tr>
<tr>
<td>912</td>
<td>Inspection of Food Products</td>
</tr>
<tr>
<td>914</td>
<td>Food Services Facilities Inspection</td>
</tr>
<tr>
<td>916</td>
<td>Food Storage</td>
</tr>
<tr>
<td>918</td>
<td>Prescribed Therapeutic Diets</td>
</tr>
<tr>
<td>920</td>
<td>Disciplinary Separation Diet</td>
</tr>
<tr>
<td>1000</td>
<td>Inmate Programs and Services</td>
</tr>
<tr>
<td>1001</td>
<td>County Parole Program</td>
</tr>
<tr>
<td>1002</td>
<td>Inmate Welfare Fund</td>
</tr>
<tr>
<td>1004</td>
<td>Inmate Accounts</td>
</tr>
<tr>
<td>1006</td>
<td>Counseling Services</td>
</tr>
<tr>
<td>1010</td>
<td>Inmate Exercise and Recreation</td>
</tr>
<tr>
<td>1012</td>
<td>Inmate Educational, Vocational and Rehabilitation Programs</td>
</tr>
<tr>
<td>1014</td>
<td>Commissary Services</td>
</tr>
<tr>
<td>1016</td>
<td>Library Services</td>
</tr>
<tr>
<td>1018</td>
<td>Inmate Mail</td>
</tr>
<tr>
<td>1020</td>
<td>Inmate Telephone Access</td>
</tr>
<tr>
<td>1022</td>
<td>Inmate Visitation</td>
</tr>
<tr>
<td>1032</td>
<td>Inmate Work Program</td>
</tr>
<tr>
<td>1034</td>
<td>Religious Programs</td>
</tr>
<tr>
<td>1100</td>
<td>Space and Environmental Requirements</td>
</tr>
<tr>
<td>1102</td>
<td>Smoking and Tobacco Use</td>
</tr>
<tr>
<td>1104</td>
<td>Control Center</td>
</tr>
<tr>
<td>1106</td>
<td>Crowding</td>
</tr>
<tr>
<td>Attachments</td>
<td></td>
</tr>
</tbody>
</table>
Chapter 1 - Role and Authority
Authority and Legal Assistance

101.1 PURPOSE AND SCOPE
This policy acknowledges and reflects the legal authority under which the Lake County Sheriff's Office 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.

101.2 POLICY
It is the policy of the Sheriff's 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.

101.3 LEGAL FOUNDATION
Jail 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 Lake 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.

101.4 LEGAL ASSISTANCE
The following are examples of areas where the services of the County Counsel and legal specialists can be of benefit to the Sheriff's Office:

   (a) Analyze and alert the detention executive and detention facility management team to detention-related case law.

   (b) Serve as a legal consultant in the construction and review of new facility policies and procedures.

   (c) Serve as a legal consultant on issues related, but not limited to:

      1. Use of force
      2. Faith-based requests
      3. Complaints and grievances
      4. Allegations of abuse by staff

   (d) Serve as legal counsel in legal matters brought against the Sheriff's Office and the Sheriff.
Annual Review and Performance-Based Goals and Objectives

103.1 PURPOSE AND SCOPE
The Lake 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.

103.2 ANNUAL REVIEW
The Jail Commander 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.
   5. Percentage of male inmates.
   6. Percentage of female inmates.
   7. Juveniles in custody.
   8. Felony inmates in custody.
  11. Sentenced population.
12. Medical beds.
13. Mental health beds.
14. Meal counts (regular, medical, court meals).
15. Early releases.
16. Alternative-to-incarceration participants.
17. Special needs inmates.
18. Classification issues.
19. Inmate grievances (founded/denied).
20. Demographics (age, race, gang affiliation).

(j) Security issues that include:
1. Inmate-on-inmate assaults.
2. Inmate-on-staff assaults.
3. Major disturbances.
5. Suicide attempts (15 CCR 1030).

(k) Inmate programs including:
1. Education.
2. Commissary.
3. Drug and alcohol programs.
4. Faith-based services.

103.3 CRITERIA TO MEASURE PERFORMANCE
The following items will be used to measure and evaluate the level of success in achieving the office’s stated goals:

(a) Fiscal year budget surpluses or successful operations even with budget reduction
(b) Findings from independent financial audits
(c) Inmate grievances
(d) Documentation that office investigators have completed the required specialized training in conducting sexual abuse investigations (28 CFR 115.34)
(e) Documented training hours received by staff
(f) Completed audits of the policy and procedures manuals
Custody Manual

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

The Jail 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 Lake 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.

105.1.1 INTERNAL AND EXTERNAL SECURITY MEASURE REVIEW
The Jail 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).
Administrative Communications

107.1 PURPOSE AND SCOPE
Effective communications within the Sheriff's Office are critical to the accomplishment of the mission of the Sheriff's Office and the effective operation of the corrections facility. Administrative communications of this office are governed by the following policy (Title 15 CCR § 1029(a)(1)).
Special Assignments and Promotions

111.1 PURPOSE AND SCOPE
The purpose of this policy is to establish guidelines for making special assignments within the Custody Division of the Lake County Sheriff’s Office.

111.2 SPECIAL ASSIGNMENT POSITIONS
The following positions are considered special assignments and not promotions:

   (a) Crisis Response Unit member
       1. Special Emergency Response Team (SERT)
       2. Hostage Negotiator
   (b) Gang Intelligence Deputies
   (c) Classification Deputy
   (d) Facility Training Officer
   (e) Defensive tactics instructor
   (f) Firearms Instructor
   (g) Transportation Deputy
   (h) Inmate Services Deputy

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

   (a) Presents a professional, neat appearance.
   (b) Maintains a physical condition that aids in his/her performance.
   (c) Expresses an interest in the assignment.
   (d) Demonstrates the following traits:
       1. Emotional stability and maturity.
       2. Stress tolerance.
       3. Sound ethical judgment and decision-making.
       4. Personal integrity and ethical conduct.
       5. Leadership skills.
       6. Initiative.
       7. Adaptability and flexibility.
       8. Ability to conform to office goals and objectives in a positive manner.
111.2.2 DISQUALIFICATION
The Lake 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.

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

111.3 SPECIAL ASSIGNMENT SELECTION PROCESS
The following criteria may be used when determining which candidate is best suited for a special assignment:

(a) A review of the employee’s performance evaluation history, supervisor recommendations and participation in a scored interview process.

(b) The supervisor recommendations will be submitted to the Jail Commander or designee for whom the candidate will work.

(c) The Jail Commander will review all criteria and make all final appointments.

This policy may be waived for temporary assignments or emergency situations.

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

114.1 PURPOSE AND SCOPE
The purpose of this policy is to prevent office members from being subjected to discriminatory harassment, including sexual harassment and retaliation (Government Code § 12940(k); 2 CCR 11023). Nothing in this policy is intended to create a legal or employment right or duty that is not created by law.

114.2 POLICY
The Lake County Sheriff's Office is an equal opportunity employer and is committed to creating and maintaining a work environment that is free of all forms of discriminatory harassment, including sexual harassment and retaliation. The Office will not tolerate discrimination against a member in hiring, promotion, discharge, compensation, fringe benefits, and other privileges of employment. The Office will take preventive and corrective action to address any behavior that violates this policy or the rights and privileges it is designed to protect.

The nondiscrimination policies of the Office may be more comprehensive than state or federal law. Conduct that violates this policy may not violate state or federal law but still could subject a member to discipline.

114.3 DEFINITIONS
Definitions related to this policy include:

114.3.1 DISCRIMINATION
The Office prohibits all forms of discrimination, including any employment-related action by a member that adversely affects an applicant or member and is based on 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.

Discriminatory harassment, including sexual harassment, is verbal or physical conduct that demeans or shows hostility or aversion toward an individual based upon that individual's protected class. It has the effect of interfering with an individual's work performance or creating a hostile or abusive work environment.

Conduct that may, under certain circumstances, constitute discriminatory harassment can include making derogatory comments; making crude and offensive statements or remarks; making slurs or off-color jokes; stereotyping; engaging in threatening acts; making indecent gestures, pictures, cartoons, posters, or material; making inappropriate physical contact; or using written material or office equipment and/or systems to transmit or receive offensive material, statements, or pictures. Such conduct is contrary to office policy and to a work environment that is free of discrimination.
Discriminatory Harassment

114.3.2 RETALIATION
Retaliation is treating a person differently or engaging in acts of reprisal or intimidation against the person because he/she has engaged in protected activity, filed a charge of discrimination, participated in an investigation or opposed a discriminatory practice.

Retaliation will not be tolerated.

114.3.3 SEXUAL HARASSMENT
The Office prohibits all forms of discrimination and discriminatory harassment, including sexual harassment. It is unlawful to harass an applicant or a member because of that person’s sex.

Sexual harassment includes but is not limited to unwelcome sexual advances, requests for sexual favors, or other verbal, visual, or physical conduct of a sexual nature when:

(a) Submission to such conduct is made either explicitly or implicitly as a term or condition of employment, position, or compensation.

(b) Submission to, or rejection of, such conduct is used as the basis for any employment decisions affecting the member.

(c) Such conduct has the purpose or effect of substantially interfering with a member's work performance or creating an intimidating, hostile, or offensive work environment.

114.3.4 ADDITIONAL CONSIDERATIONS
Discrimination and discriminatory harassment do not include actions that are in accordance with established rules, principles, or standards, including:

(a) Acts or omission of acts based solely upon bona fide occupational qualifications under the Equal Employment Opportunity Commission and the California Fair Employment and Housing Council guidelines.

(b) Bona fide requests or demands by a supervisor that a member improve his/her work quality or output, that the member report to the job site on time, that the member comply with county or office rules or regulations, or any other appropriate work-related communication between supervisor and member.

114.4 RESPONSIBILITIES
This policy applies to all office members who shall follow the intent of these guidelines in a manner that reflects office policy, professional custodial standards, and the best interest of the Office and its mission.

Members are encouraged to promptly report any discriminatory, retaliatory, or harassing conduct or known violations of this policy to a supervisor. Any member who is not comfortable with reporting violations of this policy to his/her immediate supervisor may bypass the chain of command and make the report to a higher-ranking supervisor or manager. Complaints may also be filed with the Sheriff, the Human Resource Director, or the County Administrative Officer.

Any member who believes, in good faith, that he/she has been discriminated against, harassed, or subjected to retaliation, or who has observed harassment, discrimination, or retaliation, is
Discriminatory Harassment

encouraged to promptly report such conduct in accordance with the procedures set forth in this policy.

Supervisors and managers receiving information regarding alleged violations of this policy shall determine if there is any basis for the allegation and shall proceed with a resolution as stated below.

114.4.1 QUESTIONS OR CLARIFICATION
Members with questions regarding what constitutes discrimination, sexual harassment, or retaliation are encouraged to contact a supervisor, a manager, the Sheriff, the Human Resource Director, the County Administrative Officer, or the California Department of Fair Employment and Housing (DFEH) for further information, direction, or clarification (Government Code § 12950).

114.4.2 SUPERVISOR RESPONSIBILITIES
The responsibilities of each supervisor and manager shall include but are not limited to:

(a) Continually monitoring the work environment and striving to ensure that it is free from all types of unlawful discrimination, including harassment or retaliation.

(b) Taking prompt, appropriate action within their work units to avoid and minimize the incidence of any form of discrimination, harassment, or retaliation.

(c) Ensuring that their subordinates understand their responsibilities under this policy.

(d) Ensuring that members who make complaints or who oppose any unlawful employment practices are protected from retaliation and that such matters are kept confidential to the extent possible.

(e) Making a timely determination regarding the substance of any allegation based upon all available facts.

(f) Notifying the Sheriff or Human Resource Director in writing of the circumstances surrounding any reported allegations or observed acts of discrimination, harassment or retaliation no later than the next business day.

114.4.3 SUPERVISOR'S ROLE
Supervisors and managers shall be aware of the following:

(a) Behavior of supervisors and managers should represent the values of the Office and professional custodial standards.

(b) False or mistaken accusations of discrimination, harassment, or retaliation can have negative effects on the careers of innocent members.

Nothing in this section shall be construed to prevent supervisors or managers from discharging supervisory or management responsibilities, such as determining duty assignments, evaluating or counseling members, or issuing discipline in a manner that is consistent with established procedures.
114.5 INVESTIGATION OF COMPLAINTS
Various methods of resolution exist. During the pendency of any such investigation, the supervisor of the involved member should take prompt and reasonable steps to mitigate or eliminate any continuing abusive or hostile work environment. It is the policy of the Office that all complaints of discrimination, retaliation, or harassment shall be fully documented and promptly and thoroughly investigated.

114.5.1 SUPERVISORY RESOLUTION
Members who believe they are experiencing discrimination, harassment, or retaliation should be encouraged to inform the individual that his/her behavior is unwelcome, offensive, unprofessional, or inappropriate. However, if the member feels uncomfortable or threatened or has difficulty expressing his/her concern, or if this does not resolve the concern, assistance should be sought from a supervisor or manager who is a rank higher than the alleged transgressor.

114.5.2 FORMAL INVESTIGATION
If the complaint cannot be satisfactorily resolved through the supervisory resolution process, a formal investigation will be conducted.

The person assigned to investigate the complaint will have full authority to investigate all aspects of the complaint. Investigative authority includes access to records and the cooperation of any members involved. No influence will be used to suppress any complaint and no member will be subject to retaliation or reprisal for filing a complaint, encouraging others to file a complaint, or for offering testimony or evidence in any investigation.

Formal investigation of the complaint will be confidential to the extent possible and will include but is not limited to details of the specific incident, frequency and dates of occurrences, and names of any witnesses. Witnesses will be advised regarding the prohibition against retaliation, and that a disciplinary process, up to and including termination, may result if retaliation occurs.

Members who believe they have been discriminated against, harassed, or retaliated against because of their protected status are encouraged to follow the chain of command but may also file a complaint directly with the Sheriff, Human Resource Director, or the County Administrative Officer.

114.5.3 ALTERNATIVE COMPLAINT PROCESS
No provision of this policy shall be construed to prevent any member from seeking legal redress outside the Office. Members who believe that they have been harassed, discriminated against, or retaliated against are entitled to bring complaints of employment discrimination to federal, state, and/or local agencies responsible for investigating such allegations. Specific time limitations apply to the filing of such charges. Members are advised that proceeding with complaints under the provisions of this policy does not in any way affect those filing requirements.

114.6 DOCUMENTATION OF COMPLAINTS
All complaints or allegations shall be thoroughly documented on the appropriate forms and in a manner designated by the Sheriff. The outcome of all reports shall be:
Discriminatory Harassment

(a) Approved by the Sheriff, the County Administrative Officer, or the Human Resource Director, depending on the ranks of the involved parties.

(b) Maintained in accordance with the established records retention schedule.

114.6.1 NOTIFICATION OF DISPOSITION
The complainant and/or victim will be notified in writing of the disposition of the investigation and the actions taken to remedy or address the circumstances giving rise to the complaint.

114.7 TRAINING
All new members shall be provided with a copy of this policy as part of their orientation. The policy shall be reviewed with each new member. The member shall certify by signing the prescribed form that he/she has been advised of this policy, is aware of and understands its contents and agrees to abide by its provisions during his/her term with the Office.

All members shall receive annual training on the requirements of this policy and shall certify by signing the prescribed form that they have reviewed the policy, understand its contents and agree that they will continue to abide by its provisions.

114.8 REQUIRED POSTERS
The Office shall display the required posters regarding discrimination, harassment, and transgender rights in a prominent and accessible location for members (Government Code § 12950).

114.9 WORKING CONDITIONS
The Administration Division Commander or the authorized designee should be responsible for reviewing facility design and working conditions for discriminatory practices. This person should collaborate with other [City/County] employees who are similarly tasked (2 CCR 11034).
Grievances

116.1 PURPOSE AND SCOPE
The purpose of this policy is to establish guidelines for receiving and resolving grievances. This policy applies to all sworn and non-sworn staff, volunteers and supervisors.

116.1.1 GRIEVANCE DEFINED
(a) GRIEVANCE - a grievance is a claimed violation, misapplication, or misinterpretation by the COUNTY of a specific provision of this MOU or an employee protection contained in any State Law, County ordinance, Resolution, Personnel Rule or written policy which adversely affects the grievant.
(b) GRIEVANT - a grievant is an employee in the unit who is filing a grievance as defined above, or the ASSOCIATION alleging a violation of an ASSOCIATION right. Alleged violations, misapplications or misinterpretations which affect more than one employee in a substantially similar manner may be consolidated at the discretion of management as a group grievance. In situations where more than one employee is affected, the ASSOCIATION may file grievances on behalf of its members. The COUNTY may require that the ASSOCIATION provide a list of the names of those employees allegedly affected.
(c) Days - days shall mean the day(s) in which the COUNTY's main administration office is open for business.

116.2 POLICY
It is the policy of this office to promote a process where employees feel free to bring forth grievances without fear of discrimination or retaliation. All grievances will be accepted and handled promptly and fairly. Equal consideration should be given to all grievances, regardless of whether there is a perceived basis for the grievance. It is the goal of the Office to promote open communication between members and supervisors.

At no time will punitive or retaliatory action be taken against a member for exercising his/her rights during, after or in relation to the grievance procedure.

116.3 PROCEDURE
EMPLOYEES SHOULD SEE THEIR RESPECTIVE ASSOCIATION REPRESENTATIVE FOR A COPY OF THEIR CURRENT MEMORANDUM OF UNDERSTANDING (MOU)... THE FOLLOWING IS A BRIEF OVERVIEW OF THE INITIAL PROCESS.
(a) INFORMAL LEVEL
1. Within ten (10) days from the event giving rise to a grievance or from the date the employee would reasonable be expected to have knowledge of such event, the grievant will orally discuss his or her grievance with his or her immediate
supervisor. The supervisor will have five (5) days to give an answer to the employee/grievant.

(b) FORMAL LEVELS

1. Level 1: If the grievant is not satisfied with the resolution proposed at the Informal Level, the grievant may, within five (5) days of the receipt of such answer, file a formal written grievance with his or her immediate supervisor on a form provided by the COUNTY. The supervisor will, within three (3) days have a meeting with the grievant and within five (5) days thereafter give a written answer to the grievant on the form provided.

2. Level 2: if the grievant is not satisfied with the supervisor's answer, the grievant may, within five (5) days from the date of such answer, file a written appeal to the department head, who will, within ten (10) days, meet with the grievant and thereafter give a written answer to the grievant within five (5) days thereafter.

3. Level 3: If the grievant is not satisfied with the written answer from the department head, the grievant may, within five (5) days from the date of such answer, file a written appeal to the County Human Resources Director, or his or her designee, who will initiate an investigation of the grievance, which may include a meeting with the concerned parties, and will give a written answer to the grievant within fifteen (15) working days thereafter. The time within which to conduct this investigation may be extended upon the mutual consent of the grievant and the Human Resources Director.

4. Level 4: if the grievant isn't satisfied with the Human Resources Director's written answer to the grievance, the grievant may, within five (5) days of the date of receipt of such answer, file an appeal for hearing and final determination by the Board of Supervisors. The appeal, along with any documentation, will be forwarded to the Lake County Board of Supervisors.

116.4 PROCEDURE

Grievances may be brought by an individual member or by a group representative.

Except as otherwise required under a collective bargaining agreement, if a member believes that he/she has a grievance as defined above, that member shall observe the following procedure:

(a) A reasonable attempt should be made to resolve grievances at the lowest possible level. A good faith attempt should be made to resolve the issue through informal discussion with the immediate supervisor.

(b) If after a reasonable amount of time, generally seven days, the grievance cannot be settled by the immediate supervisor, the member may request an interview with the Jail Commander.
Grievances

(c) If a successful resolution is not found with the Jail Commander, the member may request a meeting with the Sheriff.

(d) If the member and the Sheriff are unable to arrive at a solution, the member should proceed as follows:

1. Submit a written statement of the grievance and deliver one copy to the Sheriff and another copy to the immediate supervisor. Include the following information:
   (a) The basis for the grievance (i.e., the facts of the case)
   (b) Allegation of the specific wrongful act and the harm done
   (c) The specific policies, rules or regulations that were violated
   (d) The remedy or goal sought by the grievance
   (e) The member shall receive a copy of the acknowledgment signed by the supervisor, including the date and time of receipt. The supervisor will forward a copy of the grievance to the Jail Commander.

(e) The Sheriff will receive the grievance in writing.

(f) The Sheriff and the County Administrative Officer will review and analyze the facts or allegations and will respond to the member within 14 calendar days. The response will be in writing and will affirm or deny the allegations. The response shall include any remedies, if appropriate. The decision of the County Administrative Officer is considered final.

116.5 MEMBER REPRESENTATION
Members may have representation during the grievance process. The member may select any bargaining unit representative or office member as his/her representative.

116.6 GRIEVANCE RECORDS
At the conclusion of the grievance process, all documents pertaining to the process shall be forwarded to the Administration Division for inclusion into a secure file containing all written grievances. A second copy of the written grievance will be maintained by the County Administrative Officer's office to monitor the grievance process.

116.7 GRIEVANCE AUDITS
The Training Manager shall perform an annual audit of all grievances filed the previous calendar year to evaluate whether any policy or procedure changes or training may be appropriate. The Training Manager shall record these findings in a confidential memorandum to the Jail Commander without including any identifying information from any individual grievance. If the audit identifies any recommended changes or content that may warrant a critical revision to the Custody Manual, the Jail Commander should promptly notify the Sheriff.
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.

200.2 POLICY
It is the policy of this 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. Such use shall not be tolerated (41 USC § 8103).

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 he/she 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, he/she shall be immediately removed and released from work (see Work Restrictions in this policy).

200.3.1 USE OF MEDICATIONS
Members should avoid taking 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 his/her immediate supervisor prior to commencing any on-duty status.

No member shall be permitted to work or drive a vehicle owned or leased by the Office while taking any medication that has the potential to impair his/her abilities, without a written release from his/her physician.

200.3.2 USE OF MARIJUANA
Possession of marijuana, including medical marijuana, or being under the influence of marijuana on- or off-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 who are authorized to consume alcohol as part of a special assignment shall not do so to the extent of impairing on-duty performance.
Drug- and Alcohol-Free Workplace

Members shall notify a supervisor immediately if they observe behavior or other evidence that they believe demonstrates that a fellow member poses a risk to the health and safety of the member or others 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).

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 Department of Human Resources, 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 he/she 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 his/her 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 he/she is safely transported away from the Office.

200.7 REQUESTING SCREENING TESTS
A supervisor may request an employee to submit to a screening under any of the following circumstances:

(a) A supervisor reasonably believes, based upon objective facts, that the employee is under the influence of alcohol or drugs that are impairing his/her ability to perform duties safely and efficiently.

(b) The employee discharges a firearm, other than by accident, in the performance of his/her duties.

(c) During the performance of his/her duties, the employee drives a motor vehicle and becomes involved in an incident that results in bodily injury to him/herself or another person or substantial damage to property.

200.7.1 SUPERVISOR RESPONSIBILITY
The supervisor shall prepare a written record documenting the specific facts that led to the decision to request 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.

200.7.2 SCREENING TEST REFUSAL
An employee may be subject to disciplinary action if he/she:

(a) Fails or refuses to submit to a screening test as requested.

(b) After taking a screening test that indicates the presence of a controlled substance, fails to provide proof, within 72 hours after being requested, that he/she took the controlled substance as directed, pursuant to a current and lawful prescription issued in his/her name.

(c) Violates any provisions of this policy.

200.8 COMPLIANCE WITH THE DRUG-FREE WORKPLACE ACT
No later than 30 days following notice of any drug statute conviction for a violation occurring in the workplace involving a member, the Office will take appropriate disciplinary action, up to and including dismissal, and/or requiring the member to satisfactorily participate in a drug abuse assistance or rehabilitation program (41 USC § 8104).

200.9 CONFIDENTIALITY
The Office recognizes the confidentiality and privacy due to its members. Disclosure of any information relating to substance abuse treatment, except on a need-to-know basis, shall only be with the express written consent of the member involved or pursuant to lawful process.

The written results of any screening tests and all documents generated by the employee assistance program are considered confidential medical records and shall be maintained separately from the employee’s other personnel files.
Supervision of Inmates - Minimum Requirements

203.1 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.

203.2 POLICY
It is the policy of this facility 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.

203.3 SUPERVISION OF INMATES
There shall be, at all times, sufficient staff designated to remain in the facility for the supervision and welfare of inmates, 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 inmates are present and should not be assigned duties that could conflict with the supervision of inmates (15 CCR 1027).

When both male and female inmates are held at this facility, a minimum of one male and one female deputy should be on-duty in the jail 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 that may be 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 that preserve privacy without creating areas that cannot be properly supervised.

The Jail 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).

203.4 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 inmates.
Prohibition on Inmate Control

205.1 PURPOSE AND SCOPE
The purpose of this policy is to define the requirement that staff should at all times exercise control of the inmate population under their supervision and should prevent inmates from controlling other inmates within the facility.

205.2 POLICY
All staff, including support staff, contractors and volunteers should exercise control and supervision of all inmates 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 inmate or group of inmates to exert authority over any other inmate (Penal Code § 4019.5; 15 CCR 1083(c)).

205.3 EDUCATION, DRUG OR ALCOHOL PROGRAM ASSISTANTS
Nothing in the policy is intended to restrict the legitimate use of inmates to assist in the instruction of educational or drug and alcohol programs. Any use of inmates in this manner will be expressly authorized by the Jail Commander in a legally prescribed manner. Any program that uses inmates 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 inmate program assistant to engage in disciplining other inmates.
Tool and Culinary Equipment

208.1 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)).

208.2 POLICY
It is the policy of this facility 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)).

208.3 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 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 Jail 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 Jail Commander. A report identifying all members involved in the search should be submitted to the on-duty supervisor documenting their findings.
208.4 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, a 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.

208.5 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 serial number 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 Jail Commander.
## 208.6 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 when not in use.

The deputy 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 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 deputy and documented. Inmate workers shall not be permitted to pass tools between each other except under the direct supervision of a deputy.

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 deputy shall immediately notify the on-duty supervisor, 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 use of the tool. The incident report with all relevant information shall be forwarded to the Jail Commander.

## 208.7 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 deputy 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 deputy, who shall document each one.

In the event that a serving tool is missing, the kitchen deputy shall notify a supervisor 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

210.1 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.

210.2 POLICY
It is the policy of the Lake 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.

210.3 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) If the contraband is a suspected "home brew" alcoholic beverage, the handling deputy shall place a sample of the liquid in a plastic container that can be safely sealed. The remainder of the liquid will be treated as a biohazard and carefully disposed of as recommended by the environmental health official.

210.4 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.
Disposition of Evidence

(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.

(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.

210.4.1 NARCOTICS AND DANGEROUS DRUGS
All narcotics and dangerous drugs shall be booked separately using a separate property form. Paraphernalia shall also be booked separately. All narcotics and dangerous drugs shall be properly weighed by the booking staff member. The weight of all narcotics and dangerous drugs shall be documented on the booking form. A copy of the booking form shall be placed with the evidence in the designated locker and shall also be distributed in accordance with current evidence booking procedures.

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

210.4.3 RECORDING OF PROPERTY
The evidence technician receiving custody of evidence or property shall record on the property control card his/her signature, the date and time the property was received and where the property will be stored.

A property number shall be obtained for each item or group of items. This number shall be recorded on the property tag and the property control card.

Any changes in the location of property held by the Office shall be noted in the property log book.

210.4.4 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.

Deputies desiring property for court shall contact the evidence technician at least one day prior to the court day.
Request for analysis for items other than narcotics and dangerous drugs shall be completed on the appropriate forms and submitted to the evidence technician. This request may be filled out any time after booking the property or evidence.

210.4.5 TRANSFER OF EVIDENCE TO CRIME LABORATORY
The transporting employee will check the evidence out of property, indicating the date and time on the property control card, and complete a request for laboratory analysis.

The evidence technician releasing the evidence must complete the required information on the property control card. The lab forms will be transported with the property to the examining laboratory. Upon delivering the item, the deputy will record the delivery time on both copies and indicate the locker in which the item was placed or the employee to whom it was delivered. The original copy of the lab form will remain with the evidence and the copy will be returned to the Records Bureau for filing with the case.

210.4.6 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 evidence technician 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.

210.5 RELEASE OR DISPOSITION OF UNCLAIMED FUNDS AND PROPERTY
The employee managing the case or a supervisor shall authorize the disposition or release of all evidence and property coming into the care and custody of the Office.

All reasonable attempts should be made to return unclaimed property, found property or evidence not needed for an investigation.

Release of property shall be made upon receipt of an authorized release form. The release authorization shall be signed by the approving staff member and must match the items listed on the property form or must specify the items to be released. A signature of the person receiving the property shall be recorded on the original property form. Upon release, the proper entry shall be documented on the property control card log and related forms.

The Property supervisor shall ensure that all cash not needed as evidence or funds that are left unclaimed by an inmate, are transferred as soon as practical to the Finance Department. A record of the transfer shall be kept in the appropriate inmate file.

The Property supervisor or the authorized designee shall submit a report of presumed abandoned property or funds once a year to the Sheriff and the Finance Department, or more frequently as
**Disposition of Evidence**

directed. The Property supervisor may dispose of property in compliance with existing laws upon receipt of proper authorization from the Sheriff.

Found property and property held for safekeeping shall be held for a minimum of 90 days during which time the evidence technician shall attempt to contact the rightful owner if sufficient identifying information is available. If no person appears to prove rightful ownership of the property during this period, the Office shall publish notice of its possession of any property valued at $250 or more at least once in a newspaper of general circulation. If, after seven days following the publication, a person does not appear to claim ownership, the property shall be sold at public auction. Property valued at less than $250 shall be sold at public auction if no person appears to prove rightful ownership within 90 days (Civil Code § 2080.3).

If such property is not sold at auction or otherwise lawfully claimed, it may thereafter be destroyed in accordance with applicable law. The final disposition of all such property shall be fully documented in related reports.

The evidence technician shall release the property upon proper identification presented by the person receiving the property for which an authorized release has been received. A signature of the person receiving the property shall be recorded on the original property form. Upon release, the proper entry shall be documented in the property log.

After release of all property listed on the property control card, the card shall be forwarded to the Records Bureau for filing with the case. If some items have not been released, the property card will remain in the property section.

**210.6 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).

**210.7 UNCLAIMED MONEY**

Except as otherwise provided by law, money, excluding restitution to victims, that is in the custody of this office and is no longer needed as evidence, and that remains unclaimed after three years, will be transferred to the general fund after proper notice has been given. Before transferring the money to the general fund, the Office shall publish a notice each week for a period of two consecutive weeks in a local newspaper of general circulation, in accordance with all laws,
处置 evidence

Ordinances and regulations (Government Code § 50050 et seq.). Such notice shall state the amount of money, the fund in which it is held and that the money will become the property of the office on a designated date, between 45 days and 60 days after the first publication of the notice (Government Code § 50051).

If the money remains unclaimed as of the date designated in the published notice, the money will become the property of this office to fund official custody facility operations. Money representing restitution collected on behalf of victims shall either be deposited into a restitution fund or used for purposes of victim services.

Any individual item with a value of less than $15, or any amount of money if the depositor/owner's name is unknown, that remains unclaimed for a year or by order of the court, may be transferred to the general fund without the necessity of public notice in accordance with applicable laws, ordinances and regulations (Government Code § 50055).
Records and Data Practices

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

212.2 ACCESS TO CRIMINAL RECORDS
Official files, documents, records, electronic data, video and audio recordings and information held by the Lake 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 Sheriff's Office shall be forwarded to the Jail 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 Jail Commander to determine the status of the documents in question.

212.3 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.
Research Involving Inmates

214.1 PURPOSE AND SCOPE
The purpose of this policy is to establish safeguards and guidelines to protect inmates from being used as research subjects in medical and other research experiments based only on their status as inmates and without proper approval, review or informed consent and when mandated by the State of California.

214.2 POLICY
The Lake County Sheriff's Office will conduct and support research that improves operations, enhances professional knowledge, decreases recidivism and advances the Sheriff's Office Mission in accordance with existing laws and with appropriate protection of all inmates. However, the use of inmates for medical, pharmaceutical, or cosmetic experiments is prohibited.

214.3 AUTHORIZATION REQUIREMENTS
Prior to initiating any approved research, all persons conducting research in this facility must agree to abide by all Sheriff's Office policies relating to the security and confidentiality of inmate files. Based upon the intended use of the research, guidelines will be established regarding what information shall be accessible to the researcher or the research organization.

Any requests for an exception shall include a response to the following questions as part of the proposed research project:

- Who is conducting the research?
- What is the purpose of the research?
- What is the methodology?
- Do the researchers or persons advocating research involving the use of inmates have an understanding of their ethical responsibilities, including considerations for the establishment of an Institutional Review Board (IRB), as described in 45 CFR 46.301 et seq.?
- Any other information as deemed appropriate by the Jail Commander or Sheriff.

Inquiries regarding proposed research projects from local, state and federal executive and legislative bodies/agencies will be brought to the attention of the Sheriff immediately by the employee who receives the request. At the direction of the Sheriff, an appropriate and timely response will be made to each legitimate inquiry.

Research or studies involving more than the information identified as public information may require signed release/waiver forms from the involved inmates. The Sheriff should consult and seek guidance from the legal counsel serving the Sheriff's Office or other legal expert in these matters.
Inmates are not precluded from individual treatment based on the need for a specific medical procedure that is not generally available. An inmate’s treatment with a new medical procedure by the inmate’s own physician shall be undertaken only after the inmate has received a full explanation of the positive and negative features of the treatment, and only with the inmate’s informed consent.

214.4 LEGAL CONSIDERATIONS
Any research conducted or supported by the United States Department of Health and Human Services (DHHS) will be required to comply with the provisions of 45 CFR 46.301 et seq.

214.4.1 BIOMEDICAL RESEARCH
Research relating to or involving biological, medical or physical science shall not be conducted on any inmate. This does not include the accumulation of statistical data in the assessment of the effectiveness of nonexperimental public health programs or treatment programs in which inmates routinely participate (Penal Code § 3502).

Records-based biomedical research using existing information, without prospective interaction with inmates, may be conducted consistent with Penal Code § 3500 et seq. and federal law.

214.5 INMATES IN COMMUNITY-BASED RESEARCH
When inmates who are participants in a community-based research protocol are admitted to the facility, the following shall occur:

(a) The intake nurse shall collect all relevant data including name and contact information of the treating physician, and all available detail about the treatment regimen and the condition being treated.

(b) The responsible physician shall be contacted prior to the initiation of treatment.

(c) Consultation with community researchers shall be made by the responsible physician to determine the intent of the study and any necessary parameters to measure as the treatment period progresses.

(d) Necessary information shall be obtained so that withdrawal from the research protocol is done without harming the health of the inmate.

214.6 HUMAN RESEARCH STUDIES
This Lake County Sheriff’s Office does not endorse enrolling inmates into human research studies. Requests to enroll inmates in human research studies will not ordinarily be approved. However, any request to enroll an inmate into such a study must be reviewed by the Sheriff, the chief medical officer and legal counsel, and authorization provided prior to enrollment. Any authorized enrollments shall comply with all state and federal guidelines.
Inmate Records

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

216.2 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.

216.3 RECORD MAINTENANCE
It shall be the responsibility of the Records Bureau to maintain 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 inventory and 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
- Medical, dental, mental health, drug and alcohol screenings, assessments, treatments, and medications
Inmate Records

- Non-medical information regarding disabilities and other limitations

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

216.3.1 COURT ORDERS OF NAME OR GENDER CHANGE
When a court order is received that involves a name change of an inmate, the Records Bureau 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).

216.4 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 a 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.

216.5 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 Jail 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.

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

216.7 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.
Report Preparation

218.1 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.

218.2 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 Jail 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 Jail 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.

218.3 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).

218.3.1 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.
218.3.2 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 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 jail activities.
(e) Significant incidents related to medical issues, health or safety in the jail.
(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.

218.3.3 DEATHS
All deaths shall be investigated and a report completed by a qualified investigator 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.

218.3.4 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.

218.3.5 USE OF FORCE
Reports related to the use of force shall be made in accordance with the Use of Force Policy.

218.4 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.
218.4.1 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.

218.4.2 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.

218.5 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.

218.6 REPORT CHANGES OR ALTERATIONS
Reports that have been approved by a supervisor and submitted to the Records Bureau 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 Bureau 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.

218.7 ELECTRONIC SIGNATURES
The Lake Jail has established an electronic signature procedure for use by all employees of the Lake Jail. The Jail 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.
Key and Electronic Access Device Control

220.1 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.

220.2 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. (Title 15 CCR § 1029(a)(6)).

220.2.1 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 shift supervisor.

220.2.2 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 not be permitted inside the secure perimeter. Exterior door keys shall not be permitted inside the facility except during an emergency requiring access to the exterior doors.

220.2.3 KEY CONTROL
All facility keys shall be maintained in a locked key box within the Control room. This room shall have controlled access for staff only. Employees shall not duplicate, mark, alter or manufacture any key without written authorization from the Jail Commander or the authorized designee.

Keys will be handed from the on duty Deputy to the relieving Deputy.

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.

220.2.4 LOCK POLICY
All security perimeter entrances, 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.

220.2.5 TESTING
Locks to security doors or gates shall be tested for proper function at least weekly to ensure proper operation. This testing shall be documented and a weekly report forwarded to the facility administrator.

220.2.6 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, outside of the facility’s secure perimeter. Supervisors shall, at the beginning and end of their respective shifts, inventory and account for these keys.

220.2.7 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 Jail 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 Jail Commander will determine whether to re-key any locks that may have been compromised, and whether this should be done immediately.

The Jail 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.

220.2.8 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.
Key and Electronic Access Device Control

220.3 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.

220.4 ELECTRONIC ACCESS DEVICES
Proximity cards, fobs or other devices may be issued to staff to allow access to restricted or controlled areas of the facility. In the event of a lost or stolen device, an employee shall notify his/her supervisor as soon as it is known the device is missing. The device shall be immediately deactivated to prevent unauthorized use.
Daily Activity Logs and Shift Reports

222.1 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.

222.2 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.

222.3 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 and badge number 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.

222.4 SHIFT ACTIVITY LOG
Deputies shall enter all pertinent information into the daily activity log when any of the following occur:

- Personnel on-duty
- Bookings or releases
- Formal counts
Daily Activity Logs and Shift Reports

- Well-being checks, security checks and inspections and routine activities
- All searches/shakedowns
- 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
- Alarms and security equipment tests
- Medication delivery, sick call or inmate complaint of illness or injury and the action taken
- Locking and unlocking of inmate cells
- 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
- Sanitation inspections
- Use of emergency equipment
- Any use of force
- Key counts

222.5  SHIFT REPORT
Each member assigned to a security post, as well as the supervisor, shall prepare a shift report for the oncoming staff. This report shall include the following:

(a) The formal inmate count at the beginning and end of each shift
(b) Key count and exchange
(c) Money count (at whatever post money is handled)
(d) Exchange of security equipment (e.g., duress alarm, radio)
(e) The time the supervisor made rounds
(f) Information that would assist the oncoming staff
(g) Unusual occurrences

The shift report will be retained in accordance with established records retention schedules.
Administrative and Supervisory Inspections

226.1 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.

226.2 POLICY
Tours and inspections shall be conducted by administrative and supervisory staff throughout the facility at least weekly to facilitate and encourage communication among administrators, managers, supervisors, staff employees, inmates and the visiting public.

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

(a) The general conditions and overall climate of the facility.
(b) The living and working conditions of inmates.
(c) Communication between administrators, managers, supervisors, staff, inmates and the visiting public.
(d) Compliance with policies.
(e) Safety, security and sanitation concerns.
(f) Inmate concerns.
(g) Meal services.

226.3.1 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
Administrative and Supervisory Inspections

- Sallyports and transportation staging areas

226.4 INSPECTIONS OF SECURITY EQUIPMENT
The Jail 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 a written report of the results of the inspection. The Jail 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.

226.5 DOCUMENTATION AND REPORTING
Each staff member conducting the inspection or tour shall document the activity in the appropriate station form or facility log. The log should include any significant findings that indicate remedial action or training may be needed. Significant issues of security or safety shall be addressed promptly. Commendable or successful actions that should be replicated elsewhere in the facility should also be noted in the log.

The Shift Supervisor shall review the logs daily and ensure that any deficiencies noted are addressed or forwarded through the chain of command, as appropriate, and that commendable actions are also appropriately addressed.
Perimeter Security

228.1 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)).

228.2 POLICY
All entry points to the secure perimeter of the facility shall be monitored and controlled continuously by Control staff. 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.

228.2.1 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 Jail 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.

228.3 PROCEDURE
The secure perimeter shall be maintained by assigned staff as well as a contracted law enforcement agency. The Jail 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 Control. The Control staff shall initiate an appropriate law enforcement response.

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 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 Control staff prior to being allowed access to the delivery area.
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 Jail 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. 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.
Accessibility - Facility and Equipment

230.1 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).

230.2 POLICY
The Lake County Sheriff's Office prohibits discrimination of persons with disabilities. The Lake 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.

230.3 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.

230.3.1 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 memorandum to the Jail Commander with a copy to the ADA coordinator.
Members receiving a complaint of disability discrimination or inability to reasonably access the facility, or any other complaint related to the ADA, should document the complaint and refer the matter to the ADA coordinator.

230.4 ADA COORDINATOR
The Jail Commander should appoint a staff member to serve as 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 jail.

(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 jail 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.

230.4.1 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.

230.5 TRAINING
The ADA coordinator should work with the Training Manager 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.
News Media Relations

232.1 PURPOSE AND SCOPE
This policy provides guidelines for media releases and media access to this facility’s incidents and general public information.

232.2 POLICY
It is the policy of this office that the ultimate authority and responsibility for the release of information to the media shall remain with the Sheriff. However, in situations not warranting immediate notice to the Sheriff and in situations where the Sheriff has given prior approval, the Jail Commander or designated Public Information Officer may prepare and release information to the media in accordance with this policy and applicable law (15 CCR 1045).

232.2.1 MEDIA REQUEST
Any media request for information or access to this facility shall be referred to the designated Public Information Officer, or if unavailable, to the first available supervisor. Prior to releasing any information to the media, employees shall consider the following:

(a) At no time shall any employee of this office make any comment or release any official information to the media without prior approval from a supervisor or the designated Public Information Officer.

(b) In any situation involving a law enforcement agency, reasonable efforts shall be made to coordinate media releases with the authorized representative of each involved agency prior to the release of any information by this office.

(c) Under no circumstance should any member of this office make any comment to the media regarding any law enforcement or corrections-related incident that does not involve this office without prior approval of the Sheriff or the authorized designee.

232.3 MEDIA ACCESS
Authorized members of the media shall be provided access to scenes of disasters, investigations, emergencies and other law enforcement activities related to this facility, subject to the following conditions:

(a) The media representative shall produce valid press credentials that shall be prominently displayed at all times.

(b) Media representatives may be prevented from interfering with emergency operations and investigations.

1. In situations where media access would reasonably appear to interfere with the facility’s security, emergency operations and/or an investigation, every reasonable effort should be made to provide media representatives with information regarding the incident in such a manner that does not compromise
News Media Relations

the safety and security of the inmates, staff or the facility itself. All data released to the media should be coordinated through the office Public Information Officer or other designated spokesperson.

(c) No member of this office shall be subjected to media visits or interviews without the consent of the involved employee.

(d) Media interviews with individuals who are in custody shall not be permitted without the approval of the Sheriff and the express consent of the person in custody. The supervisor shall obtain a signed waiver from the inmate prior to being interviewed, photographed or videotaped.

232.3.1 PROVIDING ADVANCE INFORMATION

To protect the safety and rights of personnel working in this facility, advance information about planned actions by custody personnel, such as movement of persons in custody or the execution of a mass arrest in which field booking is arranged, should not be disclosed to the news media nor should media representatives be invited to be present at such actions except with the prior approval of the Sheriff.

Any exceptions to the above should only be considered for the furtherance of this facility's legitimate purposes. Prior to approving any exception, the Sheriff will consider, at minimum, whether the release of information or the presence of the media would unreasonably endanger any individual, prejudice the rights of any person or is otherwise prohibited by law.

232.4 SCOPE OF INFORMATION SUBJECT TO RELEASE

The Office will maintain a daily log of individuals who are currently in custody or were recently booked. Unless restricted by law and except to the extent that disclosure of a particular item of information would endanger the safety of a person involved in an investigation or would endanger the successful completion of the investigation or a related investigation, the following information on inmates and persons booked is considered public information and can be released upon request:

(a) The full name and occupation of the inmate

(b) The inmate's physical description, including date of birth

(c) Date and time of arrest

(d) Date and time of booking

(e) Location of arrest

(f) The factual circumstances surrounding the inmate's arrest

(g) All charges the inmate is being held on, including outstanding warrants, probation/parole holds

(h) Amount of bail
(i) The time and manner of the inmate's release or the location where the inmate is currently being held

(j) Court appearance dates

(k) Arresting agency

Information on this facility’s policies and procedures regarding non-security related matters, (i.e., programs, facility rules and regulations, visitation, health care, religious services) can be released to the general public by any custody staff member. A copy of the applicable portions of this facility's policy and procedures manual can be made available for public review with the approval of the Sheriff.

Any information related to the applicable portions shall be redacted before being provided to the general public. Applicable regulations for the operation of a custody facility can be made available for review by the public and inmates. Inmates can request a copy through the inmate programs staff.

Information related to escapes, suicides or crimes occurring in this facility shall only be released with the approval of the Jail Commander or the authorized designee.

Identifying information pertaining to a juvenile detainee shall not be publicly released without prior approval of a competent court, except as otherwise authorized by law. Information concerning incidents involving certain sex crimes and other offenses set forth in all applicable laws shall be restricted.

Identifying information concerning deceased individuals shall not be released to the media until notification of next of kin or until otherwise cleared by the coroner's/medical examiner's office or otherwise required by law.

232.4.1 RESTRICTED INFORMATION

It shall be the responsibility of the Jail Commander or the authorized designee to ensure that restricted information is not inappropriately released to the media by the Sheriff's Office. When in doubt, authorized and available legal counsel should be consulted.

Examples of such restricted information include, but are not limited to:

(a) Confidential personnel information concerning staff and volunteers of the Sheriff's Office.
   1. The identities of custody personnel involved in major incidents may only be released to the media pursuant to consent of the involved personnel or upon a request processed in accordance with the Public Records Act.

(b) Criminal history information.

(c) Information that would tend to endanger the safety of any individual or jeopardize the successful completion of any ongoing investigation.

(d) Information pertaining to pending litigation involving this office.
(e) Information obtained in confidence.

(f) Any information that is otherwise privileged or restricted under state or federal law.
Community Relations - Public Information Plan

234.1 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 (15 CCR 1045). (See the News Media Relations policy for guidance on media releases.)

234.2 RESPONSIBILITIES
The Jail 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 inmates as specified in 15 CCR sections:

1. 1045, Public Information Plan
2. 1061, Inmate Education Plan
3. 1062, Visiting
4. 1063, Correspondence
5. 1064, Library Service
6. 1065, Exercise and Recreation
7. 1066, Books, Newspapers, Periodicals and Writings
8. 1067, Access to Telephone
9. 1068, Access to Courts and Counsel
10. 1069, Inmate Orientation
11. 1070, Individual/Family Service Programs
12. 1071, Voting
13. 1072, Religious Observance
14. 1073, Inmate Grievance Procedure
15. 1080, Rules and Disciplinary Penalties
16. 1081, Plan for Inmate Discipline
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 inmates. 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.

234.3 PROHIBITED MATERIALS
Policies, procedures and other information and materials related to the safety and security of inmates, 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.

234.4 TOURS OF THE CUSTODY FACILITY
Tours of this facility may be arranged through the Jail Commander. Authorized tours are subject to facility rules and restrictions:

(a) Persons who tour this facility must be of an appropriate age as determined by the Sheriff.

(b) A short application form must be completed and a background check for warrants will be conducted before an applicant is approved to participate in a tour.

A record of all facility tours should be maintained in accordance with applicable retention requirements.
Victim Notification of Inmate Release

236.1 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.

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

236.3 PROCEDURE
The Jail 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.

236.4 NOTIFICATION
The Shift Supervisor or the authorized designee shall make a reasonable and good faith effort to notify the following prior to an inmate's release or in the event of the inmate's escape: victims; law enforcement agencies known to be involved in the case (if different from this office); any affected persons at the victim's request; and any sexual assault program, local battered women's or domestic abuse program. Additionally, the victim shall be notified when the inmate is captured and returned to custody.

Notification may be made in person, by direct contact on the telephone or by letter. A notification shall only be left on a messaging system if the victim has indicated in the notification request that such notification is acceptable or if staff cannot make contact with the victim.

If contact cannot be made and no suitable means exists to leave a message with the person to be notified, the Shift Supervisor or the authorized designee shall request the local law enforcement agency having jurisdiction where the person resides to perform a welfare check. A subsequent attempt shall be made to contact the person using the numbers listed in the notification request. All attempts to contact shall be documented in the release comments section.

Notifications of victims will consist of the following:

(a) The conditions of release, if any

(b) The time of release
Victim Notification of Inmate Release

(c) The time, date and place of the next scheduled court appearance of the arrested person and the victim's right to be present at the court appearance

(d) If the arrested person is charged with domestic abuse, the location and telephone number of the area battered women's shelter as designated by the Department of Corrections

As soon as reasonably practicable after the arrested person is released, the Jail Commander shall ensure that a written notice is personally delivered or mailed to the victim containing the information in (b) and (c) of the list above.

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 be subject to disciplinary action, up to and including termination from employment and/or criminal prosecution.

236.4.1 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)).

(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
Victim Notification of Inmate Release

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.
Community Service Program

238.1 PURPOSE AND SCOPE
The purpose of this policy is to establish guidelines for developing community service programs that are intended to provide work opportunities for inmates and needed services to the community.

238.2 POLICY
It is the policy of the Lake County Sheriff's Office to promote community service programs that provide work opportunities for inmates and will support public works projects, such as maintenance to county roadways or parks. Activities that benefit individuals, businesses or other private entities that are not considered a public works project are prohibited.

238.3 PROGRAM GUIDELINES
Any community service program is subject to the approval of the Jail Commander or the authorized designee.

Any such program shall be subject to the following guidelines:

(a) The program complies with all statutes, ordinances, regulations, labor agreements, permissions or restrictions relating to inmates whenever they are assigned to public works and community service projects.

(b) There is an availability of inmates who, as a matter of classification, are deemed to be eligible for participation in the community service program.

(c) The number of work opportunities available in the community will determine the availability of opportunities to participate in the community service program.

(d) Staff assigned to manage the program should strive to develop work assignments that give inmates an opportunity to develop good work habits and attitudes that can be applied to jobs obtained after release.

(e) Victim and community input should be solicited and considered when developing community service programs.

(f) There shall be sufficient staff assigned to supervise inmate work crews.

(g) Inmates shall receive appropriate training for the work assignment and the use of any related tools or equipment.

(h) The inmate workday should approximate the typical workday in the community for the type of work being performed. The normal work hours should not exceed eight hours per shift and must include adequate break and meal time.

(i) Inmate performance while in the program should be regularly evaluated and recorded. Poor performance in the work program or violation of rules may render the inmate ineligible to participate in the work program. Any violation of work rules may result in
disciplinary action that may include the loss of credits previously awarded for good behavior and work time. Inmates who do not comply with program rules, or for any reason cannot work, will be reclassified in accordance with the policies and procedures of the Lake County Sheriff's Office.

(j) The working conditions for any inmate must comply with all applicable federal, state or local work safety laws and regulations.

238.4 SELECTION PROCESS
Participation in any community service program is strictly voluntary. A classification process that clearly describes the criteria for program participation will be developed by the supervisor in charge of the program.

Any inmate desiring to participate in a community service program is subject to the following:

(a) The inmate must submit to a screening process, including a criminal history check, to ensure that his/her criminal history is compatible with work in non-secure areas.

(b) The inmate must agree in writing to participate in a community service program.

(c) Inmates may be charged a fee for participation in the program in order to offset the cost of administration and staffing.
Vehicle Safety

240.1 PURPOSE AND SCOPE
It is the policy of the Sheriff's Office to maintain and operate the vehicles assigned to this facility in a lawful and safe manner. The Sheriff's Office utilizes County-owned, and Sheriff's Office-owned motor vehicles for a variety of applications. To maintain a system of accountability and ensure that County-owned, and Sheriff's Office-owned vehicles are used appropriately, regulations relating to the use of these vehicles have been established. The term County-owned, and Sheriff's Office-owned as used in this section also refers to any vehicle leased or rented by the Sheriff's Office.

240.2 USE AND SECURITY OF OFFICE VEHICLES
All staff members who operate County-owned or Sheriff's Office-owned or leased vehicles must comply with all applicable state laws and must possess a valid driver's license endorsed for the type of vehicle operated.

A list of individuals who are authorized to drive County-owned or Sheriff's Office-owned vehicles shall be maintained by the Jail Commander. The list shall be updated monthly to ensure that only qualified personnel who are in possession of a current and appropriately endorsed operator’s license are on the list.

240.2.1 USE OF SEAT BELTS
The use of seat belts and other safety restraints significantly reduces the chance of death or injury in case of a traffic collision. This policy establishes guidelines for seat belt use to promote maximum operator and passenger safety, thus reducing the possibility of death or injury as the result of a motor vehicle crash. This policy will apply to all members operating or riding in office vehicles.

All members shall wear properly adjusted safety restraints when operating or riding in a seat equipped with restraints, in any vehicle owned, leased or rented by this office, while on- or off-duty, or in any privately owned vehicle while on-duty. The member driving such a vehicle shall ensure that all other occupants, including non-members, are also properly restrained.

Exceptions to the requirement to wear safety restraints may be made only in exceptional situations where, due to unusual circumstances, wearing a seat belt would endanger the member or the public. Members must be prepared to justify any deviation from this requirement.

Whenever possible, inmates should be secured in a prisoner restraint system or, when a prisoner restraint system is not available, by seat belts. The inmate should be in the seating position for which seat belts have been provided by the vehicle manufacturer. The prisoner restraint system is not intended to be a substitute for handcuffs or other appendage restraints.

No person shall operate any office vehicle in which the seat belt in the driver’s position is inoperable. No person shall be transported in a seated position in which the seat belt is inoperable.
Vehicle Safety

No person shall modify, remove, deactivate or otherwise tamper with the vehicle safety belts, except for vehicle maintenance and repair staff, who shall do so only with the express authorization of the Sheriff.

Members who discover an inoperable restraint system shall report the defect to the appropriate supervisor. Prompt action will be taken to replace or repair the system.

240.2.2 VEHICLE SECURITY
County-owned or Sheriff's Office-owned vehicles will be locked and the keys will be secured when not in use. The staff will make every effort to ensure that the vehicles are parked in a secure location.

Under no circumstances will inmates be allowed to operate a vehicle or have possession of any vehicle keys. Inmate workers who are assigned to clean vehicles must be closely supervised by staff.

The loss of any vehicle key shall be promptly reported, in writing, to the on-duty supervisor.

240.3 VEHICLE INSPECTIONS
All office-owned vehicles are subject to inspection and or search at any time by a supervisor. No member assigned to or operating such vehicle shall be entitled to any expectation of privacy with respect to the vehicle or any of its contents, regardless of who owns the contents.

240.4 VEHICLE SAFETY REPAIRS
Anyone authorized to drive office vehicles is responsible for assisting in maintaining the vehicles so that they are properly equipped, maintained and refueled and present a clean appearance.

Anyone authorized to drive office vehicles is responsible for inspecting the interior and exterior of any assigned vehicle before placing the vehicle into service and again at the conclusion of his/her shift. Any previously unreported damage, mechanical problems, unauthorized contents or other problems with the vehicle shall be promptly reported to a supervisor and documented as appropriate.

Vehicles that are deemed as unsafe shall not be used until necessary repairs are made. The written request for repairs shall be submitted before the operator checks out a replacement vehicle. The Jail Commander or the authorized designee shall monitor the maintenance requests and ensure that the necessary repairs are made before the vehicle is placed back into service.

Annual vehicle safety inspections will be conducted on all vehicles that are owned, leased or used by the Office. The inspection will be conducted by a qualified individual designated by the Jail Commander. Inspection reports will be forwarded to and maintained by the Jail Commander.

240.5 USE OF PERSONAL VEHICLES
The use of personal vehicles for official business must be approved by the Jail Commander. The Jail Commander or the authorized designee shall verify that the personal vehicle meets the state's insurance requirements. A copy of the insurance card shall be retained in facility files. All policies
and procedures applicable to facility vehicles shall apply to the personal vehicle while it is being used for official business.

240.6 COLLISION DAMAGE, ABUSE AND MISUSE
MEMBER OR EMPLOYEE RESPONSIBILITIES

(a) When a County-owned, Sheriff's Office-owned or leased vehicle is involved in a traffic collision, the involved member or employee shall promptly notify The Shift Supervisor who will immediately advise Central Dispatch to request the appropriate jurisdictional Law Enforcement Agency to respond in order to conduct a vehicle accident investigation. A traffic collision report shall be filed with the agency having jurisdiction. The member or employee shall complete the Sheriff's Office vehicle collision form.

(b) When a collision involves a County-owned or Sheriff's Office-owned vehicle or when a member or employee of the Sheriff's Office is an involved driver in a collision that occurs in this jurisdiction, and the collision results in serious injury or death or potentially involves any criminal charge, an outside agency should be summoned to handle the investigation.

(c) In the event the accident occurs while outside Lake County, it shall be the responsibility of the member or employee operating the County-owned or Sheriff's Office-owned vehicle, to ensure that the appropriate Law Enforcement Agency is notified to conduct the vehicle accident investigation.

(d) The member or employee involved in the vehicle accident, will submit, before the completion of his or her shift, if able, a detailed written report of the circumstances. In addition, the member or employee will complete and submit the "County of Lake Auto and Liability Accident Report" with his or her written report.

(e) Any damage to a vehicle that was not caused by a traffic collision shall be immediately reported during the shift in which the damage was discovered. It shall be documented in memorandum format and forwarded to the Shift Supervisor. An administrative investigation will be conducted to determine if there is any vehicle abuse or misuse. If it is determined that misuse or abuse was a result of negligent conduct or operation, appropriate disciplinary action may result.

240.6.1 SUPERVISOR OR OFFICER IN CHARGE RESPONSIBILITIES

(a) In the event that the member or employee is unable to complete the aforementioned reports, due to injuries sustained in the vehicle accident, the Shift Supervisor or Commander who receives notification will ensure that a written report outlining the circumstances of the vehicle accident is completed.
(b) The Shift Supervisor or Commander receiving notification of the vehicle accident will ensure that the member or employee has followed and complied with the procedures outlined in the Employee Responsibilities (preceding this section).

(c) In all cases, the Shift Supervisor or Commander receiving notification of the vehicle accident will complete and submit before the completion of his or her shift, a detailed written report of the incident. This report will contain, but not be limited to:

1. Date and time he or she received notice of the incident.
2. Name of the Law Enforcement Agency notified to conduct the Accident Investigation.
3. The circumstances of the incident as related to him or her by the member or employee.
4. Disposition of the County-owned or Sheriff's Office-owned vehicle.

240.6.2 INVESTIGATION BY ENFORCEMENT SUPERVISOR OR SUPERIOR DEPUTY

(a) Unless an emergency requires his or her presence elsewhere, an on-duty Enforcement Supervisor will immediately respond to the scene of the pursuit or enforcement action related vehicle accident, for the purposes or conducting an administrative investigation.

1. NOTE: In all cases, the initial administrative investigation will be conducted by a Deputy or superior rank to the member involved.

2. The On-duty Enforcement Supervisor will submit a detailed written report of the incident. This report will contain, but not be limited to:

(b) Date and time that he or she received notice of the incident.

1. Time that he or she arrived at the scene.
2. Name, address, and telephone numbers (home and business) of all know witnesses.
3. Pertinent information provided by each witness.

   (a) All pertinent information related to the scene and circumstances of the incident.

   (b) NOTE: Supervisors should not duplicate any specific measurements of other information that will be documented in the report, completed by the Law Enforcement Agency investigating the accident.

   (c) Photographs, when possible and practical, of the scene prior to removing any vehicles.
(d) Violations of any state law or Lake County Sheriff's Office policy and procedures.

240.7 TOLL ROAD USE

Law enforcement vehicles are not routinely exempt from incurring toll road charges. Pursuant to the non-revenue policy of the toll roads, law enforcement agencies responding to an emergency or incident on the toll roads while on-duty are exempt from paying the toll.

Commuting or returning to the Office after an emergency does not qualify for this exemption; personnel using office-owned vehicles are subject to the toll charge.

To avoid unnecessary toll road violation charges, all members operating a office-owned vehicle on a toll road shall adhere to the following:

(a) Members operating office-owned vehicles for any reason other than an initial response to an emergency shall stop and pay the appropriate toll charge.

(b) Members may submit for reimbursement from the Office for any toll fees.

(c) Members driving office-owned vehicles through a toll plaza or booth during a response to an emergency shall draft a memo to his/her supervisor within five working days, explaining the circumstances.
Fitness for Duty

242.1 PURPOSE AND SCOPE
The purpose of this policy is to ensure that all deputies of the Sheriff’s Office are fit for duty and able to perform their job functions upon hire, and remain fit for duty throughout their employment.

242.2 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.

242.3 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 Jail Commander should determine whether the employee should be temporarily relieved of duty.

(e) The Jail Commander shall be promptly notified in the event that any employee is relieved of duty.
242.4 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 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.

242.5 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 Jail Commander, any employee whose actions or use of force 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.

242.6 PHYSICAL AND PSYCHOLOGICAL EXAMINATIONS

(a) Whenever circumstances reasonably indicate that the employee may be unfit for duty, the Jail 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.
Fitness for Duty

(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 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.

242.7 MEDICAL RECORDS
All employee medical information and records shall be treated as confidential and stored in the employee’s separate medical file.
Staffing Plan

244.1 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.

244.2 POLICY
It is the policy of the Lake 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.

244.3 STAFFING PLAN REQUIREMENTS
The Jail 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

244.4 STAFFING ANALYSIS
The Sheriff or the authorized designee shall complete an annual comprehensive staffing analysis to evaluate personnel requirements and available staffing levels. The staffing analysis will be used to determine staffing needs and to develop staffing plans.

This analysis shall include information gathered in collaboration with the health care provider in each facility regarding staffing requirements. The analysis relating to health care personnel shall be annually reviewed for adequacy by the health authority.

The Jail Commander, in conjunction with the PREA coordinator, should ensure that staffing levels are sufficient to consistently and adequately fill essential positions, as determined by the staffing plan (28 CFR 115.13). Relief factors for each classification and position should be calculated into the staffing analysis to ensure staffing levels will consistently meet requirements. Staff should be deployed in an efficient and cost-effective manner that provides for the safety and security of the staff, inmates and the public.
The staffing analysis should be used to identify whether required activities are being performed competently and in compliance with current laws and office policies. If deficiencies are noted, the staffing analysis should also include recommendations regarding what corrective measures may be needed, including the following:

(a) Operational change  
(b) Equipment requirement  
(c) Additional training  
(d) Supervisory intervention  
(e) Additional personnel

244.4.1 DATA COLLECTION FOR ANALYSIS
The following data should be collected and included in the annual staffing analysis:

- All categories of leave usage for each staff member working in the jail
- Date of hire or assignment to a jail position for each member
- Date of transfer from the jail to another non-custody position for each member
- Annual hours of authorized overtime expended during the previous year
- Number of part-time or extra personnel hired during the previous year
- Details of any unusual occurrence or significant medical issues in the jail that were related to staffing during the previous year
- Details of claims or litigation, if any, that were related to staffing levels and were initiated against the facility in the previous year
- Labor contracts/collective bargaining agreements relating to corrections and medical personnel
- Annual training requirements that affected staffing levels in the jail
- Concerns expressed by members of the public
- Any investigations or reports by the grand jury or other government agency, jail monitor or ombudsman
- Other data that may influence the number of personnel available to occupy posted positions

244.5 REPORTING
The Sheriff will cause a report of the findings of the staff analysis to be submitted to the officials responsible for funding the jail operation.
Employee Speech, Expression and Social Networking

246.1 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.

246.1.1 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, e-mail, file transfer, remote computer access, news services, social networking, social media, instant messaging, blogs, forums, video and other file-sharing sites.

246.2 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 Lake 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.

246.3 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 Lake 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:
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.

246.4 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 jail. 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 jail 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 vehicles, equipment or other material that specifically identifies the Office on any
Employee Speech, Expression and Social Networking

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 office-owned, 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).
2. 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).

246.4.1 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).
246.5 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.

246.6 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.

246.7 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.
Personal Electronic Devices

248.1 PURPOSE AND SCOPE

To establish guidelines for Sheriff's Office members to follow regarding the possession and use of electronic devices while on-duty.

248.2 POLICY

The Lake County Sheriff's Office has implemented guidelines addressing the use and possession of electronic devices by custody staff while in the performance of their duties. No personal cellular telephones, tablets, or other electronic devices are allowed in the secure areas of the Lake County Jail without prior authorization from the Jail Commander.

248.3 PROCEDURE

Custody staff will not engage in any activity that may distract them from the performance of their duties.

a. Examples of these distractions include, but are not limited to the following:
   1. Using electronic device for Reading books, periodicals or magazines;
   2. Watching videos or any other form of streaming media;
   3. Using office or personal electronic devices for non-work related viewing or communications;
   4. Listening to music at a level that impedes one's ability to hear your department issued radio, inmates, intercoms, etc.

b. Using headphones to listen to electronic devices is strictly prohibited.

c. Viewing or participating in any form of social media while on duty is strictly prohibited.

d. Use of cell phones in court when not in conjunction with your duties is strictly prohibited.

e. Employees may keep their cellular telephone(s) and electronic devices in their mail box, locker or car. Employees will be allowed to use their electronic devices during approved breaks, while in the break area behind booking or outside of the secured areas. Medical Staff will be allowed to have cellular telephones in the medical office, but not while in secured housing units.

Certain employees will be allowed to have a cellular telephone on their person during work hours to be used for work related purposes only.
Personal Electronic Devices

These include the Sheriff, Undersheriff, Jail Commander, Captain, Lieutenant, Sergeants or an Approved OIC (only while working in that capacity), Transportation deputies (unless working a post in the Jail), Medical Manger, Nurse Practitioner, and Doctor/Dentist and other staff upon approval from the Jail Commander.
Chapter 3 - Recruitment Selection and Planning
Employee Orientation

301.1 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.

301.2 NEW EMPLOYEE ORIENTATION
Each new facility employee shall receive an orientation prior to assuming his/her duties from Lake County Human Resources followed by an on site Training Officer. At a minimum, the orientation shall include:

(a) Working conditions
(b) Code of ethics
(c) Employee rights and responsibilities
(d) Overview of the criminal justice system
(e) Tour of the facility
(f) Facility goals and objectives
(g) Facility organization
(h) Staff rules and regulations
(i) Program overview

301.3 EMPLOYEE ACKNOWLEDGEMENTS
Sheriff’s 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

303.1 PURPOSE AND SCOPE
This policy is designed to support the ongoing professional education of Sheriff's 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 Sheriff's Office and the community.

303.1.1 PHILOSOPHY
The Sheriff's 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 Sheriff's Office encourages all personnel to participate in formal education on a continuing basis.

303.2 OBJECTIVES
Training involves activities whereby deputies, professional staff, support and contractor personnel learn and demonstrate an understanding of the specific job skills required for each position.

Individuals who engage in furthering their education in conjunction with skills-based training make for well-rounded employees who can better serve the mission of the Sheriff's Office and the community.

Supervisors should accommodate, to the extent feasible and schedules permitting, requests by personnel for shift adjustments and available leave time to assist personnel with their continuing education efforts.

303.3 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

305.1 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.

305.2 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).

305.3 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.

305.4 TRAINING FOR NEW MANAGERS AND SUPERVISORS
All Jail 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).

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

305.5 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 Manager to ensure that the following is maintained on file for all training provided by the Office:

- The course outline or lesson plan
Training for Managers and Supervisors

- A roster signed and dated by those in attendance
- 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 Manager with evidence of completed training or education in a timely manner. The Training Manager 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.
Facility Training Officer Program

307.1 PURPOSE AND SCOPE
The Facility 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 Facility 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.

307.2 TRAINING OFFICER
The Facility Training Officer (FTO) 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.

307.2.1 SELECTION PROCESS
Facility Training officers will be selected based on the following desired qualifications:

(a) A desire to perform the training mission
(b) Two years as a Deputy Sheriff Corrections
(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 FTOs
(f) The Jail Commander shall have final approval over the selection of Facility Training Officer candidates.
(g) Candidates who are approved by the Jail Commander must successfully complete a S.T.C. certified training course within one year of appointment to the position of Facility Training Officer.

Any FTO who does not perform his or her responsibilities in a satisfactory manner may be decertified by the Jail Commander.

307.3 FACILITY TRAINING OFFICER RESPONSIBILITIES

(a) FTOs shall complete and submit a written evaluation on the performance of their assigned trainee to the FTO’s immediate supervisor on a daily basis.
(b) FTOs 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 FTO at the end of each phase of training.
Facility Training Officer Program

(d) FTOs 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.

(e) The Training Guide for a particular trainee shall be kept by the trainee. Facility Training Officers shall be responsible for documenting the training curriculum covered and keeping the Guide current.

(f) The primary Facility Training Officer for a particular trainee shall be responsible for returning the completed Guide, containing the documentation, to the Training Supervisor upon the completion of the trainee’s facility training.

(g) The standard assignment to the Facility Training Program shall be 12 weeks. Every trainee shall be under the immediate supervision of the assigned FTO at all times during the 12 weeks. Three FTOs will be assigned to supervise or monitor each recruit.

307.4 FACILITY TRAINING OFFICER PROGRAM SUPERVISOR
The supervisor will be selected from the rank of sergeant or above by the Jail Commander or the authorized designee. The supervisor’s responsibilities include the following:

(a) Assignment of trainees to FTOs.
(b) Conduct FTO meetings.
(c) Maintain and ensure FTO/trainee performance evaluations are completed in a timely manner.
(d) Maintain, update and issue the training manual to each trainee.
(e) Monitor individual FTO performance.
(f) Monitor the overall FTO program.
(g) Develop ongoing training for FTOs.
(h) Participate in the selection of the FTOs.
(i) Will issue a Training Guide for each trainee. The Guide will contain the curriculum which the trainee must learn and the forms on which the FTOs are to document their mastery of the material.
(j) After consultation with the Custody Division Commander, and at the recommendation of the Facility Training Supervisor, the Jail Commander may release a trainee, prior to the end of the normal 12 week training if said trainee has performed exceptionally well.
(k) In the event that a trainee’s performance is deficient after 12 weeks of training, and there is a reasonable likelihood that the deficiencies can be corrected with additional training, the Facility Training Supervisor shall be responsible for suggesting an extension of the training period. The recommendation for extension shall be made to the Custody Commander, who shall review the case and determine whether the
Facility Training Officer Program

trainee can probably benefit from additional training. The duration of the extension will be determined by the Facility Training Supervisor, on a case by case basis.

(l) In the event that the performance of a trainee is unsatisfactory, and the prospect for correcting the deficiencies is poor, the Facility Training Supervisor, via the Custody Division Commander, shall recommend to the Sheriff that the trainee's employment be terminated.
Training

310.1 PURPOSE AND SCOPE
It is the policy of the Sheriff's Office to assign all new deputies to a structured jail 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.

310.2 MINIMUM TRAINING REQUIREMENTS
All deputies, full- or part-time, shall successfully complete the Corrections Officer Core Course as described in 15 CCR 179, within one year from the date of assignment.

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)).

Individuals assigned to work in the facility prior to completing the required training may do so only when under the direct supervision of a fully trained deputy (15 CCR 1020(a)).

310.3 PROBATIONARY PERIOD EVALUATION
Refer to sub-section 436 under the Lake County Sheriff's Office Personnel rules for information on Evaluations.
Specialized Training

312.1 PURPOSE AND SCOPE
Deputy Sheriff Corrections who are assigned to Special Emergency Response Teams (S.E.R.T.) 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.

312.2 QUALIFICATIONS
To be eligible for assignment to a S.E.R.T., deputies are required to be off probation and to have at least one (1) year of experience as a deputy.

312.3 TRAINING
The Training Manager 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 24-hour annual training requirement.

The Sheriff's Office will use 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 in the subject matter presented.

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

314.1 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.

314.2 FIREARMS TRAINING
All personnel authorized to use firearms shall receive training in accordance with state law before being assigned to a post involving the possible use of such weapons.

Notwithstanding any statutory and regulatory requirements, at a minimum, firearms training will cover the laws, use, safety and care of firearms and the constraints on their use.

Whenever possible, the Sheriff's Office will use courses certified by a competent government or standards-setting organization. Whenever training is provided by the Sheriff's Office, the Training Manager should ensure that a course outline and/or lesson plan, a roster signed and dated by those in attendance and the name of the person coordinating the event are on file.

Personnel who are authorized to carry a firearm in the performance of their duties are required to maintain proficiency with firearms used in the course of their assignment. All custody personnel who carry firearms are required to qualify annually with their duty weapon on an approved range course.

The Rangemaster shall keep accurate records of quarterly qualifications, repairs, maintenance and training records as directed by the Training Manager. In addition to regular qualification schedules, the Rangemaster shall be responsible for providing all affected personnel with annual practical training that is designed to simulate situations that may occur in a custody facility setting. At least annually, all personnel carrying a firearm will receive training on the Use of Force Policy and demonstrate their knowledge and understanding by passing either a performance or written test.

314.3 FIREARMS NON-QUALIFICATION
If any staff member is unable to qualify for any reason, including injury, illness, duty status or scheduling conflict, that staff member shall submit a memorandum to his/her immediate supervisor prior to the end of the required shooting period.

Members who repeatedly fail to qualify will be relieved from the assignment that authorized a firearm; appropriate disciplinary action may follow.

Personnel who fail to qualify on their first shooting attempt shall be provided remedial training until proficiency is demonstrated and will be subject to the following requirements:

   (a) Additional range assignments may be required until consistent weapon proficiency is demonstrated.
(b) Members shall be given credit for a range qualification after remedial training and a qualifying score is obtained.

(c) No range credit will be given for the following:
   1. Unauthorized range makeup
   2. Failure to qualify after remedial training
Chemical Agents Training

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

316.2 POLICY
The Office authorizes the use of selected chemical agents. Chemical agents are weapons used to minimize the potential for injury to members, inmates and others. Chemical agents should only be used in situations where such force reasonably appears justified and necessary.

316.3 CHEMICAL AGENT TRAINING
Only members trained and having shown adequate proficiency in the use of any chemical agent and the Use of Force Policy are authorized to carry the device.

(a) The Training Manager shall ensure that appropriate training for all chemical agents occurs annually at a minimum.

(b) All initial and proficiency training for chemical agents will be documented in the member’s training file.

(c) Members failing to demonstrate continuing proficiency with chemical agents or knowledge of the Use of Force Policy will lose their authorization to carry or use the devices and will be provided remedial training. If, after two remedial training sessions, a member fails to demonstrate proficiency with chemical agents or knowledge of the Use of Force Policy, the member may be subject to discipline.

(d) The Training Manager shall be responsible for ensuring that all personnel who are authorized to use chemical agents have also been trained in the proper medical treatment of persons who have been affected by the use of chemical agents. Training should include the initial treatment (e.g., providing the proper solution to cleanse the affected area) and knowing when to summon medical personnel for more severe effects.

316.4 PROFICIENCY TESTING
The Training Manager shall ensure that all training delivered to staff should also test proficiency in order to document that the member understands the subject matter, and that proficiency training is monitored and documented by a certified weapons or tactical instructor.

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

• A course outline or lesson plan
• A roster signed and dated by those in attendance
• The name of the person coordinating the training

The Training Manager shall ensure that copies of such training records are placed in the member’s training file and retained in accordance with established records retention schedules.

316.6 REVIEW, INSPECTION AND APPROVAL

Every chemical agent delivery device will be periodically inspected by the Rangemaster or the designated instructor for a particular device.
Prison Rape Elimination Act Training

318.1 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.).

318.2 POLICY
The Lake 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.

318.3 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 Manager 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 Manager 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 jail.
(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.
Prison Rape Elimination Act Training

(k) How to comply with relevant laws related to mandatory reporting of sexual abuse and sexual harassment to outside authorities.

(l) 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 Manager shall document, through signature or electronic verification, that staff, volunteers and contractors have received and understand the training. The Professional Standards Unit will maintain training records on all those receiving training in accordance with procedures developed by the Training Manager.

The Training Manager 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)

318.4 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 Manager 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.

318.5 SPECIALIZED INVESTIGATIVE TRAINING

Specialized investigative training for investigators shall include the uniform evidence protocol to maximize potential for obtaining useable physical evidence; techniques for interviewing sexual abuse victims; proper use of Miranda and Garrity warnings; sexual abuse evidence collection in confinement settings; and the criteria and evidence required to substantiate a case for administrative action or referral for prosecution (28 CFR 115.21; 28 CFR 115.34).
Prison Rape Elimination Act Training

318.6 VOLUNTEER AND CONTRACTOR TRAINING
The Lake County Jail shall ensure that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the Lake County Jail sexual abuse and sexual harassment prevention, detection, and response policies and procedures.

The level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates, but all volunteers and contractors who have contact with inmates shall be notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

The agency shall maintain documentation confirming that volunteers and contractors understand the training they have received.
Health Care Staff Orientation

320.1 PURPOSE AND SCOPE
The purpose of this policy is to establish an orientation period for all new health care staff working in the facility. 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.

(a) Lake County Health Services has a contract with the Wellpath which takes care of:
   1. New Health Care Staff Orientation
   2. Health Care Staff Refresher Training
   3. Facility - Specific Training
   4. Testing
   5. Maintenance of Training Records

320.2 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 Lake 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

320.3 TRAINING RECORDS
The Training Manager, in coordination with the Responsible Physician, shall be responsible for developing and maintaining training records in accordance with established records retention
schedules. The Training Manager shall also maintain a file of professional licensure and certifications for each member of the health care staff.
Volunteer Program

322.1 PURPOSE AND SCOPE
It is the policy of the Sheriff's 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.

322.1.1 DEFINITION OF VOLUNTEER
An individual who performs a service for the Sheriff's 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.

322.2 VOLUNTEER PROGRAM MANAGEMENT

322.2.1 PROGRAM COORDINATOR
The program coordinator shall be appointed by the Jail Commander. The function of the program coordinator is to provide a central coordinating point for effective program management within the Sheriff's Office, and to direct and assist staff and volunteer efforts to provide more productive services. The program coordinator should work with other Sheriff's 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.
Volunteer Program

(k) Maintaining liaison with other community programs that use volunteers and assisting in community efforts to recognize and promote volunteering.

322.2.2 RECRUITMENT
Volunteers should be recruited on a continuous and ongoing basis in accordance with Sheriff's Office policy on equal opportunity nondiscriminatory employment. A primary qualification for participation should be an interest in, and an ability to assist the Sheriff's Office in serving the public.

Requests for volunteers should be submitted in writing by interested staff to the program coordinator 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 coordinator may withhold assignment of any volunteer until such time as the requesting unit is prepared to make effective use of volunteer resources.

322.2.3 SCREENING
All prospective volunteers should complete the volunteer application form. The program coordinator 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.

322.2.4 SELECTION AND PLACEMENT
Service as a volunteer with the Sheriff's Office shall begin with an official notice of acceptance or appointment to a volunteer position. Notice may only be given by an authorized representative of the Sheriff's Office, normally the program coordinator. No volunteer should begin any assignment until he/she has been officially accepted for the position. Each volunteer should complete all required enrollment paperwork and will receive a copy of his/her position description and agreement of service with the Sheriff's Office.

Volunteers should be placed only in assignments or programs that are consistent with their knowledge, skills, abilities and the needs of the facility.
322.2.5 TRAINING
The program coordinator or the authorized designee shall be responsible for developing and maintaining training curriculum and any related forms specific to volunteer assignments.

The program coordinator 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 Sheriff's Office

The program coordinator 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 Sheriff's 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 Sheriff's Office.

322.2.6 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.

322.2.7 DRESS CODE
As representatives of the Sheriff's 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 Sheriff's 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 Sheriff's Office property at the termination of service.

322.3 SUPERVISION OF VOLUNTEERS
Each volunteer who is accepted to a position with the Sheriff's Office and assigned to the jail must have a clearly identified supervisor who is responsible for direct management of that 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.

322.4 HEALTH CARE VOLUNTEERS
The program coordinator will coordinate volunteer activities with the qualified health care professionals. Health care volunteers will be subject to all of the volunteer, recruitment, selection and training requirements of the Office. The qualified health care professionals may have additional requirements and training for health care volunteers.

The program coordinator shall ensure that any volunteer performing health care duties possesses the appropriate credentials and training, in coordination with the qualified health care professionals, and shall ensure that signed agreement forms pertaining to the security and confidentiality of information are on file with the Office.
Volunteer Program

The program coordinator shall also ensure that volunteers performing health care duties have received specific training in topics that including fire, safety, security, contraband and inmate culture.

322.5 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 Sheriff's 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 Sheriff's Office policy and supervisory personnel.

Each volunteer will be required to sign a nondisclosure agreement before being given an assignment with the Sheriff's 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 Sheriff's Office, or maintain that they represent the Sheriff's Office in such matters without permission from the proper office personnel.

322.6 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 Sheriff's Office shall be for official and authorized use only. Any property or equipment issued to a volunteer shall remain the property of the Sheriff's Office and shall be returned at the termination of service.

322.6.1 VEHICLE USE
Volunteers assigned to duties that require the use of a vehicle must first complete:

(a) A safety briefing and office-approved driver-safety course.

(b) Verification that the volunteer possesses a valid driver’s license.

(c) Verification that the volunteer carries current vehicle insurance.

The program coordinator should ensure that all volunteers receive safety briefing updates, and should verify their license and insurance at least once a year.

When operating any office vehicle, volunteers shall obey all rules of the road, including seat belt requirements. Smoking is prohibited in all office vehicles.

322.6.2 TELECOMMUNICATION SYSTEMS USAGE
Volunteers with access to law enforcement telecommunication systems shall successfully complete all mandated access training and radio procedures training prior to using any such
Volunteer Program

equipment. Volunteers shall comply with all policies and procedures related to the use of such equipment. The program coordinator should ensure that appropriate training is provided for volunteers whenever necessary.

322.7 DISCIPLINARY PROCEDURES/TERMINATION
A volunteer may be removed from the volunteer program at the discretion of the Sheriff, Jail Commander or the program coordinator. Volunteers shall have no property interests in their continued appointment.

Volunteers may resign from volunteer service with the Sheriff's 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.

322.7.1 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 Sheriff's Office.

322.8 EVALUATION
An evaluation of the overall volunteer program will be conducted on an annual basis by the program coordinator. Regular evaluations should be conducted with volunteers to ensure the best use of human resources, to ensure personnel problems can be identified and dealt with promptly and fairly, and to ensure optimum satisfaction on the part of volunteers.

322.9 VOLUNTEER REGISTRATION
All volunteers shall be registered with the Sheriff's Office and Lake County Human Resources for insurance purposes, and each volunteer shall be issued an identification card. The facility shall maintain an identification record for each volunteer that includes a photograph, home address, current telephone numbers, background certification, training/orientation certifications, and list of special skills, languages spoken or volunteer specialty.
Briefing Training

324.1 PURPOSE AND SCOPE
Briefing training is generally conducted at the beginning of the deputy’s assigned shift. Briefing training provides an opportunity for an important exchange of information between employees and supervisors.

324.2 POLICY
Briefing training covers a wide range of topics selected by the management/supervisory and training staff.

The supervisor conducting briefing training is responsible for the preparation of the materials necessary for constructive training. Supervisors may delegate this responsibility to a subordinate deputy in their absence or for training purposes. The briefing training will be based upon a structured program to provide topics related to, but not limited to, the following:

(a) Custody facility policies and procedures
(b) Sheriff’s Office directives not yet established into policy
(c) Reviewing recent incidents for training purposes
(d) In preparation or response to an unusual occurrence
(e) Statutory requirements or court orders
(f) Operation of new equipment, including computer software
(g) Notifying the staff of changes in schedules and assignments
(h) Any other topic as determined by the Sheriff or Jail Commander

324.3 COMPUTER-BASED TRAINING OPTIONS
The Lexipol Daily Training Bulletins (DTBs) is a web-based system that provides training on the Lake County Sheriff’s Office Custody Manual and other important topics. Generally, one training bulletin is available for each day of the month. However, the number of DTBs may be adjusted by the Training Manager.

Personnel assigned to participate in DTBs should only use the password and login name assigned to them by the Training Manager. Personnel should not share their password with others and should frequently change their password to protect the security of the system. After each session, employees should logoff the system to prevent unauthorized access. The content of the DTBs is copyrighted material and shall not be shared with others outside of the Sheriff's Office.

Employees who are assigned to participate in the DTB program should complete each DTB at the beginning of their shift or as otherwise directed by their supervisor. Employees should not allow uncompleted DTBs to build up over time. Personnel may be required to complete DTBs missed during extended absences (e.g., vacation, medical leave) upon returning to duty. Although the
Briefing Training

DTB system can be accessed from any Internet-active computer, employees shall only take DTBs as part of their on-duty assignment as there will be no authorization for taking or viewing DTBs while off-duty.

Supervisors will be responsible for monitoring the progress of personnel under their command to ensure compliance with this policy.

324.4 TRAINING RECORDS

The Training Manager will assist the Shift Supervisors with identifying relevant topics for delivery during briefing training and will be responsible for maintaining all briefing training records.
Training Plan

326.1 PURPOSE AND SCOPE
The purpose of this policy is to establish a training plan that will provide for the professional growth and continued development of facility personnel and to forecast annual funding needs for future training. By doing so, the Office will ensure its personnel possess the knowledge and skills necessary to professionally manage the inmate population.

326.2 POLICY
The Training Manager shall conduct an annual training needs assessment to determine the training needs of all employees based upon state laws, regulations, certification requirements and continued professional training requirements.

A training plan shall be based on the assessment. It is the responsibility of the Training Manager to develop, maintain, review and update the training plan on an annual basis.

The annual training plan should be presented to the management staff for review. The approved training plan should include the annual funding requirements forecast by the Training Manager. The Training Manager shall coordinate with the budgeting office to develop a funding source for all mandatory training.

The Sheriff or the authorized designee shall have final approval of the training plan and the budget to ensure that the training to be delivered is fiscally responsible and meets the mission of the Office.

The Training Manager will execute the training plan on behalf of the Sheriff.

326.3 TRAINING MANAGER
A qualified individual shall be appointed by the Sheriff or the authorized designee to serve as the Training Manager, who shall report to the Sheriff or the authorized designee.

Full-time employees who are assigned to be trainers shall receive specialized instruction, which at a minimum shall include a 40-hour train-the-trainers course.

The Training Manager is responsible for developing an annual training plan. The plan should ensure that employees meet all state law and certification requirements, any specialty training required for specialty assignments, and all continued professional training requirements. The plan should include a process to review course content and quality, typically by way of attendee feedback and/or a course audit by the training staff.

326.4 TRAINING RECORDS
An individual training file shall be maintained by the Training Manager or the authorized designee for each employee. Training files shall contain records of all training and education (original or photocopies of available certificates, transcripts, diplomas and other documentation) for all employees.
Training Plan

The maintenance of the training records shall be in sufficient detail as to comply with any outside audit requirements (28 CFR 115.34).

Whenever an employee obtains training that is not provided by this office, it shall be the responsibility of the employee to provide his/her immediate supervisor or the Training Manager evidence of completed training or education in a timely manner.

The Training Manager or supervisor shall ensure that copies of such training records are placed in the employee’s training file.

Training records shall contain the following information:

- Name of the employee
- Date of hire
- Education and training background (education and training received prior to hire)
- Type of training received
- Date the training was received and successfully completed
- Title of the training and name of the provider
- Test scores or training benchmarks

The Training Manager shall also be responsible for documenting the waivers of the training requirements based upon equivalent training received before employment or demonstrated competency through proficiency testing.

326.5 COURSE CERTIFICATION/QUALITY ASSURANCE
Training courses should be subject to a quality assurance process that, at minimum, provides:

- A complete description of the course, including the number of certified training hours achieved.
- A curriculum including job-related topics, and content and performance objectives.

Training should not be comprised only of the minimum number of hours required annually but also of instruction specific to tasks performed by employees in the facility. Courses should include a testing component that shows a measurable transfer of knowledge and a mastery of topics.

326.6 TRAINING COMMITTEE
The Training Manager shall establish a training committee, which will serve to assist with identifying training needs for the Office. The training committee shall be comprised of at least three members, with the senior ranking member of the committee acting as the chairperson. Members should be selected based on their abilities at post-incident evaluation and at assessing related training needs.
The Training Manager may remove or replace members of the committee at his/her discretion. The training committee should review certain incidents, as detailed below, to determine whether training would likely improve future outcomes or would reduce or prevent the recurrence of an incident. Specific incidents the training committee should review include, but are not limited to:

(a) Any incident involving the death or serious injury of an employee.
(b) Incidents involving a high-risk of death, serious injury or civil liability.
(c) Incidents identified by a supervisor as appropriate to review to identify possible training needs.

The training committee should convene on a regular basis, as determined by the Training Manager, to review the identified incidents. The committee shall determine by consensus whether a training need exists and then submit a written recommendation to the Training Manager. The recommendation should not identify specific facts of any incident, such as identities of employees involved or the date, time and location of the incident, but should focus on the type of training being recommended.

The Training Manager will consider the recommendation of the committee and determine what training should be addressed, taking into consideration the mission of the Office and available resources.

326.7 TRAINING PROCEDURES

(a) All employees assigned to attend training shall attend as scheduled, unless previously excused by their immediate supervisor or the Training Manager. Excused absences from mandatory training should be limited to the following:

1. Court appearances
2. Authorized vacation
3. Sick leave
4. Physical limitations preventing the employee's participation
5. Emergency situations

(b) When an employee is unable to attend mandatory training, that employee shall:

1. Notify his/her supervisor as soon as possible but no later than one hour prior to the start of training.
2. Document his/her absence in a memorandum to the supervisor.
3. Make arrangements through the supervisor and the Training Manager to attend the required training on an alternate date.
Support Personnel Training

328.1 PURPOSE AND SCOPE
The Sheriff's Office has developed a training program for professional support and contractor personnel, whether full- or part-time, to increase competency in their assigned tasks and to help ensure that all support personnel understand the issues that are unique to their position as it relates to this facility. This policy establishes minimum training guidelines for those employees and contractors.

328.2 TRAINING MANAGER RESPONSIBILITIES
The Training Manager is responsible for coordinating training and will ensure that the training and orientation given to each general service or contract employee is properly documented and placed in the worker's training file. At a minimum the record should contain the name of the individual, the assignment, the date the orientation was presented, the orientation outline indicating the subject material and the name of the instructor. To the extent applicable, copies of tests and passing scores should also be included as a part of the record.

328.3 PART-TIME PERSONNEL
General service personnel working part-time shall receive formal orientation and training commensurate with the scope of their work assignments, as determined by the Jail Commander, before assignment to duties within the facility. At a minimum the orientation should cover institutional rules, security and operational issues. General service and contract personnel who fail to successfully complete all required training shall not be permitted to work in the secure portions of the facility.

328.4 PERSONNEL WITH MINIMAL INMATE CONTACT
New professional support and contractor personnel who have minimal inmate contact will receive a minimum of 16 hours of training during the first year of employment.

Minimal inmate contact is defined as tasks that do not involve the supervision of inmates, inmate discipline or specific tasks that involve custody and control of inmates. Training topics shall include, but not be limited to:

(a) Custody policies and procedures
(b) Emergency response procedures
(c) Job specific training

328.5 PERSONNEL WITH REGULAR INMATE CONTACT
All new professional and support employees, including contractors, who have regular or daily inmate contact, shall receive a minimum of 4 hours of training during the first year of employment prior to being independently assigned to a particular job function.
Inmate contact is defined as tasks that involve the direct provision of services to inmates (e.g. custody assistants, vocational supervisors, teachers, food service, commissary, chaplain) but that do not involve the custodial supervision of inmates involving custody, discipline and control. Training topics shall include, but not be limited to:

(a) Security procedures and regulations
(b) Planning
(c) Development and implementation of treatment and recreation programs
(d) Supervision of inmates
(e) Signs of suicide risk
(f) Suicide precautions
(g) Use-of-force regulations and tactics
(h) Report writing
(i) Inmate rules and regulations
(j) Key control
(k) Rights and responsibilities of inmates
(l) Safety procedures
(m) All emergency plans and procedures
(n) Interpersonal relations
(o) Social/cultural lifestyles of the inmate population
(p) Cultural diversity for understanding staff and inmates
(q) Communication skills
(r) Cardiopulmonary resuscitation (CPR/first aid)
(s) Universal precautions for the prevention of disease
(t) Counseling techniques
(u) Interaction of the elements of the criminal justice system
(v) Sexual harassment/sexual misconduct awareness

328.6 TESTING
All training delivered to support personnel should include testing to document that the employee understands the subject material presented.
Deputy Sheriff Corrections Performance Expectations

329.1 PURPOSE AND SCOPE
You can expect to receive a good rating if you meet or exceed the Performance Expectations in the following categories:

329.1.1 WORK HABITS AND PROFESSIONAL APPEARANCE
You are expected to be productively engaged in the agency's work and to organize your time and focus your attention on the priorities suggested by your supervisors. Good work habits are essential to achieve and to maintain a reasonable focus on getting your work accomplished. You are to exercise good personal hygiene; and present a neat and professional appearance. This means you will be expected to:

(a) Arrive at the beginning of each shift briefed and ready to go to work.
(b) Maintain appearance, grooming and hygiene in accord within agency guidelines, policy & procedures. Do not put yourself in a position of risking complaints about your personal cleanliness and/or grooming.
(c) Brief on-coming shift personnel of any problems or work to be done.
(d) Use sick leave when you are too sick to come to work. Avoid patterns of sick day absences contiguous with days off, vacations, holidays, etc.
(e) Complete assignments and projects by due date or renegotiate with your supervisor in advance.
(f) Leave your work area in a clean, neat condition, free of debris, food and drinks.
(g) Follow chain of command.
(h) Complete accurate time card on time.

329.1.2 EXTERNAL RELATIONS
You are expected to conduct your work in a manner which fosters good public relations and public support for the Sheriff's Office. Your job will at times be stressful. You must find ways to handle both your personal and job-related stresses so that your interactions with the public are positive and effective. You must avoid behaviors which produce, or are likely to produce, patterns of complaints and claims in the conduct of your work.

NOTE: It is recognized that at times callers can and will be difficult, demanding and upset, due to the nature of the circumstances that they are reporting. Make every effort to treat them like you would like to be treated, in all conditions. This means you are expected to:

(a) Treat all people with respect.
(b) Follow the same rules which we expect the public to follow.
Deputy Sheriff Corrections Performance Expectations

(c) Avoid profanity, racial, religious, sexual, ethnic, and derogatory remarks. Comply with laws, rules and policy related to sexual harassment and do not condone non-compliance by others.

(d) Behave in ways which avoid discredit to the department.

(e) Show a genuine interest by using voice inflections usually associated with interest rather than curtness or disregard.

(f) Avoid sarcasm and comments that by nature are open to interpretation.

(g) Provide accurate information as appropriate. If you cannot answer the question, ask your supervisor or refer the party to someone who can. "I don't know" or "we don't handle that here" is not adequate.

NOTE: It is recognized that the previous standards are not specific enough to "stand alone" as guides for all situations. You can usually expect to receive a good rating in this category unless your supervisor counsels you on patterns of behavior and results deemed below standard. Once your pattern of below standard performance is described to you, you must correct it in order to receive a good rating in External Relations.

329.1.3 INTERNAL RELATIONS
You are expected to conduct your work in a manner which supports and enhances the work of your department and the accomplishment of its mission and purposes. You will always have choices other than saying and doing things that will disrupt or impede. Always select the helpful behaviors. Differences among individuals are expected. How you handle the differences will impact your rating in this element of your performance.

Generally, your interactions should have a positive impact on the organization. This means you are expected to:

(a) Treat co-workers and supervisors with the same respect you desire.

(b) Do your fair share of the work so that others do not have to do their work plus yours. Help others when the need is apparent.

(c) Find constructive ways to handle differences with others and to avoid allowing differences with others to disrupt your work and/or the work of others. Actively try to resolve, or negotiate ways to work together harmoniously.

(d) Avoid backbiting, rumor spreading, and repeated complaints about things you cannot change.

(e) Be polite and helpful with other employees.

(f) Avoid racial, religious, sexual or ethnic, derogatory remarks, or repeated comments known to offend.

(g) It is normal to be in disagreement on occasions with Sheriff's Office policy and decision. If you do not like policies and procedures, or if you have strong differences
with the administration, bring your problem to your supervisor in private and in a constructive manner, make suggestions for change. Avoid patterns of complaining behavior, which do not contribute to a solution but only add to the problem.

(h) Avoid patterns of complaints from other Sheriff's Office personnel about voice intonations, expressions, responses or lack of responses which tend to produce unnecessary stress of which tend to become unnecessary barriers to the successful exchange or needed communication.

NOTE: It is recognized that the previous standards are not specific enough to "stand alone" as guides for all situations. You can expect to receive a good rating in this category unless your supervisor counsels you on patterns of behavior and results deemed below standard. Once your pattern of below standard performance is described to you, you must correct it in order to receive a good rating in Internal Relations.

329.1.4 EQUIPMENT USE AND MAINTENANCE
You are expected to use and maintain equipment in a manner which is most likely to assure good working order and good appearance over time. This means:

(a) Show care in the use of radio and telephone equipment.

(b) Should equipment become defective or inoperative, notify your supervisor immediately.

NOTE: You can expect to receive a good rating in the category of Equipment Use and Maintenance unless patterns of below standard performance develop. If patterns of below standard performance develop, you will be counseled and asked to correct. If you do correct, you should receive a good rating. If you do not correct, you can expect a below standard rating in this job function.
Deputy Sheriff Corrections Sergeant
Performance Expectations

331.1 PURPOSE AND SCOPE
You can expect to receive a good rating if you meet or exceed the performance expectations in the following categories:

331.1.1 SUPERVISION
PERFORMANCE ASSURANCE - You will receive a meets standards rating in this category if:

(a) Your employees all meet performance standards, or,

(b) If any employee is not meeting standards you have initiated and followed through with a plan to correct and maintain employee performance in a manner which protects the rights of both the employee and the department, or,

(c) You have justified to the satisfaction of your supervisor(s) why 1 and 2 do not apply.

331.1.2 EMPLOYEE RELATIONS
You are expected to conduct your supervisory work in a manner which will foster employee support for the Sheriff's Office and which will foster good supervisory-employee relations. As a guide, you should:

(a) Be available to your employees to discuss and resolve problems.

(b) Provide clear and reasonable expectations and standards. Make them aware when their performance is below standards. Give them good feedback when they succeed and confront them when below standard conduct and performance is observed.

(c) Do not show favorites, apply the rules evenly.

(d) Praise in public and reprimand in private.

(e) Keep your employees informed of things which affect them.

(f) Go to your supervisor and the appropriate chain of command if you do not understand or if you disagree with a policy, decision, direction or action of administrative and supervisory personnel. Seek clarification, or recommend solutions. If your efforts to make change do not work, support the decision. Do not complain about things you cannot change.

(g) Once an employee has corrected a problem, it is recognized and no grudge is carried.

331.1.3 EMPLOYEE DEVELOPMENT AND TRAINING
You are expected to identify employee skill deficiencies and to either provide appropriate training or request it through proper channels.
Deputy Sheriff Corrections Sergeant Performance Expectations

331.1.4 DETENTION SAFETY, SECURITY AND SERVICES

(a) You are expected to identify the problems and issues in the detention facility and to initiate appropriate action. Do not fear initiating reasonable action to correct a problem on the grounds that "it hasn't been done before."

(b) A majority of the detention safety and security activities of your employees shall address problem areas and/or locations discussed in briefings and/or pass on. Deploy personnel to meet both minimum staffing levels and to provide coverage to meet known or special problems and peak workloads.

(c) You must maximize your detention supervision time. If administrative tasks compete for time, you need for detention supervision, approach your supervisor for problem solving suggestions.

331.1.5 ADMINISTRATIVE DUTIES/REPORT REVIEW

(a) At least 90% of the reports you originate or review shall be usable. Not over 10% shall be kicked back because of errors, omissions, incomplete investigations, illegibility, spelling, grammar, sentence structure, format, etc.

(b) USABLE means that the report is in compliance with the report writing manual, policy, laws and statues. Minor errors may exist, but, if so, they will not detract for the purpose of the report or bring discredit to the agency.

331.1.6 SAFETY

You are expected to conduct your work in a manner which is most likely to protect you and others from harm and facilities and equipment from damage. You must be a role model in observing safe practices. This means you are expected to:

(a) Follow Sheriff's Office custody policy, guidelines and applicable laws in the use of vehicles and equipment. Follow Sheriff's Office custody policy, guidelines and applicable laws in the use of firearms, impact weapons and chemical agents.

(b) Follow Sheriff's Office custody policy and guidelines in the use of handcuffs, leg irons and other restraint devices.

(c) Follow Sheriff's Office custody policy for calling in transports, advising when you arrive at your destinations, when you have cleared and are returning to the facility and when your transport is complete.

(d) Follow Sheriff's Office custody radio communications procedures.

331.1.7 WORK HABITS AND PROFESSIONAL APPEARANCE

You are expected to be productively engaged in the Sheriff's Office custody work and to organize your time and focus your attention on the priorities suggested by your supervisors. You are to exercise good personal hygiene; and present a neat and professional appearance. You are to present yourself in a manner likely to make a favorable impression and inspire confidence and
respect. As a supervisor, you are to set an example for wise and productive use of your hours on
duty. This means you will be expected to:

(a) Arrive at the start of your shift in uniform, with all necessary equipment ready for duty.

(b) Be prepared to relieve previous shift of their duties no later than the start of your shift.

(c) Assure breaks are not to exceed 15 minutes each, break locations must be given to
your employees.

(d) Answer your radio when called or your employees should have your location and
status.

(e) Complete assignments and projects by due date or renegotiate with your supervisor
in advance.

(f) Meet or exceed standards of agency uniform and grooming policy. Avoid patterns of
complaints about your appearance.

(g) Exercise good personal hygiene. Do not put yourself in a position of risking complaints
about your personal cleanliness and/or grooming.

(h) Use sick leave when you are too sick to come to work. Avoid patterns of sick days
contiguous with days off.

(i) Maintain Sheriff's Office custody provided mail slots in usable condition.

(j) Maintain area of responsibility in locker room, weight room, break room and office in
a neat condition.

(k) Complete and submit an accurate time card on time.

(l) Follow the chain of command.

331.1.8 EXTERNAL RELATIONS
You are expected to conduct your work in a manner which fosters good public relations and public
support for the Sheriff's Office. You are expected to avoid patterns of complaints and claims in
the conduct of your work. This means you are expected to:

(a) Treat citizens with respect.

(b) Follow the same rules which we expect the public and our employees' to follow.

(c) Refuse to accept gratuities.

(d) Avoid profanity, racial, religious, sexual, ethnic and derogatory remarks.

(e) Behave in ways which avoid discredit to the Sheriff's Office.

(f) Comply with policy, procedure, directives. Set an example for others.

(g) Work constructively with other agencies and departments.
Deputy Sheriff Corrections Sergeant Performance Expectations

NOTE: It is recognized that the previous standards are not specific enough to "stand alone" as guides for all situations. You can usually expect to receive a good rating in this category unless your supervisor counsels you on patterns of behavior and results deemed below standard. Once the pattern of below standard performance is described to you, you must correct it in order to receive a good rating in External Relations.

331.1.9 INTERNAL RELATIONS
You are expected to conduct your work in a manner which supports and enhances the work of the Sheriff's Office and the accomplishment of its mission and purposes. You will always have choices between saying and doing things which will disrupt or impede. Try to select the helpful behaviors. Differences among individuals are expected. How you handle the differences will impact your rating in this element of your performance. Generally, your interactions should have a positive impact on the organization. This means you are expected to:

(a) Treat your employees, peers and supervisors with the same respect you desire.

(b) Do your fair share of the work so that peers do not have to do their work plus yours. Help your employees' and peers when the need is apparent.

(c) Find constructive ways to handle differences with others and to avoid allowing differences with others to disrupt your work and/or the work of others. Actively try to resolve, or negotiate way to work together harmoniously. Challenge those that do not.

(d) Avoid backbiting, rumor spreading and repeated complaints about things you cannot change. Trace rumors to their source and get them corrected.

(e) Be friendly and helpful with other employees.

(f) Avoid racial, religious, sexual or ethnic slurs, derogatory remarks or repeated comments known to offend. Comply with sexual harassment policy and confront non-compliance when observed.

(g) It is normal to be in disagreement on occasions with Sheriff's Office custody policy and decision. If you do not like policies and procedures, or if you have strong differences with the administration, bring your problem to your supervisor in private and in a constructive manner make suggestions for change. Avoid patterns of complaining behavior, which do not contribute to a solution but only add to the problem. Be an example to your employees in this area. The use of staff input or similar suggestion forms are encouraged.

NOTE: It is recognized that the previous standards are not specific enough to "stand alone" as guides for all situations. You can usually expect to receive a good rating in this category unless your supervisor counsels you on patterns of behavior and results deemed below standard. Once the pattern of below standard performance is described to you, you must correct it in order to receive a good rating in Internal Relations.
331.1.10 EQUIPMENT USE AND MAINTENANCE
You are expected to use and maintain equipment in a manner which is most likely to assure good working order and good appearance over time. As a supervisor, you must set an example for others. This means you are expected to:

(a) Keep vehicles free of contraband, evidence and debris. Clear vehicle of trash at the end of your transport. Confront those that do not.

(b) Re-fuel vehicle at the end of your transport. Keep vehicle fuel tank at least three-quarters full.

(c) Conduct vehicle inspections per Sheriff's Office procedure, Policy 706.6 before your transport. Report damage or deficiencies on appropriate form.

(d) Lock vehicle when leaving it. Turn radio, heater and air conditioner off at the end of your transport.

(e) Wash/clean vehicle inside and out every 15 days. Exceptions should be for good reasons.

(f) Report damage to any Sheriff's Office equipment while it is in your possession.

(g) Return equipment used to its proper location.

(h) Maintain firearms and other related safety equipment in clean, good working condition.

NOTE: You can expect to receive a good rating in the category of Equipment Use and Maintenance unless patterns of below standard performance develop. If patterns of below standard performance develop, you will be counseled and asked to correct. If you do correct, you should receive a good rating. If you do not correct, you can expect a below standard rating in this job function.
Chapter 4 - Emergency Planning
Facility Emergencies

400.1 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 jail, while allowing the facility to fulfill its primary purpose.

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

400.2 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.

400.3 PROCEDURE
The Jail Commander 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.
Facility Emergencies

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

400.3.1 ESCORT PROCEDURES
Escort procedures are called for if a housing deputy finds the need to have an inmate (s) removed from the housing unit because the inmate has displayed violence or other non-conforming behavior. The housing deputy will call for a Code - 3 escort and will request a sufficient number of deputies to safely accomplish the task. Available deputies shall proceed immediately to the requesting deputy's location and will escort the inmate (s) to the appropriate holding area.

400.3.2 MEDICAL EMERGENCY

MEDICAL EMERGENCY

(a) Upon discovery of a medical emergency the deputy shall determine:

1. The nature of the injury of illness and check for vital signs if appropriate.
   (a) In the event medical staff and/or ambulance personnel are summoned, the housing unit involved should be placed in a lock down status.

2. If the inmate involved is ambulatory and can safely assist himself or herself, he or she will be escorted to the medical office. A housing unit deputy would request the appropriate medical response i.e. Code - 2, Code- 3, etc.

3. If the inmate involved cannot or should not be moved he or she will request either Code - 2 or Code 3 medical assistance from medical personnel.
   (a) If the injury or illness is of such a nature that it is obvious the inmate should be transported by ambulance to the hospital, then the deputy will advise medical staff that an ambulance is recommended and give his reasons (i.e. no pulse). It will remain the medical staff's decision to summon an ambulance.
   (b) The Shift Supervisor will be informed of all medical emergencies and an incident report will be written in the In Custody System.

400.3.3 DEPUTY DOWN/DEPUTY IN TROUBLE

(a) Procedure

1. Any staff member who discovers another staff member has been a victim of violence, and has been incapacitated and is still in jeopardy of further harm, the discovering deputy shall immediately radio for Code - 3 assistance and specify "Officer Down" or "Officer Needs Assistance" and give the specific location.
Lake County Sheriff's Office
Lake County SO CA Custody Manual

Facility Emergencies

2. Entry into a confined area where a staff member needing assistance is located should not be made until there is sufficient manpower, information and equipment to be successful.

3. During a response to a Code - 3 assistance call, radio traffic should be kept to a minimum. The staff member initiating the call should give enough information to responding deputies to allow them to respond to the appropriate location with a general idea of the kind of problem (i.e. deputy down D Pod day room/ being attacked by five (5) inmates with weapons.)

4. At no time will a deputy abandon any inmate(s) under his or her control until those inmates are secure.

5. No security area will be left unsecured to respond to any emergency.

6. Only deputies will respond to any emergency unless a specific request is made for other staff (i.e. medical).

7. No impact weapons, tear gas (except o.c.), percussion weapons, or firearms will be used without the approval of the S.E.R.T. Commander and or the Jail Commander.

400.4 LOCKDOWN
Upon detecting any significant incident that threatens the security of the facility, such as a riot or hostage situation, staff shall immediately notify Control and the Shift Supervisor. The Shift Supervisor, or in his/her absence an OIC, may determine whether to order a partial or full lockdown of the facility and shall notify the Jail Commander 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 non-essential contractors out of the facility.

In the event of a major disturbance no intakes or releases will be processed. Agencies attempting to enter the facility with fresh arrests will be required to stage in the VSP until cleared by the Watch Commander or OIC.

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 Jail 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.
Facility Emergencies

400.5 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 Jail Commander. The Jail Commander should evaluate the basis for the strike and seek an appropriate resolution.

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

400.5.1 NOTIFICATION OF QUALIFIED HEALTH CARE PROFESSIONALS
The Jail Commander or the authorized designee should notify the Responsible Physician 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 should monitor the health of inmates involved in the hunger strike and make recommendations to the Jail 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.

400.5.2 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 Jail Commander may direct the appropriate staff to examine the inmate commissary purchases made in advance of the hunger strike, and to 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.

400.5.3 LEGAL GUIDANCE
If all attempts to resolve the grievance are unsuccessful or not reasonably possible, the Sheriff should consider consulting with legal resources or the health authority, as appropriate, to develop other steps to resolve the issues.

400.6 RESPONSE TO DISTURBANCES
The staff should 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 should immediately notify the Shift Supervisor or the Jail Commander of the incident. The Shift Supervisor or Jail Commander may direct additional staff as needed to resolve the disturbance (15 CCR 1029(a)(7)(B)).

400.6.1 NOTIFICATIONS
The Shift Supervisor should notify the Jail Commander of the disturbance as soon as practicable. Based on the seriousness of the event, the Jail Commander should notify the Sheriff.
Facility Emergencies

400.6.2 NOTIFICATION OF QUALIFIED HEALTH CARE PROFESSIONALS
The Jail 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.

400.6.3 REPORTING
The Shift Supervisor or Jail 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.

400.6.4 DISTURBANCE PROCEDURES

(a) DISTURBANCE PROCEDURES
1. When a deputy discovers an argument, fight or other condition suggesting impending violence by one or more inmates; he or she shall call for either Code -2 or Code -3 assistance. The deputy should announce what kind of disturbance is taking place in the unit. Example: "I have a fight in Pod D".

2. In no case should a deputy attempt to physically intervene between fighting inmates without assistance. After requesting assistance the deputy should attempt to calm the disorder with voice commands and should secure the area under his or her control (i.e. lock down or move other inmates away from the area.)

3. Once all inmates are under control, any and all inmates involved in or contributing to the disturbance should be removed from the area and placed in appropriate lock down pending disciplinary proceedings.

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

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.

400.7.1 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.

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 jail, he/she will be reclassified and moved to appropriate housing.

Other housing units must be secured, with sufficient staff remaining at their posts to continue to supervise the unaffected units. When the riot has been suppressed, all involved staff must immediately return to their assigned posts.

400.7.2 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.

400.7.3 DEBRIEFING
All responding staff, including medical responders, shall be debriefed on the incident as soon as practicable after the conclusion of the emergency incident. The staff shall 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. A moderator should be used to ensure that no individual or group involved in the response is publicly ridiculed.

400.8 HOSTAGES
The Office does not recognize the taking of hostages as a reason to relinquish control of the jail environment. All staff, inmates, visitors, volunteers, and contractors shall be informed of the “no hostage” policy prior to entering the facility for the first time and shall sign an acknowledgment, which the facility shall retain.

It is the policy of the Lake 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)).

400.8.1 RESPONSE TO HOSTAGE INCIDENT
NO HOSTAGE POLICY

(a) The Lake County Sheriff's Custody Division "No Hostage Policy" maintains that it will not consider bargaining with hostage takers for any reason, including the following:
Facility Emergencies

1. Escape
2. Exchange of hostages
3. Release of other inmates
4. Furnishing weapons
5. A supply of dangerous drugs or alcohol
6. Granting amnesty
7. Transportation

(b) A hostage situation is any staff member, citizen or inmate held against their will by another person for any of the above listed reasons, monetary gain, etc. which may place an individual in danger of losing life or suffering serious injury.

(c) Any staff member taken hostage immediately loses his or her authority, and any orders issued by that person will not be followed regardless of their rank or status.

(d) The primary responsibility of all staff members in a hostage situation is to protect every person involved, if possible, from serious injury or death.

NOTIFICATION

(a) Any staff member discovering a hostage situation will immediately notify the Shift Supervisor and secure the area involved. This will be accomplished by locking down all inmates and doors in the area and not allowing any inmate movement.

(b) Control should immediately be notified at the earliest sign of a hostage incident. Control shall notify the Shift Supervisor and Jail Commander. The Jail Commander will notify the Sheriff as soon as practicable.

(c) The Control/Tower Aide will initiate a complete facility lock down with the approval of the supervisor on duty.

(d) Staff will evacuate all visitors, attorneys, bondsmen and other non-departmental personnel out of the facility.

(e) Control/Tower Aides will ensure that no incoming or outgoing traffic will be allowed through the vehicle sally port gate until further notice.

(f) Any additional personnel arriving at the facility to assist will only enter as directed, after a positive identification is made through the Control/Tower monitors by the Control/Tower Aide.

(g) Dispatch will be notified and advised to have the Enforcement Supervisor send all available staff to the facility. He or she may be asked, by the duty sergeant to activate the established SWAT Team, detectives (for a crime report), outside support agencies, equipment, other personnel.
Facility Emergencies

(h) The Sergeant will call out the S.E.R.T.

(i) The Sergeant will also notify the Custody Commander, who will notify the Sheriff.

(j) The following facilities in the immediate area should also be apprised of the situation: AWP, Central Dispatch, Lake County Animal Control.

CONTAINMENT OF THE SCENE

(a) All non-essential personnel will leave the area. Spectators will not be allowed at the scene. All necessary personnel and staff members at the scene will participate in solving the problem as directed or be required to leave the area.

(b) The Shift Supervisor or Jail Commander shall make every effort to ensure that the hostage incident remains confined to the smallest area possible. All door controls accessible to the inmate shall be disabled. Emergency exits that lead outside the secure perimeter shall be guarded.

(c) The on duty Sergeant will act as the Incident Commander until officially relieved by the S.E.R.T. Commander. The S.E.R.T. Commander will be responsible for the supervision and direction of all necessary personnel during the incident. Involved staff members will execute only those orders issued and shall not initiate any activity of their own.

(d) Custody staff will be utilized to establish an inner perimeter (the area closely surrounding the site) to enclose the incident area. The inner perimeter will absolutely contain and block all possible avenues of escape.

(e) While establishing the inner perimeter, attempts will be made to gather the following information:
   (a) Exact location and nature of the hostage situation
   (b) Identity of the hostage taker (s)
   (c) Identity of the hostage (s)
   (d) Identify types of weapons (s) involved
   (e) Identity of staff member (s) involved
   (f) Identify extent of any injuries
   (g) Identify amount of damages
   (h) Determine any breeches of security

(f) The outer perimeter (a buffer zone designated to control all traffic into the effected area) will be established using custody and enforcement staff members to keep the public and press a safe distance from the scene and provide an area for assigned staff to operate.
Facility Emergencies

(g) The Incident Commander will be notified of the scene containment and all participants' identities.

(h) No one may enter or leave the inner and/or outer perimeter areas without the explicit approval of the Incident Commander.

CONTROL THE SCENE

(a) The S.E.R.T. Commander will establish a Command Post Station, outside the inner perimeter and inside the outer perimeter, out of sight and sound of the suspect(s), to determine further logistic and personnel requirements.

(b) Staff members at the scene not actively involved, will not act or speak out to the hostage taker(s) or hostage(s).

(c) The S.E.R.T. Commander will direct front office staff to call in additional staff if needed.

(d) The S.E.R.T. Commander will assign and position all personnel.

(e) A staff member will be assigned at the scene to keep a log of all events, concerning the incident as the events occur.

(f) A Control/Tower Aide will be responsible for documenting all information received at that location. This documentation will be utilized when reports are written up following the incident.

(g) All media relations will be handled only through the Enforcement Commander, Public Information Release Officer or Sheriff. No other press releases will be given to the media.

ENDING THE INCIDENT

(a) Upon the release of the hostage(s) or the termination of the crisis, the S.E.R.T. Commander will ensure that the following steps are taken:

1. All necessary medical attention will be given to those in need.

2. The hostage taker(s) will be individually isolated and kept under close observation.

3. Secure the crime scene(s) and preserve all available evidence for the investigation.

4. Return the facility to full normal operations as soon as possible after the incident.

400.8.2 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.
Facility Emergencies

400.8.3 REPORTING AND DEBRIEFING
Following the conclusion of a hostage incident, the Jail 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.

400.9 ESCAPES
Upon being made aware that an escape may have occurred, or did in fact occur, the staff member should immediately notify Control. Control should notify the Shift Supervisor or Jail Commander. As soon as practicable, the Jail Commander should notify the Sheriff.

Once the escape is verified and immediate actions taken inside the facility (lockdown, etc.), the Shift Supervisor should notify all local law enforcement agencies.

400.9.1 INMATE COUNTS
As soon as the facility is fully locked down, a full inmate/wristband count should 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 should have his/her identity disclosed and his/her facility record should be accessed by the Jail Commander (15 CCR 1029(a)(6)).

400.9.2 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 jail clothing should be searched first. Any witnesses should be interviewed.

Classification deputies will develop a flyer with the inmate's name, description, latest picture, classification status, and charges, and supply it to the 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.

400.9.3 REPORTING
The Shift Supervisor or a designated staff member should submit an incident report to the Jail Commander. A crime report should also be written regarding the escape. The incident report should focus on events and physical plant weaknesses that contributed to the escape. The Jail Commander should review the reports, interview involved parties, and develop action plans to minimize the risk of future occurrences.

400.9.4 ESCAPE FROM TRANSPORTATION

(a) POLICY

1. Ensuring that inmates do not escape during transportation is one of the most crucial responsibilities for deputies. The procedures differ from escape procedures for those escapee (s) from custody in the jail setting.
PROCEDURE

1. Before departing from the facility or from another location, transportation personnel will ensure that they have a means of direct communication with Dispatch and Control.

2. The transportation deputies will search and restrain all inmates to be transported.

3. Transportation will notify Control of their departure and arrival times.

4. When a single inmate is being transported and he or she breaks custody, the transporting deputy will immediately notify Dispatch and then pursue the inmate. Notification to Dispatch will include the following:
   (a) The deputies exact location
   (b) The inmate's name, description and charges
   (c) The inmate's direction of flight
   (d) If the inmate has/had outside help
      1. Description of accomplice(s)
      2. Vehicle description, if a vehicle was involved

5. When more than one inmate is being transported and a break in custody occurs, the following procedure will be used:
   (a) If transportation is by one deputy, he or she will remain with the other inmates and notify Dispatch as outlined above
   (b) If transportation is by more than one deputy, one deputy will remain with the other inmates and notify Dispatch as outlined above, and the other will pursue the inmate(s).

6. It will be the responsibility of the Enforcement Supervisor to prepare and have distributed an Escape Bulletin. The Escape Bulletin will include, but not be limited to, the following information:
   (a) Name(s) of escapee(s)
   (b) Last known address, prior to booking
   (c) Charges pending, or those for which convicted
   (d) Description of escapee(s)
   (e) Known address(es) of friends, relatives, etc.
   (f) Photograph(s) of escapee(s)

7. A criminal report will be made by the deputy(s) from whom the escape was made. This report will include, but not be limited to, the following information.
   (a) An account of the events leading to the escape
   (b) A precise description of the escape, including:
Facility Emergencies

(a) The escapee (s)
(b) The method of escape
(c) Any person (s) aiding and or abetting the escape
(d) Description of vehicle, if a vehicle is used
(e) A list of witnesses to the escape and the results of interviews conducted with them.

8. Upon apprehension of the escapee (s) the Jail Commander will do the following:
   (a) Verify that the escapee (s) have actually been captured
   (b) Notify the following of the apprehension
       1. The Sheriff
       2. All personnel and law enforcement agencies previously alerted
   (c) Take steps necessary for the prosecution of the escapee (s)

9. The Jail Commander will conduct or have conducted a complete investigation of the escape.

10. The Jail Commander will submit a written report to the Sheriff of the results of his or her investigation.

400.10 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 Jail Commander. The Jail 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 jail 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 jail 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 Jail 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).
400.11 TRAINING
The staff shall be trained annually on this policy. This facility will provide emergency preparedness training as part of orientation training for all personnel assigned to the facility and for those who may be required to respond to the facility in an emergency. The staff shall also receive refresher training at least annually in the emergency response plans. The Training Manager is responsible for developing and delivering appropriate initial training and annual refresher training.

Emergency planning training should occur in the form of classroom instruction (or roll call training), mock practical exercises, and drills. Each type of emergency covered in the emergency response plan must be included in the training.

A lesson plan, staff training sign-up sheet with the dates and the times training should be provided, and proof of competency (testing) for each participant should be maintained by the Training Manager.

The Training Manager shall forward an annual report to the Sheriff and Jail Commander on the status of emergency response plan training. Any training deficiencies identified in this report should be rectified within 90 days of the report.

The facility emergency plans and all training shall be documented by the Training Manager and retained in accordance with established records retention schedules.

400.12 BOMB THREATS
These guidelines have been prepared to assist facility personnel in their initial response to incidents involving explosives, explosive devices, or explosion/bombing incidents. Under no circumstances should these guidelines be interpreted as compromising the safety of first responders or the public. When confronted with an incident involving explosives, safety shall always be the primary consideration.

*Note: Until a device is located or detonated, the main object for the bomb threat may be to cause excitement or turmoil. The less commotion, i.e. “Code-3” fire trucks, ambulance, etc., the better.*

(a) BOMB THREATS RECEIVED BY TELEPHONE

1. The following questions should be asked if a call of a bomb threat is received at the Correctional Facility:

(a) When is the bomb going to explode?
(b) Where is the bomb?
(c) What kind of bomb is it?
(d) What does it look like?
(e) Why did you place the bomb?
(f) Who are you? (to avoid possible termination of the call this should be the last question asked) Note: Attempt to keep the caller on the line as long as possible and obtain expanded answers to these five basic questions.

2. During this time, document the following:
   (a) Time of the call.
   (b) Exact words of the person as accurately as possible.
   (c) Estimated age and gender of the caller.
   (d) Speech patterns and/or accents. Background noises.

3. Advise Dispatch to notify/call out the following personnel:
   (a) Bomb technicians
   (b) Fire truck and ambulance, if the device has not detonated. They should proceed "Code -2" to the front parking lot of the Correctional Facility.

4. Do not use any two-way radio system

5. Order of notification
   (a) Shift Supervisor
   (b) Fellow workers- this is to be done by either calling each individual station and/or using the public address system. Advise "Code 10", and give the known or suspected location.
   (c) Facility Commander
   (d) Bomb Technician - for information only.

6. Inmate Movement
   (a) Once a bomb threat has been received a facility lock down will occur.
   (b) The decision as to whether or not inmates will be evacuated will be made by the Jail Commander, and will be based upon all facts available.
   (c) If the evacuation of inmates is ordered, the fire evacuation plan will be used. (see Policy 410) If the location of the device is determined, this will dictate the route of exit.
   (d) If a suspected device is located next to the Corrections Facility, it may not be necessary to have inmate movement and/or evacuation. This will depend on the size of the device. The bomb technician will advise the size of the area to be evacuated.
(e) Always use caution when moving to another location. The first bomb may have been used to move people to a second planned location where a larger bomb may be hidden.

7. The Search

(a) If a search is to be conducted, the shift supervisor will assign personnel as needed. The search should be conducted by corrections personnel unless it is determined that fire or patrol personnel assistance is needed.

(b) Since the facility is secure, the main emphasis of the search should be:
   1. Public access areas, i.e. lobby, building exterior, roof
   2. Mechanical, electrical, telephone rooms, including, but not limited to areas of gas, water, electrical and telephone services.
   3. Any vehicles which are not known or the presence for which is not accountable.

(c) If a time of detonation has been given, it will be left to the discretion of the Jail Commander as to when the search is to be terminated.

8. If a device is found:

(a) Do not move or touch the device.

(b) Avoid excessive vibrations to the device or the area around it.

(c) Do not turn "on" or "off" any electrical outlets, lights, etc. (use flashlights).

(d) Gather as much information as possible without disturbing the device. This information will be shared with the bomb technician upon first contact.

(b) FOUND EXPLOSIVES/SUSPECT DEVICES

1. When handling an incident involving a suspected explosive device, the following guidelines should be followed:

   (a) No known or suspected explosive item should be considered safe regardless of its size or apparent packaging. The appropriate bomb squad or military explosive ordnance disposal team should be summoned for assistance.

   (b) A minimum perimeter of 286 feet should be established around the device. An access point should be provided for support personnel.

   (c) As much information as is available should be promptly relayed to the Shift Supervisor and Jail Commander including:
      1. The stated threat.
      2. Exact comments.
Facility Emergencies

3. Time of discovery.

4. Exact location of the device.

5. Full description (e.g., size, shape, markings, construction) of the device.

(d) The device should not be touched or moved except by qualified bomb squad personnel.

(e) All equipment within 286 feet of the suspected device capable of producing radio frequency energy should be turned off. This includes two-way radios, cell phones and other personal communication devices.

(f) Consideration should be given to evacuating any buildings near the device.

(g) A search of the area should be conducted for secondary devices or other objects that are either hazardous or foreign to the area and a perimeter should be established around any additional suspicious device found.

1. Note: Explosive or military ordnance of any type should be handled only by the bomb squad or military ordnance disposal team.

(c) EXPLOSION/BOMBING INCIDENTS

1. When an explosion has occurred, there are multitudes of considerations which may confront the responding deputies. As in other catastrophic incidents, a rapid response may help to minimize injury to victims, contamination of the scene by gathering crowds, or additional damage by resulting fires or unstable structures. Whether the explosion was the result of an accident or a criminal act, the responding deputies should consider the following actions:

(a) Assess the scope of the incident, including the number of victims and extent of injuries.

(b) Assist with first aid (Fire Department has primary responsibility).

(c) Assist with evacuation of victims (Fire Department has primary responsibility).

(d) Identify and take appropriate precautions to mitigate scene hazards such as collapsed structures, blood borne pathogens, hazardous materials and secondary explosive devices.

(e) Request additional resources as needed.

(f) Identify witnesses.

(g) Preserve evidence.
Facility Emergencies

(d) NOTIFICATIONS
   (a) When an explosion has occurred, the following people shall be notified as soon as practicable if their assistance is needed:
      (a) Shift Supervisor
      (b) Facility Commander
      (c) Chief or Detectives
      (d) Forensic Science Services
      (e) Fire Department
      (f) Rescue Personnel

(e) CROWD CONTROL
   1. Only authorized personnel with a legitimate need shall be permitted access to the scene. Spectators and other unauthorized individuals shall be excluded to a safe distance as is reasonably practicable given the available resources and personnel.

(f) SCENE OF INCIDENT
   1. As in any other crime scene, steps should immediately be taken to preserve the scene. The scene could extend over a long distance. Evidence may be embedded in nearby structures or hanging in trees and bushes.

400.13 EMERGENCY EQUIPMENT AND SHUT-OFF LOCATIONS

POLICY
To ensure the safety of all employees, inmates, and visitors to the facility, it is imperative that all personnel be aware of where emergency equipment and shut-off locations are, and how they are operated.

PROCEDURE
Each employee must be familiar with the locations of the following:

(a) PROPANE
   1. Propane for PHASE I, is located in the fenced area on the east side of the facility behind the vehicle wash rack. To turn off the flow of propane, locate the white turn handle nearest the wash rack (approximately 1 1/2’ off the ground). Turn the handle clockwise until the flow of propane has been completely restricted.
   2. Propane for PHASE II, is located in the fenced area near the G Pod yard. There are five (5) medium white tanks. To turn off the flow, locate the main handle, which controls all five tanks, behind tank #3 (approximately 1 1/2’ off the ground). Turn the handle clockwise until the flow of propane has been completely...
Facility Emergencies

restricted. If this does not work, each tank can be turned off individually by turning the handles, located under the light blue hoods on top of each tank, clockwise.

3. In case of emergency, notify Dispatch, who will contact Westgate Petroleum.

(b) ELECTRICITY

1. In the event that electrical power to the facility needs to be shut down, notify Central Dispatch and have PG & E respond.

2. DO NOT TRY TO SHUT OFF POWER TO THE FACILITY ON YOUR OWN!

3. The electrical main supply shut off is located in the Mechanical/Electrical room on the north side of the F Pod yard. A generator back-up will turn on as soon as the main electrical supply is turned off. PG & E personnel will need to over-ride or disable the generator.

4. Note: If electricity is shut off, all doors must be unlocked and locked by using keys located on emergency rings and located in the following secure areas: Tower, Control, Warrants Office and Women's Locker Room. Officers need to be familiar with the locations of these emergency key rings.

(c) FIRE ALARM PULL STATIONS

1. There are five (5) alarm pull stations throughout the facility, to operate pull down on the lever “PULL”.
   (a) Booking - on the only support beam
   (b) Control
   (c) Tower'
   (d) Kitchen - on the east wall next to the Janitor’s Closet
   (e) Phase II - in the visiting corridor (public side/upstairs)

2. Once the Fire Alarm Pull Station has been activated, it must be manually reset, either by jail staff or by fire department personnel.

3. There are alarm notification panels in Control, on the southwest wall, to monitor the fire systems.

(d) FIRE EXTINGUISHER LOCATIONS

(a) Laundry Room
(b) Dining Hall
(c) Pod I (one at the Officer's station/ one in the inmate laundry room)
(d) FTO Office
(e) Pod H (at the Officer’s station)
(f) Reception
(g) In the Hall (next to Phase I visiting room)
Facility Emergencies

(h) Pod F Sally Port
(i) Pod G Sally Port
(j) Control has four
(k) Tower has two
(l) Booking (next to the Officer’s restroom)
(m) Pods A - E Housing Corridor has three, Fire Hose Access Closet
(n) Warehouse has two
(o) Voc-Ed has four
(p) Kitchen has two (one in the office/one in the dry storage room)
(q) Note: In case of fire in the kitchen there is a fire suppression system in the Range Hood, located above the stoves and ovens. To assist in extinguishing the fire, pull the yellow knob next to the cook’s desk.

(e) FIRE HOSE ACCESS AREAS
(a) Pods F and G - Sally Port next to pod G door
(b) Pods A to E - Housing Corridor
(c) Inside the closet in Pod C between cells 10 and 11
(d) Note: The pump for the fire hose water supply will turn on automatically once the flow of water is started to the hoses. The pump will shut down automatically when the hoses are not in use and the correct pressure is regained.

(f) WATER MAIN
(a) Phase I water shut off is located by the pump shed near the loading dock.
(b) Phase II water shut off is located by the pump shed in the generator yard.
(c) The water main shut off is located in the middle of the intersection of Helbush Drive and Hoyt Avenue, under a manhole cover.
(d) The water main can only be turned off by the Water Company or by Fire Department personnel.
(e) Note: When the water main is turned off, the water supply will be turned off for the entire jail facility.

(g) SPRINKLER WATER SUPPLY CUT OFF
(a) The sprinkler water supply cut off stations (Post Indicator Valves) are located:
   (a) Phase I - southeast side of the loading dock
   (b) Phase II - north east side of Phase II
(b) To shut off water supply from the Post Indicator Valve, grab the lock holding the handles in place and twist off (it will break under hand pressure). Remove the
Facility Emergencies

handle and swap ends. Place the hole located at the end of the long handle over the nut at the top of the Post Indicator Valve; turn the handle clockwise until the water flow has been completely restricted.

(c) Note: Spare sprinkler heads and removal tools are located in the Phase I water softener room located next to the loading dock, and in the Phase II lower mechanical room located at the north wall of the facility.
Emergency Staffing

404.1 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.

404.2 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 or strike by the staff, a natural disaster or other disruption. The Sheriff or the authorized designee shall be responsible for ensuring that an appropriate emergency staffing plan exists.

404.2.1 EMERGENCY STAFFING
In the event the Jail 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 Jail Commander will notify the Sheriff. 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 Jail 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 areas of the office who have custody experience 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.
Emergency Staffing

404.2.2 LEGAL ASSISTANCE
In cases where the Jail 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.

404.2.3 TRAINING
The Jail 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.
Fire Safety

406.1 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.

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

The Jail 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.).

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

406.2.2 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.

406.3 REQUIREMENT FOR FIRE PRE-PLANNING
Pursuant to Penal Code § 6031.1, the Jail 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.
(g) A plan for the cross-training of responders and facility staff via drills, which should occur at least quarterly, if practicable.

406.4 FIREFIGHTING EQUIPMENT
The Jail 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 Jail 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.

406.5 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 Jail 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 Jail Commander and the Sheriff, and the records maintained for at least two years (15 CCR 1032(b)).

406.5.1 FLAMMABLE, TOXIC AND CAUSTIC MATERIALS
The Jail Commander, in collaboration with the local environmental health expert, will review the type of materials introduced into the facility to ensure that flammable, 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.

406.6 EMERGENCY HOUSING OF INMATES
The Jail 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.
**Fire Safety**

406.7 HILL ROAD FACILITY FIRE SUPPRESSION PRE-PLAN

**POLICY**

(a) The Lake County Sheriff's Office, Hill Road Jail will provide a system of fire prevention and control through the use of efficient fire prevention services and equipment, utilization of appropriate fire safety codes and regular monitoring to ensure the safety of all personnel, inmates and visitors.

(b) These systems and controls will be reviewed annually and updated as needed; and shall include, but not limited to the following:

1. An adequate fire protection district.
2. Fire drills at least once a quarter.
3. Quarterly testing of equipment, refer to Facility Plant Maintenance, Fire Equipment-Description and Location.
4. An annual inspection by a qualified outside fire inspector or local jurisdictional fire district marshal or designee.
5. A monthly inspection by the facility Fire/Life Safety Officer.
6. Placement of adequate fire protection equipment throughout the facility, refer to the facility Fire-Equipment Description and Location floor plans.
7. Use of various types of automatic fire alarm systems to provide early warning for the presence of fire and/or smoke, refer to the facility Fire-Description and Location floor plans.
8. A written facility wide evacuation plan which includes:
   (a) Floor plan layout.
   (b) Location of all exits
9. Evacuation routes.
   (a) Location of fire plans, refer to facility Relocation and Evacuation plan.

**DEFINITIONS**

(a) FIRE/LIFE SAFETY OFFICER: The Lake County Sheriff's staff member who is responsible for overseeing and assisting with the fire safety, prevention and inspection tasks.

(b) QUALIFIED DEPARTMENTAL STAFF MEMBER: An individual who has received training by the Fire/Life Safety Officer, to conduct the facility Fire/Life Safety inspections.

**PROCEDURE**

(a) FIRE PREVENTION

1. The most important aspect of an effective fire prevention program is fire prevention and compliance with fire and safety codes.
2. Personnel should always be aware of fire hazards such as overloaded electrical outlets, improper trash storage or expended fire extinguishers.

3. Personnel should make fire prevention a basic part of their daily routine.

4. To augment the fire safety plan, all personnel shall:
   (a) Properly store combustible materials.
   (b) Check fire-fighting equipment regularly.
   (c) Report fire hazards immediately.
   (d) Prevent hazardous electrical situations.

5. Specifications for the selection and purchase of furnishings must indicate acceptable requirements for the fire and safety performances of materials prior to purchase by the supply section, pursuant to Title 19, of the California Code of Regulations.

(b) FIRE SAFETY INSPECTIONS AND PLAN RESPONSIBILITY

1. The facility Fire/Life Safety Officer shall be responsible for facilitating inspections and ensuring the adequacy of the plan.

2. The Fire/Life Safety Officer is responsible for facilitating comprehensive monthly inspections.

3. The Fire/Life Safety Officer will train other staff members, designating them as Qualified Departmental Staff Members for the purpose of conducting inspections.

4. The Fire/Life Safety Officer or designee must conduct the monthly inspection. These inspections include, but are not limited to, the following:
   (a) Fire equipment.
   (b) Use, storage and disposal of hazardous materials.
   (c) Fire prevention practices.
   (d) Fire hazards.
   (e) Extinguishers and fire department connectors.
   (f) Smoke detectors, sprinklers.

5. Fire Drills
   (a) The Fire/Life Safety Officer will coordinate fire drills that will be conducted quarterly on each shift, in all facility locations, as directed by the Facility Commander or designee.
   (b) The Facility Commander will maintain a record of all fire drills (January, April, July and October). Evacuation of inmates for fire drills will be at the discretion of the Facility Commander or designee, based on safety and security considerations of the facility.

6. Key and Lock Inspections
Fire Safety

(a) Facility Maintenance staff will conduct an inspection of all evacuation doors in the facility on a trimester basis.

(b) A report documenting the inspection will be completed and forward to the Facility Commander.

(c) This inspection will include cycling the mechanism and manually opening the doors using the evacuation keys.

7. Fire Extinguishers

(a) Facility maintenance staff will inspect all fire extinguishers on a quarterly basis.

(b) Any staff member using a fire extinguisher will place it in the sergeant’s office with a note describing its original location and the request for servicing.

(c) A report documenting the inspection will be completed and forward to the Facility Commander.

(d) The shift supervisor will ensure that a work order is submitted to facility maintenance staff for the extinguisher to be served.

(e) The shift supervisor will ensure that a replacement extinguisher has been issued at the original location until the servicing has been completed.

8. Inspection Reports

(a) The Fire/Life Safety Officer shall submit the monthly inspection reports to the Facility Commander by the 10th of the month for the previous month’s inspection.

(b) All inspections will be returned to the Administrative Sergeant.

1. The Administrative Sergeant will then advise the personnel or entity responsible for the affected area(s) that need corrective action.

2. The supervisor or designated staff member will then report back to the Administrative Sergeant indicating the completed and/or initiated corrective action.

(c) The Administrative Sergeant will follow up on all pending corrective actions and maintenance repairs until each deficiency is completed.

(d) Completed reports shall be maintained for at least two years.

(c) AUTHORITY AND RESPONSIBILITY DURING A FIRE

1. During an emergency, the Facility Commander, or highest-ranking member on duty, will have authority for decisions made affecting the facility, the emergency and security.

2. Upon arrival of the fire department, the on scene firefighters shall assume command of the fire scene.

(d) BASIC GUIDELINES FOR ALL PERSONNEL
1. Emergency evacuation routes will be posted throughout all detention buildings to facilitate evacuation of inmates, visitors and staff.
   (a) The travel distance of all exits shall be in compliance with the National Fire Safety Code and certified by the State Fire Marshal and/or designated local authority.
2. Fire door will not be blocked or tied in an open position.
3. All housing units have emergency lighting installed to provide sufficient illumination to egress areas and stairwells during emergencies.
4. All facility staff will be trained in the operation of all written emergency plans prior to entry on duty.
5. All facility staff will be trained in the location and implementation of firefighting equipment and how to use it.
6. All facility staff will be trained in the location of fire exits and evacuation routes.
7. All fire incidents will be documented in an Incident Report or Crime Report (Arson) when necessary.
8. The fire department will be summoned for all designated fire incidents, depending on the severity of the incident.
   (a) The Facility Commander (or designee) will determine if the fire department response should be cancelled.
9. Medical attention will be administered as necessary.

(e) FIRE AND SMOKE ALARMS AT THE LAKE COUNTY JAIL/HILL ROAD FACILITY
1. Control, upon receiving a fire/smoke alarm, will immediately notify all staff of the affected area(s).
   (a) If the alarm is in a general area, they will advise all staff.
   (b) At a deputy's direction, Control will activate the silence button on the fire control panel.
2. The officer will quickly inspect the area for signs of smoke and/or fire.
   (a) The deputy will maintain voice contact with Control at all times.
   (b) If voice contact is lost, Control will notify a Shift Sergeant immediately.
3. The deputy will advise Control of their status upon completing their assignment.

(f) FIRE AND SMOKE ALARMS AT THE LAKE COUNTY JAIL/HILL ROAD FACILITY
1. The Control staff, upon receiving a fire/smoke alarm, will immediately notify all staff of the alarm and its location.
2. The deputy will quickly inspect the area for smoke and/or fire.
3. The deputy will advise the all staff of their status upon completing their assignment.
Fire Safety

(g) DISCOVERY OF SMOKE AND/OR FIRE AT THE LAKE COUNTY JAIL/HILL ROAD FACILITY

1. Should a fire be discovered, Control will announce a Fire Alarm via the radio.
2. All unaffected housing units will lock down.
3. All available deputies will respond to assist as needed.
4. If there are visitors in the facility they will be escorted out.
5. Control staff will immediately call Central Dispatch when a staff member confirms a fire.
   (a) Control staff will provide the following information.
      1. That an alarm has been received, the type of alarm.
      2. That the alarm has been investigated and confirmed to be legitimate.
      3. Location of the fire (kitchen, locker room, building number).
   (b) Control staff will ensure the Facility Commander or designee is aware of the fire and its nature.
   (c) Control staff will document all notifications and times pertaining to requests for Fire Department assistance in the operations.
6. If the fire is discovered in a room, the door to the room should only be closed if the staff is certain that there is no one in the room.
7. The deputy should assess the scene and determine.
   (a) If they can immediately contain the fire with available extinguishers.
   (b) If an evacuation is necessary and advises Control.

*The facility Commander or designee will designate a staff member to wait for the arrival of fire personnel and escort them to and from the location of the occurrence.

h. EVACUATIONS

Evacuations will be conducted in accordance with this policy, details found in section 410.
Emergency Power and Communications

408.1 PURPOSE AND SCOPE
The Lake 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.

408.2 POLICY
It is the policy of the Sheriff's Office to ensure that power to critical systems and communications continues to operate within the facility in the event of a loss of power.

408.2.1 PREVENTIVE MAINTENANCE
It is the responsibility of the Sheriff and Jail 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 Jail 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.

408.2.2 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. Or, staffing should be increased sufficiently for the area to remain safe and secure until the repair can be completed.

408.2.3 INSPECTION AND TESTING
The Jail 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.
Emergency Power and Communications

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

410.1 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 Lake County Sheriff's Office jail in case of fire and other emergency evacuations.

410.2 POLICY
The community, staff, volunteers, contractors, and inmates should have a well-researched and validated evacuation plan that can be implemented in the event any portion of this facility requires evacuating due to an emergency (e.g. fire, smoke, flood, storm) (15 CCR 1032(d)). All custody staff should be knowledgeable about the evacuation plan, policy, and procedures.

410.3 EVACUATION PLAN
The Lake 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 shall 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 Jail Commander shall ensure that the evacuation plan is maintained and updated as needed and is reviewed for accuracy at least annually by a qualified independent inspector and in coordination with the local fire authority.

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

410.3.1 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.
Evacuation

410.3.2 EVACUATION PLANS AND ROUTES
SITE PLAN
(a) Plans for evacuation routes will be posted in all public areas of the facility.
(b) All custody staff will be familiar with evacuation routes for inmates.

EVACUATION
(a) Certain emergency situations will require the prompt release and evacuation of the facility by personnel to ensure the safety of visitors and inmates.
(b) The options afforded the Shift Supervisor for evacuation will include, but not be limited to, the following:
   1. Lock down within the housing units.
   2. Moving from one housing unit to another adjacent unit.
   3. Moving from housing unit to exercise yards.
   4. Moving from the facility to the secure fenced areas adjacent to the jail facility.
(c) Personnel will carry out the following release and evacuation procedures as quickly as possible.
(d) Main routes for evacuation from housing units will be to the exercise yards.
(e) Secondary routes will be to adjoining fenced areas or into the main hallways.
(f) CAUTION SHOULD BE USED TO ENSURE THAT EVACUATIONS DON'T INTERFERE WITH EMERGENCY SERVICES.
   (a) Pod A - Inmates will be moved to the opened fenced area next to the generator yard.
   (b) Pod B - Inmates will be handcuffed or chained and escorted to the fenced area of the Vehicle Sallyport (VSP).
      (a) A Deputy will be posted on the inside perimeter of the VSP to monitor and control inmate behavior.
      (b) Pod B inmates may also be placed in the transport vans.
   (c) Pods C and D - Inmates will be moved to the Pod C and D exercise yard.
   (d) Pod E - Inmates will be moved to the Pod A and E exercise yard.
   (e) Pod F - General population inmates will be moved to the Pod F generator yard.
   (f) Pod F AD-SEG - Inmates will be moved to the Pod F exercise yard.
      (a) A deputy must be posted in the Pod F exercise yard to monitor and control inmate behavior.
   (g) Pod G
      (a) Mental Health inmates will be moved to the Pod G exercise yard.
Evacuation

(b) All females will be moved through G5 to Pod H secure yard.

(h) Pod H - Inmates will be moved to the Pod H outer fenced perimeter.

(i) Pod I - Inmates will be moved to the Pod I exercise yard.

(j) Booking - Inmates will be restrained and moved to the VSP.

(k) Kitchen - Inmates and staff working in the kitchen will evacuate to the loading dock, or through the dining hall to the main lobby and outside to the main grounds.

(a) Inmate workers can then be moved to the Pod I exercise yard.

(l) In the event that inmates are evacuated to the fenced areas around the facility, Control will call Central Dispatch and request deputies, who will respond to the facility for perimeter support and security.

CONTROL PROCEDURES FOR EVACUATION

(a) Control will act as the Command Center in the event of an emergency. If Control cannot be used during the emergency release and evacuation, the Tower will be used as an alternate Command Center.

(b) Control will carry out the following procedures when an emergency release and evacuation is ordered:

1. Notify all employees of the emergency release and evacuation, using the most direct manner of communication, and instructing them of the actions to be taken as set forth by the Shift Supervisor.

2. Monitor the progress of evacuation using the visual and audio system.

3. Release locked doors along the means of exit chosen by the Shift Supervisor to escort inmates to safety.

4. Verify the number of inmates released only after the designated facility staff member has taken a head count of the inmates evacuated.

5. Immediately notify the designated facility staff member of any discrepancies in the inmate count.

6. Record all events and activities for the duration of the evacuation.

(c) Should the locking systems fail, a facility staff member, designated by the Shift Supervisor, will release inmates manually.

(d) A facility staff member, designated by the Shift Supervisor, will check the inmate count to verify that all inmates have been evacuated from the area.

(a) The Count will be followed up by walking through the housing area and performing a visual check.

(e) A facility staff member, designated by the Shift Supervisor will verify the number and location of visitors in the secured area of the jail and notify them, with all non-essential personnel, to evacuate the facility.

SHIFT SUPERVISOR PROCEDURES FOR EVACUATION
Evacuation

(a) The Shift Supervisor is the deputy who is responsible for taking charge and directing the operations of emergency plans according to departmental policy.

(b) Upon notification or discovery of an emergency situation, the Shift Supervisor will determine whether the safety and welfare of the inmate population is in immediate danger, and whether inmate emergency release and evacuation procedures are necessary. If the Shift Supervisor determines that emergency and release evacuation procedures are not necessary, he or she will have Control notify the facility staff of the Code 4/ All Clear status.

(c) If the Shift Supervisor determines that the inmate population is in immediate danger, he or she will have Control notify facility staff of the status in order that proper release and evacuation procedures may be carried out.

(d) The Shift Supervisor will determine which means of exit will provide the safest exit from the area or facility.

(e) The Shift Supervisor will designate a staff member to conduct a head count of all inmates evacuated as soon as the inmates have been escorted to a safe area.

(f) The staff member designated to make the head count will notify Control of the results of the inmate head count and await verification of the count from Control.

(g) If a discrepancy has occurred, the facility staff member will request Control to verify the inmate count.

(a) At the same time, the staff member will conduct a second head count.

(h) If the discrepancy in the inmate count is not reconciled, the Shift Supervisor will be notified immediately.

(i) Once the Shift Supervisor has been notified of this discrepancy in the inmate count, he or she will designate a facility staff member to return to the emergency area, unless he or she feels that returning to the emergency area is unsafe, for the purpose of attempting to locate any inmate(s) who may not have evacuated.

(j) Staff members will notify Control of inmate and/or staff members who may need medical attention, and request medical assistance.

(k) Staff members will remain at their assigned posts until relieved and/or instructed otherwise by the Shift Supervisor.

(l) The Shift Supervisor will take emergency release and evacuation procedures out of effect when he or she is satisfied that the facility can be safely returned to regular operations.

(m) If the facility cannot be re-occupied, the Shift Supervisor will request the necessary personnel and vehicles for support services.

(n) The Shift Supervisor with the Jail Commander will contact surrounding agencies for emergency housing of inmates.

(o) If the facility can be re-occupied, the Shift Supervisor will direct all necessary personnel to restore normal operations.

INJURED PERSONS
Evacuation

(a) Booking is the designated triage location during major emergencies at the Corrections Facility.

(b) All persons injured during an emergency will be taken to booking or the VSP (if booking is not accessible) on a priority basis.

410.3.3 EMERGENCY HOUSING OF INMATES
The Jail 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.

410.4 TRAINING DRILLS
The Jail Commander should ensure that drills of the evacuation plan are conducted at least annually, or more often if required by code, for each shift and at all facility locations. Drills will include staff and volunteers. The local fire agency may be invited to participate in one or more drills annually. Nonviolent and compliant inmates may participate. Violent and/or dangerous inmates or those known to be a flight risk will not be involved in the drills.

Drills should be designed to ensure that all staff members are proficient in their duties during each type of evacuation. Each drill should be documented as to its scope and participants. Upon completion of the drill, each staff member will be required to complete a written test to document knowledge and to show proficiency.
Chapter 5 - Inmate Management
Population Management System

500.1  PURPOSE AND SCOPE
The purpose of this policy is to establish a system of inmate population accounting that promotes the safety and security of the facility on a daily operational basis. It assembles data that enables the Sheriff's Office to forecast staffing and facility growth needs into the future, and to plan for the associated expenditures.

500.2  POLICY
It is the policy of this facility that an inmate population management system should be established and maintained to account for the admission, processing and release of inmates. The Jail Commander or the authorized designee is responsible for ensuring that detailed daily reports of the facility's inmate population are completed and maintained by the staff. The reports shall reflect the average daily population of sentenced and non-sentenced inmates by categories of adult male, adult female and juvenile male and juvenile female. The Jail Commander should collect and submit the data to the Sheriff in a monthly report within 10 working days of the end of each month. The Sheriff or the authorized designee should maintain the data in an accessible format for historical purposes, trend analysis and to respond to funding opportunities (15 CCR 1040).

500.2.1  DATA COLLECTION
For each reporting period, the report should include, but will not be limited to:

(a)  Current number of beds in:
1.  Compliance with local or state standards
2.  General housing
3.  Medical/mental health

(b)  Average Daily Population (ADP) for:
1.  Minimum security
2.  Maximum security
3.  High security
4.  Administrative segregation

(c)  Highest one-day inmate population

(d)  Number and/or percentage of:
1.  Bookings
2.  Male inmates
3.  Female inmates
4. Non-sentenced inmates
5. Felony inmates
6. Pretrial inmates released
7. Sentenced inmates released early due to lack of space
8. Inmates receiving psychotropic medication

(e) Number of inmates:
1. Enrolled in work release program
2. Enrolled in work furlough program
3. Assigned to home electronic monitoring program

(f) Number of:
1. Inmate-on-inmate assaults
2. Inmate-on-staff assaults
3. Escapes/attempted escapes
4. Active misdemeanor warrants
5. Active felony warrants
6. Inmate grievances and dispositions
7. Inmate disciplinary reports and dispositions

(g) Any other demographic information (e.g., gang activity)

The Jail Commander or the authorized designee is responsible for ensuring that all required information is supplied to the Board of State and Community Corrections as required (15 CCR 1040).
Inmate Counts

502.1 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.

502.2 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)).

502.3 PROCEDURE
The Jail 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.

DEFINITIONS
Inmate Count: The physical counting of inmates in the Lake County Hill Road Correctional Facility.
Formal Count: Counts that are conducted at specific times following strict procedures.
Informal Count: Counts that are conducted at irregular times.

(a) All counts shall be documented on the cell check log. Counts shall include all inmates in custody, including those on work assignments, furlough, education release and those who are off-site, such as the hospital or court.

1. Control/Tower/Booking will maintain an accurate count of all inmates at the facility.
2. There will be no inmate moving during formal counts.
3. Facility personnel will be positive they see a live human body before counting an inmate as present. Facility personnel must be certain of seeing human flesh and movement, rather than counting an inmate on the basis of seeing clothing, hair or shoes.
4. Facility personnel must allow nothing short of an emergency to distract them while conducting an inmate count.
5. A formal inmate count will be conducted 30 minutes before the change of each shift. The shift coming on duty will conduct a verbal/standing formal count, ensuring the wellness of each inmate.
6. The Deputy going off duty will prepare an accurate list from the housing bed assignment log. This will include, but not be limited to, the following:
   (a) The name and housing unit of each inmate who will be present during the count
   (b) A list indicating the names of all inmates not present during the count and the reason why, i.e. court, work detail, outside transport, etc.

7. The Deputy conducting the formal count will advise Control/Tower that a formal count is being conducted and will instruct all inmates to return to their housing area or cell immediately. All inmates will remain in their assigned cells or near their assigned bunks in the case of dormitory housing.

8. If the total number of inmates counted corresponds with the number of inmates indicated on the count list, the count will be considered correct. If the count does not correspond with the count list, a recount will occur. If the count continues to conflict with the Housing/Bed Assignment Log, the log will be cross checked with the Control/Tower for any errors. If, after a check of the log, no errors are located, the Shift Supervisor will be notified immediately.

9. The formal count will be radioed into Control/Tower.

10. The formal count will be recorded on the Cell Check Log.

Any discrepancy in the count should immediately be reported to the Shift Supervisor 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 Shift at a time established by the Jail 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 law enforcement agencies and the Jail 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 Jail Commander and Sheriff as soon as practicable.

Count sheets shall be maintained for a period of time prescribed by statute, ordinance or policy.

Formal Count Times:

- 0600 - Standing/ Verbal
- 1300
- 1730
- 1800 - Standing/Verbal
Inmate Counts

- 0100
- 0530
Inmate Reception

504.1 PURPOSE AND SCOPE
The Lake County Sheriff's Office has a legal and methodical process for the reception of arrestees into this facility. This policy establishes guidelines for security needs, the classification process, identification of medical/mental health issues and the seizure and storage of personal property.

504.2 POLICY
This office shall use the following standardized policies when receiving arrestees to be booked into this facility. This is to ensure security within the facility and that arrestees are properly booked and afforded their applicable rights (15 CCR 1029(a)(5)).

504.2.1 INTAKE PROCEDURE
INTAKE PROCEDURE

(a) At the beginning of each shift, Booking/Intake deputy will complete a visual check of the various holding cells for weapons and contraband substances. During this initial check, the deputy will confirm the status of each person present in the booking area and ascertain why they are there.

(b) When any law enforcement personnel arrives at the security gate, which allows access into the sally port, the Tower Aide will advise Booking deputies.

(c) The Arresting/Transorting deputy's duty equipment, i.e. firearms, ammunition, baton and any knives, will be secured prior to movement of the arrestee.

(d) If no problems exist, the arresting officer/deputy will be allowed to bring the arrestee into the Pre-booking area.

(e) All arrestees will be handcuffed behind their back or in belly chains before entering the facility. The arrestee will be escorted into the facility by at least one deputy. The arrestee will be subjected to a pat down search and thorough clothing search to retrieve any concealed weapons and/or contraband substances.

(f) If an inmate is under the influence of a drug or alcohol, to the point of being a danger to himself or others, or is belligerent toward staff, or is violent toward deputies or seems mentally unstable, he or she will immediately be placed in a special housing cell (safety, sobering, etc.), with the notification and approval of the Sergeant. The medical staff will be immediately notified.

If an arrestee is brought in to the facility hog-tied, the Lake County Correctional Facility will NOT accept custody until the arrestee has been medically cleared for incarceration by qualified hospital medical personnel.

The booking deputy will enter the arrestee into the custody of the Hill Road Correctional Facility, by completing/updating the person screen in RIMS Computer System. The Intake deputy will
inventory the arrestee's personal property, including the amount of money in the arrestee's possession at the time of intake, and will enter the information into the Property Screen, in the RIMS Computer System, as time and circumstances allow.

Upon intake, the intake deputy will complete the medical portion of the Pre-Booking Form, as well as the Medical Observation Screen in RIMS, noting all medical issues related to the arrestee. If the arrestee is injured, intoxicated, or suicidal, Jail medical staff will be immediately notified. The intake deputy will note the time and the name of the medical personnel notified.

The Pre-Booking Form will be given to the Booking deputy, who does the computerized booking, and the information on the form will become a permanent part of the booking file.

In order for inmates to be housed in the Facility, a wrist band or name tape will be made and appropriately attached prior to housing.

504.2.2 SENTENCE COMPUTATION REQUIREMENTS
The Lake County Hill Road Correctional Facility will keep an accurate record of requirements, results and information of sentence computation for each inmate committed. It is important that an accurate release date for each inmate is ascertained.

General

(a) All inmates committed to the Hill Road Facility may receive good time/work time credits off their sentence.

(b) Good time/work time may not be granted if an inmate violates facility rules and regulations or refuses to participate in the Inmate Work Program.

(c) Credits for time served prior to being sentenced are the responsibility of the court. If the court finds that credit for time served will be granted, the total number of days credited will be contained in the commitment papers.

(d) Commitment papers should NOT specify a release date. It is the responsibility of the Correctional Facility to determine the release date based on the sentence days imposed on the inmate by the court and his or her behavior while in custody. If the commitment papers specify a release date or has important information omitted, the court must be contacted to have the commitment papers amended.

Good Time

(a) For each four (4) day period in which an inmate is confined in or committed to the Facility, one (1) day will be deducted from his or her period of confinement.

(b) Good time credits may be lost if an inmate violates facility rules or regulations.

Work Time

(a) For each four (4) day period in which an inmate is confined in or committed to the Facility, one (1) day will be deducted from his or her period of confinement.
(b) Work time credits may be lost if an inmate refuses to participate in the Inmate Work Program or violates facility rules or regulations

Computing Good Time and Work Time

(a) Good time and Work time credits will automatically be computed by the In Custody computer system. This computation will be cross checked manually by the responsible deputy. Manual computation requires you to divide the total number of days that an inmate is to serve in the Facility, by four (4).

1. Example: A sentence of three hundred sixty five (365) days will be divided by four (4). This will be equal to ninety one (91). Ninety one (91) will be the number of days credit received for good time. Since work time is computed the same way, (91) will also be the number of days credit received for work time.

Days Suspended from Sentence

(a) The court may suspend days from an inmate’s sentence. The amount of days to be suspended will be specified on the commitment papers. The suspended days will be subtracted from the sentence.

504.3 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:

(a) Probable cause declarations
(b) Warrants or court orders
(c) Victim notification information
(d) Special needs related to religious practices, such as diet, clothing and appearance (refer to the Religious Programs Policy)

Anytime an arrestee or inmate is being evaluated by a member of the medical staff, either the arresting/transporting officer or Intake deputy will stand by to prevent any aggressive behavior.

If the arrestee is injured, the arrestee will not be accepted until jail medical staff examines and approves the inmate for booking. If the medical staff will not accept the arrestee, it will be the responsibility of the Arresting officer/deputy to obtain a medical evaluation and clearance for incarceration for the arrestee by a doctor. If the arrestee is accepted for Booking (with all of the necessary paperwork completed), the Lake County Hill Road Correctional Facility will take custody of the inmate. Under no circumstances will Sheriff’s Office custody staff detain or refuse to allow an arresting officer to leave the jail. Should a disagreement occur, which cannot be resolved by the Shift Supervisor, the Jail Commander will be contacted without delay.

Arrestees who appear to be suicidal will be placed in a safety cell. The nurse on duty will be called to evaluate the arrestee. The arrestee will be searched and placed in a safety gown while in a
safety cell. The deputy will conduct and document welfare checks on the arrestee twice every thirty (30) minutes, no longer than 15 minutes apart.

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

504.3.1 PRE-DETENTION MEDICAL EVALUATION
PURPOSE
To establish guidelines for requiring medical evaluation prior to incarceration.

POLICY
It is the policy of the Lake County Sheriff's Correctional Facility's Medical Program that no arrestee who displays obvious signs of trauma, has an acute illness, who suffered recent trauma or whose circumstances of arrest suggest the probability of trauma will be incarcerated without first undergoing medical clearance evaluation by a doctor. A health screening will be completed on all inmates at the time of intake into the facility by Jail medical staff. (CCR Title 15, Sections 1207, 1207.5, 1206.5, 1051 IMQ Standard #302 (E))

It is the responsibility of the arresting officer to report any evidence of trauma or acute illness to the Intake deputy. It is the responsibility of the Intake deputy to observe the arrestee for any visible signs of trauma and to question the arrestee and the arresting officer concerning any recent trauma, i.e., recent automobile accident, altercation or other incident.

PROCEDURE
The following three levels of medical conditions will be identified initially upon arrival of the prisoner.

I. Those obvious and acute conditions which would preclude acceptance into custody prior to “outside” medical evaluation and clearance.
   (a) Prisoners who are unconscious or who cannot walk under their own power.
   (b) Prisoners who are having or have recently had convulsions.
   (c) Prisoners with any significant external bleeding.
   (d) Prisoners with any obvious fractures.
   (e) Prisoners with signs of head injury
   (f) Prisoners with any type of serious injury or illness.
   (g) Prisoners displaying signs of acute alcohol or drug withdrawal.
   (h) Pregnant women.
   (i) Prisoners who display symptoms of possible internal bleeding or with abdominal bleeding.
   (j) Prisoners with complaints of severe pain or trauma
   (k) Prisoners who have recently attempted suicide (within 24 to 72 hours).
Inmate Reception

II. Those conditions which are identified during the completion of the Medical Clearance Screening by correctional personnel, are referred for immediate medical staff evaluation, and may not require “outside” medical evaluation and treatment.

1. If there is any positive history of acute illness or trauma in the past 24 hours, the Intake deputy shall immediately contact the nurse on duty.

2. If, in the judgment of the nurse on duty, the arrestee requires medical evaluation and clearance prior to incarceration, the arrestee shall not be accepted for booking until such medical clearance has been acquired by the arresting agency.

III. Those conditions which are identified during the completion of the Medical Clearance Screening which necessitate “Next Day” evaluation by health services staff will be referred to on-duty medical staff.

If the arrestee is taken to an Emergency Treatment Center for medical evaluation and clearance prior to booking, documented evidence of such evaluation, treatment and clearance must be returned to the jail so as to become part of that inmate’s medical record.

504.3.2 IMMIGRATION DETAINERS

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

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

504.3.3 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 Sheriff's Office intends to comply with the request (Government Code § 7283.1).

If the Sheriff's 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).
504.3.4 ICE INTERVIEWS
Before any interview between ICE personnel and an individual in custody for civil immigration violations, the Sheriff's 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.

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

504.4 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 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.

504.5 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
- Health insurance information
- Legal authority for confinement, including specific charges, arrest warrant information, and court of jurisdiction
- Sex
- Age
Inmate Reception

- 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
- 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 the inmate 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.

504.5.1 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.

504.5.2 BOOKING LOUNGE AREA
After intake, the Intake deputy will have the choice of placing an arrestee in a holding cell, or in the booking lounge area. As to other crimes, the attitude or behavior of the arrestee will determine his or her placement. Booking/Intake deputies are encouraged to utilize the booking lounge area for inmates displaying appropriate behavior.

If an arrestee is placed in the booking lounge area, he or she may be moved to a booking cell if they violate any rule or become disruptive. If a deputy is advised that a combative arrestee is en route to the facility of if it becomes necessary to move an inmate into a safety cell, the arrestees in the booking lounge area will be moved into booking cells.
While arrestees of both sexes may be placed together in the booking lounge area, only arrestees of the same sex will be housed together. The behavior, as well as the welfare of those arrestees in holding cells will be monitored at intervals of no more than thirty minutes.

Arrestees will only be kept in the Pre-booking Area for the short time it takes for the arresting officer to complete his or her paperwork and the Intake deputy to complete the intake process.

504.5.3 ADMISSION OF SEX OFFENDER REGISTRANTS
The Records Bureau shall inform the California Department of Justice when inmates required to register address changes under Penal Code § 290.013 have been admitted into the jail within 15 days of the admission (Penal Code § 290.13).

504.6 TRANSITION FROM RECEPTION TO GENERAL POPULATION
The Shift Supervisor is responsible to ensure only arrestees who qualify are placed into general population cells or housing. Those who will not be placed into general population include:

(a) Arreestees who are eligible for release following citation.
(b) Arreestees who are intoxicated or under the influence of any chemical substance.
(c) Arreestees 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.

504.6.1 MONITORING FOR SIGNS OF INTOXICATION AND WITHDRAWAL
Staff shall respond promptly to medical symptoms presented by inmates to lessen the risk of a life-threatening medical emergency and to promote the safety and security of all persons in the facility.

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.

504.6.2 INMATE SEPARATION
Inmates should be separated from the general population during the admission process. Newly admitted inmates should be separated according to the facility’s classification plan.

504.7 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 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.
504.7.1 VERIFICATION OF INMATE’S MONEY
All monies belonging to the inmate and retained by the booking deputy shall be verified in front of the inmate. When possible, the inmate should initial the dollar amount on the booking sheet. All money should be placed in a separate envelope and sealed.

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. Should any money be withdrawn or added to the cash envelope, the person making the change shall enter the new amount below the original entry and initial it. The total amount of money in the envelope should always be computed and written on the outside of the envelope.

504.7.2 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 Jail Commander.

504.7.3 COURT CLOTHING BAGS
Whenever an inmate’s court minute orders indicate that they are to be dressed for court and court clothes are sent to an inmate from someone on the outside, the booking deputy will inventory the clothing and/or shoes and enter the inventory into the property portion of the In Custody system. The clothes will then be placed into a blue clothing bag.

The only type of property that will be accepted at reception are court clothing, prescribed medications and prescription eye glasses (if approved by medical). Reading glasses may be purchased through medical. Inmate's personal property will NOT be accepted.

The inmate's last name, first name, and booking number will be written on a property tag and wired to a hook that is located on the hanger portion of the bag. The tag will be placed outside of the bag so that it can immediately be identified. The court bag will be placed on the backside of the inmate's blue property bag and remain with the blue property at all times until the inmate is released from custody.

The only time the court bag is to be separated from the blue property bag, is when the inmate is going to court. After the inmate has been dressed in his or her court clothing, the empty court bag will be placed on the temporary holding rack next to Dress Cell Three. After the inmate has returned from court, the court clothes will be placed back in the blue court bag and re-attached to the inmates blue property bag.

504.7.4 PROPERTY RELEASES
Property releases may be made within the first 24 hours after being booked, and only in emergency situations. Inmate's personal property, minus clothing, is sealed in a vacuum seal bag and will not be opened. For this reason, personal property must be released in its entirety. Clothing will be sealed separately and will not be released.
Inmate Reception

Property approved for release will not be left in the property release book or in the booking area. Property which has been previously approved for release must go with the inmate if said inmate is being released or transferred to another facility.

PROCEDURE

Once a deputy receives a request for property release, the deputy must look to see if the form is filled out correctly (who the released property is going to, inmate signature, etc.). If it is not, the deputy will return the form to the inmate and explain what is wrong with the form.

If the form is filled out correctly, the deputy will check to see how long the inmate has been in custody. If the inmate has been in custody for more than 24 hours, the request will be denied. If the inmate has been in custody for 24 hours or less, the deputy will accept the request and forward it to the shift sergeant.

The shift sergeant will verify the form has been filled out correctly and has not been submitted past 24 hours from the inmate’s initial custody. The shift sergeant will then forward the request to the property release sergeant for approval and processing. If the property needs to be immediately released to persons waiting outside of the facility, the shift sergeant can approve and process the request (within the first 24 hours only).

PROCESSING

If approved, the request will be signed as approved and the yellow copy will be given back to the inmate. The request will state the approval plus a one-week timeframe for the property to be picked up. The one-week timeframe covers two visiting periods for any pod in the facility. It also allows ample time for inmates to coordinate with persons outside the facility via phone to pick up the property.

The white copy will be placed in the property release book. Upon property release, the white copy will be removed from the property release book. The releasing deputy will make contact with the receiving person and obtain and confirm identification. The person listed on the inmate request must be the person receiving the property. The identification will be photocopied with the white copy of the request. The releasing deputy will print an inmate property sheet. The releasing deputy will take the property, inmate property sheet, and receiving person’s identification to the receiving person. At this time, the releasing deputy will open the property bag in front of the receiving person and conduct inventory using the inmate’s property sheet. Upon completion, the receiving person will sign the property sheet as confirmation of accountability.

Once finished, the releasing deputy will take the original request, the copy with the photo identification, and the inmate’s signed property sheet and place them in the inmate’s booking file.

If the property has not been released within the one-week timeframe, the request will be denied. The requesting inmate will not be able to make another request for the property to be released again. The property release sergeant will purge the property release book on a regular basis.
Inmate Reception

Jury Clothes

Upon completion of jury trial, inmates will be allowed to release jury clothing which was brought to the facility specifically for the inmate by outside persons. The jury clothing released must match the receipt issued when the clothing was received and the listing on the inmate’s property sheet titled “Jury Clothing”. No other clothing, including jail issued jury clothing, will be released. Release procedures will follow the standard procedure above. Inmates may request jury clothing release from the time jury trial is complete to the inmate’s sentencing date (approximately one month).

Property release for inmates in route to state prison

In an effort to reduce the amount of property moved to state prison, inmates may release their legal materials and books which they have accumulated during their incarceration. These inmates will be permitted to release these items between their conviction/plea date and their sentencing date (approximately one month). These items will follow the same procedures as above, but need not be inventoried upon release. This does not include personal property or clothing logged during initial booking. If the legal materials and books are still in the inmate’s property upon transfer, the items will be transferred with the inmate regardless of the request.

Money

Money may be released to family members, friends, or bail bondsmen, upon inmate request. All inmate monies can be release with the exception of $2.00 to cover the inmate’s intake kit. The exception would be if an inmate posts bail and is released prior to housing. Money will not be released in the first seven (7) days following the inmate’s booking to allow for intake processing. Money is released following the same procedures listed above for general property release.

Medications

Medications of any kind will not be released.

504.7.5 RELEASE OF STORED/IMPOUNDED VEHICLES

STORED/IMPOUNDED VEHICLES

If an inmate’s vehicle was either stored or impounded upon arrest, and the inmate wants a friend or family to pick up the vehicle. The inmate must write a letter, signed and dated by the inmate and the witness, stating:

- Make and Model of the Vehicle
- The License Plate Number
- Color of the Vehicle and any other distinguishing information.
- The name of the person who is authorized to claim the vehicle
- If the vehicle keys are in the inmate’s property, he or she will need to fill out a request for the release of the keys.
Inmate Reception

The person who picks up the car must first go to the Lake County Sheriff's Main Office, 1220 Martin, Lakeport, CA 95453. He or she must have:

- The witnessed letter from the inmate,
- A valid California driver's license,
- The Current Registration of the Vehicle,
- Proof of Current Insurance Policy on the Vehicle,
- Necessary processing fees.

504.8 INMATE TELEPHONE CALLS

Every inmate, whether adult or juvenile, 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).

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.

504.8.1 TELEPHONE CALL PROCEDURES

The Sheriff's 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).

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

504.9 SHOWERING AND CLOTHING EXCHANGE
Inmates should be given the opportunity 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).
Inmate Handbook and Orientation

506.1 PURPOSE AND SCOPE
This policy provides for the orientation of inmates booked into the Lake County Sheriff's Office facility. The purpose of the orientation is to inform inmates of the jail routine, rules, inmate rights, and services.

506.2 POLICY
The Jail Commander shall provide an effective method of orienting all incoming inmates that includes an inmate handbook. The orientation should take place within 24 hours of an inmate'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 inmates throughout their entire time in custody.

506.3 INITIAL ORIENTATION
To assist with the inmate's transition into a custody environment, the orientation will include the following topics, supplemented by a more detailed inmate handbook that will be provided to each inmate (15 CCR 1069):

(a) Facility rules and disciplinary sanctions
(b) Correspondence, visiting, and telephone rules
(c) Inmate 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)
(l) 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 inmates 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
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) Emergency procedures (e.g., fires, evacuations)
   (p) Voting, including registering to vote
   (q) Direction for pregnant inmates, including the information required in Penal Code § 3407(e) and 15 CCR 1058.5
   (r) 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 inmate population.

The Jail 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 inmates 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 inmate’s permanent file (28 CFR 115.33).

506.4 ORIENTATION FOR NON-READERS, VISUALLY IMPAIRED, AND DEAF OR HARD-OF-HEARING INMATES

Inmates 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).

Inmates who are deaf or hard of hearing shall be provided with interpretation services. Reasonable efforts should be made by the staff to assist the inmate in understanding the information.
Inmate Safety Checks

508.1 PURPOSE AND SCOPE
The purpose of this policy is to establish a requirement for conducting visual safety checks for all inmates, and for creating and maintaining a log to document all safety checks.

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

508.3 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 60 minutes and more frequently if necessary.
(b) Safety checks shall be conducted on an irregular schedule (staggered) so that inmates 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 inmate 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 inmates shall be checked more frequently as detailed in the Special Management Inmates Policy.
Guard 1

509.1 PURPOSE AND SCOPE
The purpose of this policy is to establish a requirement for using the Guard 1 Pipe to conduct visual safety checks, commissary pass, cell inspections, razor inspections, cleaning cart inspections and other inspections as assigned.

509.2 POLICY
It is the policy of the Lake County Sheriff’s Office that all correctional staff shall conduct safety checks at least every 60 minutes on all inmates, or more frequently as determined by inmate custody status and/or housing classification. The safety check will be recorded by the use of the Guard 1 Pipe. Refer to Policy 508.3

Supervisors will be responsible for walking through each housing unit touching each button using the Guard 1 Pipe at least once per shift. Supervisors will also run reports once per shift on the rounds tracker of the Guard 1 System to ensure all security checks are recorded.

Safety checks, commissary pass, razor inspections, cleaning cart inspections and cell inspections will be documented using the Guard 1 Pipe. All other events and activities which cannot be logged by the Guard 1 Pipe will be logged using the In Custody Log. Pods H, I and Booking will log safety checks, tray pick-up, cell inspections, commissary, med pass and meals using the Guard 1 Pipe.

509.3 GENERAL INFORMATION
GUARD 1 PIPE
Monitoring system pipes used in conjunction with strategically placed buttons, which identify location for the purpose of documenting deputies safety checks on inmates, and other checks as required.

The pipe is designed for the most rugged use and the toughest environments. It reads durable metal touch memory buttons. When touched to a location button within the facility it electronically records and time stamps the location of a deputy making the safety check. **DO NOT ROCK OR ROTATE THE PIPE ON THE BUTTON.** This will cause read issues with the pipe. It is a device the size and shape of a small flashlight, has a comfortable grip designed to fit your hand. It is extremely shock resistant, tamper resistant and water resistant. In the event the guard 1 Pipe fails to function, an incident report shall immediately be written and turned in along with the Guard 1 Pipe to the sergeant. The incident report shall include the description of the problem, serial number of the Guard 1 Pipe and the name of the deputy who last used the Guard 1 Pipe.

Under no circumstances shall deputy attempt to open or tamper with the Guard 1 Pipe. Guard 1 Pipe repairs and battery replacements are conducted by Time Keeping Systems only. Time Keeping Systems also has the ability to determine whether the Guard 1 Pipe has been opened and/or tampered with. All deputies shall exercise care to protect any county property entrusted to them to use it in a manner for which it was intended.
GUARD 1

DOWNLOADER
A hardware device which downloads informational data from the “Guard 1 Pipe” to the Guard 1 Plus Rounds Tracker server.

GUARD 1 PLUS ROUNDS TRACKER
A software package provided by Time Keeping Systems Inc. which stores data from the “Guard 1 Pipe” when used for facility security rounds.

509.4 PROCEDURES
The staff shall adhere to the following procedures regarding the use of the Guard 1 Pipe

CHECK OUT – Deputies will check out the Guard 1 Pipe which is identified to the post they are assigned at the beginning of each shift. Each deputy will complete the log stating the deputy’s ID number, pipe, date, time logged out. Once the pipe has been checked out, the deputy will touch the Guard 1 Pipe to the deputy’s issued ID tag. This registers the Guard 1 Pipe to the deputy completing the safety checks and events.

RETURN- At the end of each shift, the deputy will touch the button located on the checkout box. This clears the deputy going off duty. The deputy will place the Guard 1 Pipe in the box at the end of each shift. Under no circumstances is the Guard 1 Pipe to be taken home. If the Guard 1 Pipe is taken home, you will return it immediately.

BUTTON BOARDS- Pods A, B, C, D, E, F and G have a button board mounted near the entrance door to each housing unit. Each board has a button for the following actions: Safety check, Cell Inspections and Commissary. Pods H & I have the button board mounted at the officer’s station. Booking has the button board mounted on the wall next to the Booking Booth. Each board has a button for the following actions: Safety check, Cell Inspections, Commissary, Tray pick-up, Med Pass, Breakfast, Lunch and Dinner.

SAFETY CHECK BUTTONS- Pods A, B, C, D, E, F and G, “Cell Check” buttons are located on the button board mounted near the entrance door in each housing unit for the purpose of documenting deputy safety checks on inmates. A button is placed on each Dress Cell, Holding cell and Booking Lounge door for the purpose of documenting deputy safety checks on inmates in Booking. Pods H & I have the button board mounted at the officer’s station.

FORMAL COUNT- When conducting formal count you will touch the “Safety Check” button using the Guard 1 Pipe on the button board prior to/upon (Pods H & I) entering the unit. Once your Formal Count is completed, you will notify the Tower or Control Aide to log Formal Count in the In Custody Activity Log. Booking will touch the “Formal Count” Button on the button board.

TRAY PICK UP- Pods A, B, C, D, E, F and G, Tray pick-up will be logged in the In Custody Activity Log by the Tower or Control Aide. Pods H, I and Booking will touch the “Tray pick-up” button on the button board documenting this action has been completed.
CELL INSPECTIONS- When conducting cell inspections you will touch the ‘Cell Inspection” button using the Guard 1 Pipe on the button board prior to entering the unit. **Touching the cell inspection button does not count as a safety check.** You must touch the safety check button using the Guard 1 Pipe located on the button board.

COMMISSARY- When conducting commissary pass you will touch the “Commissary” button using the Guard 1 Pipe on the button board prior to entering the unit. **Touching the commissary button does not count as a safety check.** You must touch the safety check button using the Guard 1 Pipe located on the button board.

MED PASS- Pods H, I and Booking will touch the ‘Med Pass” button using the Guard 1 Pipe on the button board prior to entering the unit. **Touching the med pass button does not count as a safety check.** You must touch the safety check button using the Guard 1 Pipe located on the button board.

RAZOR- When inspecting razors at the beginning and end of each shift, you will touch the ‘Razor” button located next to the razor board using the Guard 1 Pipe prior to inspecting the razors. Using the Housing Unit Log you will inspect and match up each name and arrest ID number to each razor.

CLEANING CART- When inspecting cleaning carts at the beginning and end of each shift, you will touch the ‘Cleaning Cart” button located in the “Janitors Closet” using the Guard 1 Pipe prior to inspecting the cleaning carts. Using the Cleaning Cart Check Log you will account for and inspect each item for damage.

BREAKFAST- Pods H, I and Booking will touch the ‘Breakfast” button using the Guard 1 Pipe on the button board upon entering the unit. Touching the breakfast button will not count as a safety check. You will also touch the safety check button logging a safety check of the inmates. All inmates will be accounted for at the time of breakfast pass. If an inmate is not accounted for at breakfast pass, the deputy will locate the inmate and ensure the inmate’s welfare is checked. Tower will be notified of the inmate’s refusal for breakfast and logged into the In Custody Log. The Tower Aide will log breakfast for all Pods A-E and Multipurpose Room into the In Custody Log. The Control Aide will log breakfast for Pods F & G into the In Custody Log.

LUNCH- Pods H, I and Booking will touch the ‘Lunch” button using the Guard 1 Pipe on the button board upon entering the unit. Touching the lunch button will not count as a safety check. You will also touch the safety check button logging a safety check of the inmates. All inmates will be accounted for at the time of lunch pass. If an inmate is not accounted for at lunch pass, the deputy will locate the inmate and ensure the inmate’s safety is checked. Tower will be notified of the inmate’s refusal for lunch and logged into the In Custody Log. The Tower Aide will log lunch for all Pods A-E and Multipurpose Room into the In Custody Log. The Control Aide will log lunch for Pods F & G into the In Custody Log.

DINNER- Pods H, I and Booking will touch the ‘Dinner” button using the Guard 1 Pipe on the button board upon entering the unit. Touching the dinner button will not count as a safety check. You will also touch the safety check button logging a safety check of the inmates. All inmates will be accounted for at the time of dinner pass. If an inmate is not accounted for at dinner pass, the
deputy will locate the inmate and ensure the inmate’s safety is checked. Tower will be notified of the inmate’s refusal for dinner and logged into the In Custody Log. The Tower Aide will log dinner for all Pods A-E and Multipurpose Room into the In Custody Log. The Control Aide will log dinner for Pods F & G into the In Custody Log.

BOOKING- Safety checks will be conducted at least every 60 minutes using the Guard 1 Pipe on all inmates regardless if someone is housed in the cell or not.
Special Management Inmates

510.1 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 Lake County Sheriff's Office.

510.1.1 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 segregation - A level of custody either requested or required for an inmate's protection from others.

Special management inmate - An inmate who is either classified as administrative segregation or protective custody segregation. Classification as a special management inmate is a non-punitive classification.

510.2 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).

510.3 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:
Special Management Inmates

- In protective custody or court-imposed segregation.
- 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.

510.4 CIRCUMSTANCES REQUIRING IMMEDIATE SEGREGATION
Inmates will generally be assigned to segregation through the classification process. The Chief Classification deputy has the authority to immediately place any inmate into segregation when it reasonably appears necessary to protect the inmate or others (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-ordered 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.

510.4.1 REVIEW PROCESS
The Chief Classification deputy shall be notified when any inmate is placed into immediate segregation and shall be informed of the circumstances leading to the order to segregate. Within 72 hours of the inmate being placed into segregation, the Chief Classification deputy or the authorized designee must review the circumstances surrounding the segregation to determine which of the following actions shall be taken:

(a) The inmate is designated for administrative segregation.

(b) The inmate is designated for protective custody.
Special Management Inmates

(c) The inmate remains segregated pending a disciplinary hearing.
(d) The inmate is returned to general inmate population.

510.5 PROTECTIVE CUSTODY
The deputy responsible for assigning classifications to incoming inmates shall clearly document the reason an inmate should be placed into protective custody. Inmates in need of protective custody may be placed in a segregation unit when there is documentation that the protective custody is warranted and segregation is the least restrictive alternative reasonably available.

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. Any deviation from allowing usually authorized items or activities shall be documented on the inmate’s file.

510.6 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.
- Social and 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.

510.7 REVIEW OF STATUS
The Shift Supervisor or the classification deputy shall review the status of all inmates who are housed in segregation units and designated for administrative segregation or protective custody. This review shall occur at least once every 30 days. The review should include information about these inmates to determine whether their status in administrative segregation and protective custody is still warranted.
Special Management Inmates

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.

510.8 SAFETY CHECKS
A staff member shall conduct a face-to-face safety check of all special management inmates, including those housed in administrative segregation or protective custody, at least every 60 minutes on an irregular schedule.

Inmates 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.

Special management inmates shall receive increased monitoring to include, at a minimum:

(a) A daily visit by the Jail 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.

510.9 LOG PROCEDURES
Handwritten logs should be completed in ink. Once an entry is made it should not be modified. If corrections or changes are needed, they should be done by way of a supplemental entry. Electronically captured logs will be maintained in a way that prevents entries from being deleted or modified once they are entered. Corrections or changes must be done by way of supplemental entries. At a minimum the log will contain the following:

- Inmate name
- Inmate booking number
- Classification status
- Housing assignment
- Date and time initially housed
- Date and time of entry and exit from the cell
- Reason for the special housing
- Anticipated time of removal
- Medical, psychological, or behavioral considerations
- Counseling for behavior
- Removal date and time from special housing
Log entries should be legible, entered promptly, and provide sufficient detail to adequately reflect the events of the day for future reference.

The date and time of the observation or incident and the name and identification number of the staff member making the log entry shall be included on each entry.

Supervisors should review the logs frequently during the shift and enter comments as appropriate. At a minimum, supervisors should enter the date and time of each review.

All safety checks will be documented in detail and should include the exact time of the safety check and the identification information of the employee conducting the check. All documentation will be gathered and provided to the Shift Supervisor or the Jail Commander at midnight each day.

510.9.1 LOG INSPECTION AND ARCHIVAL OF LOGS
The Shift Supervisor shall review and evaluate the logs and pass any significant incidents via the chain of command to the Jail Commander for review.

The logs will be retained by the Office in accordance with established records retention schedules, but in no case for less than one year.
Activity Log

511.1 PURPOSE AND SCOPE
The purpose of this policy is to establish a requirement for logging information on the Count Boards, Housing Unit Log, Scratch Log and activities in the In Custody Activity Log.

511.2 POLICY
It is the policy of the Lake County Sheriff's Office that all correctional staff will keep an accurate count on Count Boards, accurate inmate count on Scratch Logs, Housing Unit Logs and accurately log entries/activities into the In Custody Activity Log which are not supported by the Guard 1 System. These entries include, but are not limited to visiting, meals, inmate movement and inmate counts.

Pods A, B, C, D, E, F and G safety checks, commissary pass and cell inspections will be documented using the Guard 1 Pipe. All other events and activities which cannot be logged by the Guard 1 Pipe will be logged using the In Custody Log and the Housing Unit Log. Pods H, I and Booking will log safety checks, tray pick-up, cell inspections, commissary, med pass and meals using the Guard 1 Pipe.

511.3 GENERAL INFORMATION
COUNT BOARDS
Each housing unit has a Count Board located at the deputy station. These Count Boards are used to keep a running count of inmates in the facility/housing unit or out of the facility/housing unit for each specific housing unit. Booking has a Count Board which has the formal count for the entire facility.

HOUSING UNIT LOG
Each housing unit has a paper Housing Unit Log. These logs are located at the deputy stations. These logs contain the inmate’s name, booking number, assigned bed/cell, issued razor, IBC Code, deputy contact, release date and job assignments for Pods H & I.

SCRATCH LOG
Tower and Control each have a Scratch Log. These logs contain daily information for each shift. The information documented on the Scratch Log includes, but are not limited to shift, date, deputy working unit, formal counts, housing unit time outs, inmate time outs, court movement, housing changes and inmate visiting.

IN CUSTODY LOG
A log in the In Custody system which correctional aides and deputies will log entries/activities into the In Custody Activity Log which are not supported by the Guard 1 System. These entries include, but are not limited to formal counts, medication pass, visiting, meals, tray pick-up, inmate movement, facility lockdowns, searches and inmate counts.
511.4 PROCEDURES
The staff shall adhere to the following procedures regarding the use of Count Boards, Housing Unit Logs, Scratch Logs and the In Custody Log.

COUNT BOARD – At each formal count deputies will make sure that their formal count and the Count Boards match the amount of inmates in each unit. If an inmate leaves the facility or housing unit the Count Board is to be adjusted accordingly. All deputies are responsible for maintaining an accurate Count Board for accountability of all inmates.

HOUSING UNIT LOG- Each housing unit has a paper Housing Unit Log located on a clip board at each deputies’s station. This log contains the inmate’s name, booking number, assigned bed/cell, issued razor, total count in each unit, IBC Code, deputies contact, release date and job assignments for Pods H & I. The deputies will use the Housing Unit Log to check each razor by name and booking number to accurately account for each razor. The deputies will add and remove inmates from the Housing Unit Log who have been released or added to the housing unit. Deputies will document the time out and time in any time an inmate is taken out of their housing unit and transported for reasons such as court and doctor appointments. Pod H & I deputies will also document the time out and time in any time an inmate leaves or returns from a job assignment.

It will be the responsibility of the graveyard shift deputies assigned to Pods A-E, Pods F & G, Pod H and Pod I to accurately update the Housing Unit Log they are assigned to each night after 0000 hours.

At 0600 hours and 1800 hours deputies will take the Housing Unit Log with them and perform a standing formal count by name and assigned bed/cell.

SCRATCH LOG- It will be the responsibility of the correctional aides to maintain and update a daily Scratch Log. Aides will log information for each shift. The information documented on the Scratch Log will include, but are not limited to shift, date, deputies working unit, formal counts, housing unit time outs, inmate time outs, court movement, housing changes and inmate visiting.

IN CUSTODY LOG- It will be the responsibility of the correctional aide to log all activities into the In Custody Log such as but are not limited to formal counts, meals, inmate meal refusals, tray pick up, med pass, sick call, dental, mental health, visiting, inmate time out, dorm clean up, searches, S.E.R.T. operations and adding inmates or removing inmates from housing units.

It will be the responsibility of the correctional deputies to log a late safety check. In the event a late safety check occurs, all deputies will log a “Late Entry” using the In Custody Log. You will document the reason why the safety check was late and the deputies who completed the late safety check. Deputies will document all pertinent information using the In Custody Log. These entries include, but are not limited to turning off the water to a cell or housing unit, locking down a housing unit or searching a housing unit.
Management of Weapons and Control Devices

513.1 PURPOSE AND SCOPE
This policy will address the availability and control of weapons.

513.2 POLICY
It is the policy of the Lake County Sheriff's Office that the presence and the use of weapons in the jail 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.

513.3 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.

513.3.1 IMPACT WEAPONS
Impact or striking weapons, such as batons, side-handle batons and telescoping batons, shall not be possessed by staff inside the facility's secure perimeter unless directed by the Jail Commander or Shift Supervisor.

Use of Batons: Batons may be used to overcome jail rioters, aid in cell extractions and other major incidents. The Lake County Hill Road Correctional Facility will allow, when necessary, trained deputies to use the following impact weapons:

(a) 26" Straight Baton
(b) Side Handle Baton
(c) Long Baton
(d) Expandable Collapsible Baton

Long Batons will be kept in the facility's armory and made available with the S.E.R.T. Commander's approval.

Batons may also be deployed against individuals and small groups of inmates who display violent behavior and/or present a danger to staff and/or other inmates. When batons are used to
Management of Weapons and Control Devices

subdue inmates, an incident report, describing the justification and detailing the force used, will be prepared. Inmates struck with a baton will be given a medical evaluation.

The need to immediately incapacitate the inmate 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 inmate may cause serious bodily injury or death to the deputy or others.

513.3.2 KINETIC ENERGY PROJECTILES
Kinetic energy projectiles, when used properly, are less likely to result in death or serious physical injury. Certain munitions can be used in an attempt to de-escalate a potentially deadly situation because of their reduced potential for death or serious physical injury.

Projectile firing weapons, such as the 40mm rubber baton and the bean bag shotgun, shall only be possessed and used by staff who have been trained in the use of these weapons and designated by the Jail Commander.

513.3.3 ELECTRONIC CONTROL DEVICES (ECD)
The handheld TASER® device may only be carried by personnel who have completed office-approved training and have been authorized by the Jail Commander. The TASER device may only be used in accordance with the office use of force and TASER device policies.

Other ECDs, such as stun cuffs and stun belts, shall only be used when it appears reasonably necessary to control an inmate who poses a serious threat to safety or security, and only with the approval of a supervisor. These devices shall not be used to punish or torment. Only office-trained personnel authorized by the Jail Commander shall deploy and use these devices.

Prior judicial approval should be obtained for any use of stun belts in court holding facilities if there is a potential for the device to be worn in the courtroom or otherwise visible to a jury.

513.3.4 PEPPER PROJECTILE SYSTEMS
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. Although classified as a non-lethal weapon, the potential exists for the projectiles to inflict injury when they strike the head, neck, spine and groin. Therefore, personnel deploying the pepper projectile system should not intentionally target those areas except when the deputy reasonably believes the inmate may cause serious bodily injury or death to the deputy or others.

The use of the pepper projectile system is subject to the following requirements:

(a) Deputies 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 make all notifications and reports as required by the Use of Force Policy.
(b) Only office-trained personnel and those designated by the Jail Commander will be allowed to possess and deploy the pepper projectile systems.

(c) Each deployment of a pepper projectile system, except for non-incident deployments such as training, accidental discharges or product demonstrations, 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 evaluation form requirement (e.g., training, product demonstrations).

513.3.5 STUN MUNITIONS AND RUBBER BALL GRENADES
Stun munitions or rubber ball grenades may only be utilized with supervisor approval. Consideration should be given to the use of these devices as they relate to the tight confines of a correctional facility setting.

513.4 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 Jail 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 Jail 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

(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.

513.4.1 WEAPONS LOCKER
Shift Supervisors should conduct and document regular periodic briefings concerning the policy and use of weapons and control devices.

Any test sheets or documentation of performance should be forwarded to the Training Manager. They will be included in the employee’s training record.
Management of Weapons and Control Devices

(a) Persons authorized to utilize "Specialty Munitions"

1. Only personnel who have successfully completed a departmentally approved training course in the proper use and deployment of "Specialty Munitions" will be authorized to deploy them during actual operations.

(b) Authorization for use

1. Except in extreme emergencies (life threatening situations), "Specialty Munitions" will not be used without prior authorization of the S.E.R.T. Commander. In the absence of the S.E.R.T. Commander, the S.E.R.T. Mission Leader may authorize their use. Additionally, the Jail Commander, and/or the on-duty Sergeant may authorize the use of "Specialty Munitions".

(c) Justification for use

1. Generally, "Specialty Munitions" may be considered for use whenever time is available to properly plan for and execute a tactical mission in order to reduce the risk of injury to deputies, innocent citizens and/or suspects.

2. Situations that may call for the use of less lethal munitions (It would be impractical to list all of the possible scenarios where less lethal munitions may be useful, the following are just a few.)

   (a) Violent Subject (s) who is/are armed with a 'non-traditional weapon'.

   (b) Jail disturbance.

   (c) Subject who is armed with a knife or similar weapon.

   (d) Armed suicidal subject.

(d) Precautions

   (a) Safety of deputies and staff is paramount.

   (b) Only factory ammunition should be used during actual operations.

   (c) Only properly trained personnel will utilize specialty ammunition.

   (d) Less lethal impact munitions will not be used when the suspect is in danger of falling from a significant height.

   (e) Each specialty round will be inspected prior to being loaded into the weapon.

   (f) Special considerations should be given when information indicates the suspect had a pre-existing physical or medical condition, which could exacerbate the effects of the "Specialty Munitions".
Inmate Classification

515.1 PURPOSE AND SCOPE
This policy describes the Lake County Sheriff's Office's classification process, which is designed to identify security and health issues so that inmates may be held in such a way as to foster a safe and secure facility (15 CCR 1050).

515.1.1 DEFINITIONS
Definitions related to this policy include:

Civil detainee - Any person held in custody for a reason other than for criminal matters.

515.2 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, cited and released, released on their own recognizance (O.R.) or bail, or released back to the community through an appropriate release mechanism, including alternatives to incarceration programs, such as electronic supervision.

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.

515.3 RELEASE AT OR FOLLOWING CLASSIFICATION
An individual arrested for intoxication only, with no further proceedings anticipated, should be released as soon as custodial staff reasonably determine the person is no longer impaired to the extent that the person cannot care for his/her own safety.

Misdemeanor inmates who meet criterion established by local courts may be cited and released on O.R. by the Sheriff or the authorized designee. Inmates 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 inmate on his/her O.R. (15 CCR 1029(a)(5)).

515.4 CLASSIFICATION PLAN
The Jail 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, as well as intake and housing forms and a process to ensure that all classification and housing records are maintained in each inmate’s permanent file. The plan should include an evaluation of the following criteria (15 CCR 1050):

- Age
- Sex
Inmate Classification

- Current charges
- Behavior during arrest and intake process
- Criminal and incarceration history
- Emotional and mental condition
- Potential risk of safety to others or self
- Special management inmate status
- Special needs assessment for vulnerable inmates
- 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 inmates (e.g., juvenile offenders, gang affiliation, confidential informant, former law enforcement, sexual orientation)
- Prior convictions for sex offenses against an adult or child
- Whether the inmate 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 inmate’s own perceptions of his/her vulnerability
- Whether the inmate is detained solely for civil immigration purposes
- Whether the inmate 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).
Inmate Classification

515.4.1 INMATE RESPONSE TO SCREENING
Inmates may not be compelled by threat of discipline to provide information or answers regarding (28 CFR 115.41):

(a) Whether the inmate has a mental, physical or developmental disability.
(b) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex or gender nonconforming.
(c) Whether the inmate has previously experienced sexual victimization.
(d) The inmate’s own perception of vulnerability.

515.5 INITIAL CLASSIFICATION
The initial classification process is intended to identify predatory, violent and at-risk inmates. It should occur early in the intake process to allow for appropriate supervision while an inmate is being temporarily held in this facility and until a decision is made to place the individual into a more permanent housing assignment.

Inmates 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 inmate’s condition and the inmate’s interview.

The initial classification form shall be placed in the inmate’s file and provided to the classification deputy, who will, within the limits of available resources, determine the appropriate temporary housing location.

515.6 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 inmate will be conducted as soon as possible but no later than 24 hours after the inmate’s arrival at the facility, after which the inmate will be moved to more permanent housing.

515.6.1 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 and numerically scored, representing the security level and housing assignment appropriate for each inmate.

Individualized determinations shall be made about how to ensure the safety of each inmate (28 CFR 115.42; 15 CCR 1050).
515.6.2 OVERRIDE
The classification deputy has the authority to override the scores when it appears necessary to
more appropriately assign housing. The override capability exists to use the classification deputy’s
training and expertise in those instances when the numerical scores are not reflective of the
inmate’s potential security or health risk. All overrides will be reviewed by a supervisor and are
intended to be an exception, rather than the rule.

515.7 REVIEWS AND APPEALS
Once an inmate is classified and housed, he/she may appeal the decision of the classification
deputy. The appeal process shall begin at the first-line supervisor level. The decision by the
supervisor may be appealed to the Jail Commander or the authorized designee. The decision by
the Jail Commander or the authorized designee is final.

515.7.1 PERIODIC CLASSIFICATION REVIEWS
The classification deputy shall review the status of all inmates who have been incarcerated in the
facility for more than 30 days. Additional reviews should occur each 30 days thereafter. The review
should examine changes in the inmate’s behavior or circumstances and should either raise, lower,
or maintain the classification status (28 CFR 115.41).

Housing and program assignments for each transgender or intersex inmate shall be reassessed
at least twice each year to review any threats experienced by the inmate (28 CFR 115.42).

Inmate risk levels shall be reassessed when required due to a referral, request, incident of sexual
abuse, or receipt of additional information that increases the inmate’s risk of sexual victimization
or abusiveness (28 CFR 115.41).

515.7.2 STAFF REQUESTED REVIEW
At any point during an inmate’s incarceration, a staff member may request a review of the inmate’s
classification. The reason for the review, the review itself, and the outcome of the review shall
be documented in the inmate’s permanent file. Nothing in this section shall prohibit staff from
immediately moving an inmate to another location in the facility based on exigent circumstances.
Under such circumstances, the staff member moving the inmate must immediately document the
action and notify the classification deputy.

515.8 HOUSING ASSIGNMENTS
Inmates should be housed based upon the following criteria:

- Classification level
- Age
- Sex (males and females will be housed in separate units)
- Legal status (e.g., pretrial, sentenced)
- Special problems or needs
- Behavior
Inmate Classification

- Any other criteria identified by the Jail Commander

515.8.1 SEPARATION
Male and female inmates shall be housed to ensure visual and physical separation.
Civil detainees shall be housed separately from pretrial and sentenced inmates.

515.9 CLASSIFICATION SPACE ALLOCATION
The classification plan depends on the ability of the facility to physically separate different classes of inmates. To ensure that allocated space meets the current population needs, the Jail Commander or the authorized designee should periodically meet with representatives of the classification deputies to discuss the fixed resources (e.g., cells, dorms, dayrooms).
The Jail Commander should report at least quarterly to the custody management team any space issues.

515.10 SINGLE-OCCUPANCY CELLS
Single-occupancy cells may be used to house the following categories of inmates:
- Maximum security
- Administrative segregation
- Medical condition or disabilities (upon consultation with medical staff and the availability of medical beds)
- Mental condition (upon consultation with mental health staff and the availability of mental health beds)
- Sexual predators
- Any inmate 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 Jail Commander or the authorized designee when single-occupancy cells are not available for housing the above described inmates. In such cases, a risk assessment shall be used to identify inmates in the above categories who may be safely housed together.

515.11 PRISON RAPE ELIMINATION ACT (PREA) CONSIDERATIONS
Housing, bed, work, and program assignments should be made to separate inmates at high risk of being sexually victimized from those at high risk of being sexually abusive (28 CFR 115.42). Inmates 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 inmates and staff. All inmates identified as being at risk of victimization shall be monitored and housed in an area to minimize the risk to their safety. However, inmates 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 inmate shall include individualized consideration for the inmate’s health and safety and any related supervisory, management, or facility security concerns (15 CCR 1050). A transgender or an intersex inmate's views with respect to his/her own safety shall be given serious consideration.

Lesbian, gay, bisexual, transgender, or intersex inmates 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).

515.12 EDUCATION, WORK, AND OTHER RELEASE

Unless an inmate is incarcerated for an offense for which release is prohibited by law or otherwise prohibited by court order, an inmate incarcerated in the jail 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 Jail Commander or the authorized designee

Education and work-release inmates who leave the secure perimeter of the jail to complete programs should be housed separately from inmates in general population.

There should be no contact between the inmates in general population and those authorized for education, work, or other release. This is to minimize the risk of introducing contraband into the jail and to maintain facility security.

515.13 STAFF TRAINING IN CLASSIFICATION

Classification deputies should receive training specific to inmate classification before being assigned primary classification duties. Individuals not specifically trained in inmate classification may work in classification provided that they are under the immediate supervision of a trained and qualified staff member.
Conducted Energy Device

517.1 PURPOSE AND SCOPE
This policy provides guidelines for the issuance and use of the TASER® device.

517.2 ISSUANCE AND CARRYING TASER DEVICES
The TASER device may only be issued to authorized members who have completed office-approved training for use during their current assignment. Those leaving a particular assignment may be required to return the device to the Office inventory.

Staff shall only use the TASER device and cartridges that have been issued by the Office. The device may be carried as part of a uniformed member’s equipment.

(a) The TASER device shall be maintained in a secure storage location (see the Management of Weapons and Control Devices Policy).
(b) Each TASER device shall be clearly and uniquely numbered.
(c) Upon arriving for work members shall sign out their devices.
(d) Upon finishing the shift, each member shall turn in the device to the approved secure storage area.
(e) Members shall not pass on the devices to oncoming shift members without signing in and signing out the devices on the TASER device inventory log.
(f) At the beginning of each shift, the oncoming Shift Supervisor shall inventory all TASER devices.
(g) Whenever practicable, members should carry two or more TASER device cartridges on their persons at all times when carrying the TASER device.
(h) Members shall be responsible for ensuring that their issued TASER device is properly maintained and in good working order at all times. Members carrying the TASER device should perform a spark test on the unit prior to every shift.
(i) Deputies should not hold both a firearm and the TASER device at the same time.
(j) The TASER device should be marked with a distinctive color or marking to distinguish it from firearms or any other device.

517.3 VERBAL AND VISUAL WARNINGS
A verbal warning of the intended use of the TASER device should precede its application, unless it would otherwise endanger the safety of staff or when it is not practicable due to the circumstances. The purpose of the warning is to:

(a) Provide the inmate with a reasonable opportunity to voluntarily comply.
(b) Provide other staff and inmates with a warning that the TASER device may be deployed.
Conducted Energy Device

If, after a verbal warning, an inmate is unwilling to voluntarily comply with a member’s lawful orders and it appears both reasonable and feasible under the circumstances, the member may, but is not required to, display the electrical arc (provided that a cartridge is loaded into the device) or the laser in a further attempt to gain compliance prior to the application of the TASER device. The aiming laser should never be intentionally directed into the eyes of another as it may permanently impair his/her vision.

The fact that a verbal and/or other warning was given or the reasons it was not given shall be documented by the member deploying the device in the related report.

517.4 USE OF THE TASER DEVICE
As with any correctional equipment, the TASER device has limitations and restrictions requiring consideration before its use. The TASER device should only be used when its operator can safely approach the subject within the operational range of the device.

Although the TASER device is generally effective in controlling most individuals, members should be aware that the device may not achieve the intended results and be prepared with other options.

517.4.1 APPLICATION OF THE TASER DEVICE
Authorized personnel may use the TASER device when circumstances perceived by the member at the time indicate that such application is reasonably necessary to control an inmate in any of the following circumstances:

(a) The inmate is violent or is physically resisting.
(b) The inmate has demonstrated an intention to be violent or to physically resist and reasonably appears to have the potential to harm staff, him/herself or others.

517.4.2 SPECIAL DEPLOYMENT CONSIDERATIONS
The use of the TASER device should generally be avoided on certain individuals unless the totality of the circumstances indicates that other available options reasonably appear ineffective or would present a greater danger to the member, the subject or others, and the member reasonably believes that the need to control the individual outweighs the risk of using the device. Such individuals include:

(a) Inmates who are known to be pregnant.
(b) Elderly inmates.
(c) Inmates with obviously low body mass.
(d) Inmates who are handcuffed or otherwise restrained.
(e) Inmates who have been recently sprayed with a flammable chemical agent or who are otherwise in proximity to any combustible vapor or flammable material, including alcohol-based oleoresin capsicum (OC) spray.
(f) Inmates whose position or activity may result in collateral injury (e.g., falls from height).
Conducted Energy Device

Because the application of the TASER device in the drive-stun mode (i.e., direct contact without probes) relies primarily on pain compliance, the use of the drive-stun mode generally should be limited to supplementing the probe-mode to complete the circuit, or as a distraction technique to gain separation between staff and the subject, thereby giving staff time and distance to consider force options or actions.

The TASER device shall not be used to torture, psychologically torment, elicit statements from or punish any inmate.

517.4.3 TARGETING CONSIDERATIONS
Reasonable efforts should be made to target lower center mass and avoid intentionally targeting the head, neck, chest and groin. If the dynamics of a situation or officer safety do not permit the member to limit the application of the TASER device probes to a precise target area, members should monitor the condition of the inmate if one or more probes strikes the head, neck, chest or groin until the inmate is evaluated by qualified medical personnel.

517.4.4 MULTIPLE APPLICATIONS OF THE TASER DEVICE
Members should apply the TASER device for only one standard cycle and then evaluate the situation before applying any subsequent cycles. Multiple applications of the TASER device against a single individual are generally not recommended and should be avoided unless the member reasonably believes that the need to control the individual outweighs the potentially increased risk posed by multiple applications.

If the first application of the TASER device appears to be ineffective in gaining control of an inmate and if circumstances allow, the member should consider certain factors before additional applications of the device, including:

(a) Whether the probes are making proper contact.

(b) Whether the inmate has the ability and has been given a reasonable opportunity to comply.

(c) Whether verbal commands, other options or tactics may be more effective.

Members should generally not intentionally apply more than one TASER device at a time against a single subject.

517.4.5 DOCUMENTATION
All TASER device discharges shall be documented in the related incident report and on the TASER device report form. Notification shall be made to a supervisor in compliance with the office Use of Force Policy. Unintentional discharges, pointing the device at a person, laser activation and arcing of the TASER device will also be documented on the TASER device report form. Any report documenting the discharge of the TASER device will include an explanation of the circumstances surrounding the discharge.

Following a Taser device use which results in serious injury to an inmate, the onboard TASER device memory will be downloaded through the data port by a supervisor or Rangemaster and
Conducted Energy Device

saved with the related incident report. Photographs of the probe and contact sites should be taken after the inmate has been seen by qualified medical personnel. The confetti-like AFID tags, the expended cartridge along, probes and wires shall be booked into evidence. The cartridge serial number will be included in all related reports and documented on the evidence paperwork. The evidence packaging should be marked “biohazard” if the probes penetrated the inmate’s skin.

At a minimum the following should be documented:

(a) Identification of all personnel firing TASER devices
(b) Cartridge serial number
(c) Identification of all witnesses
(d) Medical care provided to the inmate
(e) Observations of the inmate’s physical and physiological actions
(f) Any known or suspected drug use, intoxication or other medical problems

The Office should periodically analyze the report forms to identify trends, including deterrence and effectiveness. The Training Manager should also conduct audits of data downloads and reconcile TASER device report forms with recorded activations. TASER device information and statistics, with identifying information removed, should periodically be made available to the public.

517.4.6 MAINTENANCE, USE & DATAPORT TRACKING
The primary responsibility for maintaining and caring for the TASER will rest with the Sheriff's Office Armorer or designee. The Armorer will:

(a) Log and track all TASERs and munitions.
(b) Upon discharge notification of a TASER, for record keeping, prepare a supplemental report documenting the discharge memory.
(c) Order and maintain adequate munitions and maintenance supplies.
(d) Conduct inspections of the TASER units at the Sheriff's Office approved range.

517.5 MEDICAL TREATMENT
Only deputies who have been instructed in the use of the TASER should remove TASER probes from an inmate’s body, as outlined in current TASER training. Deputies will seek a medical evaluation for TASER probes impacting sensitive areas such as the head, neck, face, throat, groin or breast areas prior to removal. Used TASER probes shall be considered a bio-hazard, similar to a used hypodermic needle. Universal Precautions should be taken accordingly.

All inmates who have been struck by TASER device probes or who have been subjected to the electric discharge of the device shall be medically assessed prior to continued processing or
housing. Any inmate who falls under any of the following categories should, as soon as practicable, be examined by qualified medical personnel:

(a) The person is suspected of being under the influence of controlled substances and/or alcohol.
(b) The person may be pregnant.
(c) The person reasonably appears to be in need of medical attention.
(d) The TASER device probes are lodged in a sensitive area (e.g., groin, female breast, near the eyes).
(e) The person requests medical treatment.

Persons who exhibit extreme agitation, violent irrational behavior accompanied by profuse sweating, extraordinary strength beyond their physical characteristics and imperviousness to pain (sometimes called “excited delirium”), or who require a protracted physical encounter with multiple staff members to be brought under control, may be at an increased risk of sudden death and should be examined by qualified medical personnel as soon as practicable. Any individual exhibiting signs of distress after such an encounter shall be medically cleared prior to booking.

If any individual refuses medical attention, such a refusal should be witnessed by another member and/or medical personnel and shall be fully documented in related reports. If an audio recording is made of the contact or an interview with the individual, any refusal should be included if possible.

517.6 TRAINING

Personnel who are authorized to carry the TASER device shall be permitted to do so only after successfully completing the initial office-approved training. Any personnel who have not carried the TASER device as a part of their assignment for a period of six months or more shall be recertified by the TASER device instructor approved by this office prior to again carrying or using the device.

Proficiency training for personnel who have been issued TASER devices should occur every year. A reassessment of a deputy’s knowledge and/or practical skill may be required at any time if deemed appropriate by the Training Manager.

Command staff and supervisors should receive TASER device training as appropriate for the investigations they conduct and review.

Members who do not carry TASER devices should receive training that is sufficient to familiarize them with the device and with working with members who use the device.

The Training Manager is responsible for ensuring that all members who carry TASER devices have received initial and annual proficiency training. Periodic audits should be used for verification.

Application of TASER devices during training could result in injury to personnel and should not be mandatory for certification.

All training and proficiency for TASER devices will be documented in the member’s training file.
Conducted Energy Device

The Training Manager should ensure that all training includes:

(a) A review of this policy.
(b) A review of the Use of Force Policy.
(c) Target area considerations, including techniques or options to reduce the unintentional application of probes near the head, neck, chest and groin.
(d) Handcuffing a subject during the application of the TASER device and transitioning to other force options.
(e) Restraint techniques that do not impair respiration following the application of the TASER device.
(f) De-escalation techniques.

517.6.1 TESTING
All training delivered to the staff should include testing to document that the employee understands the subject matter presented.

517.7 POLICY
It is the policy of the Lake 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.
Remote Electronically Activated Control Technology (R-E-A-C-T)

518.1 PURPOSE AND SCOPE
The R-E-A-C-T (Remote Electronically Activated Control Technology) System has been adopted to provide a safe, effective restraint device for use in court with high-risk defendants or during transportation details. The device can also be used in other custody situations to reduce the physical force needed to effectively control combative inmates or inmates who may attempt escape, while reducing the likelihood of injuries to all involved parties including but not limited to innocent bystanders.

518.2 GENERAL
The R-E-A-C-T System is a remotely operated electronic restraint device which produces an electrical shock for eight continuous seconds that can disorient, temporarily immobilize and stun a person without causing permanent injuries. It is activated by a small radio transmitter with a range of up to 175 feet. The product may be used in a low profile mode or combined with other restraints such as handcuffs, waist and leg restraints.

518.3 PROCEDURE
TRAINING
No deputy may operate the R-E-A-C-T System, either in the product’s daily maintenance or in use with inmates, unless that deputy has completed a departmentally approved training course on the use of the R-E-A-C-T product as specified by the Lake County Sheriff Office.

MAINTENANCE RESPONSIBILITIES
Each deputy, hereafter designated as “Control Deputy”, responsible for maintaining the respective product, will exercise due care and diligence to ensure the batteries are charged and replaced as necessary.

No deputy will attempt to repair or alter this unit without first consulting with factory personnel (other than changing the batteries).

At no time will a Control Deputy relinquish the R-E-A-C-T System to untrained, unsupervised personnel.

IMPLEMENTATION
The following guidelines will be followed in the use of the R-E-A-C-T System:

A. Courtroom
Remote Electronically Activated Control Technology (R-E-A-C-T)

Determination for use of the R-E-A-C-T System for courtroom purposes shall be reserved to the Presiding Judge.

B. Custody Transport

Use of the R-E-A-C-T System for inmate movement or transport shall be with approval of the Facility Commander or the Shift Sergeant in the Facility Commander’s absence.

SYSTEM PRE-USE

The R-E-A-C-T System Implementation Checklist shall be used to prepare the R-E-A-C-T System for operation. In addition, the inmate will be given the opportunity to read the Inmate Notification Form. The inmate will sign and date the form in the appropriate space provided. In the event the inmate cannot read the Inmate Notification Form, it shall be read to the inmate.

APPROPRIATE USE

A. The R-E-A-C-T System may be placed on an inmate to provide added security and restraint in dealing with a high risk or disruptive inmate.

B. The System may be activated under the following circumstances.
   1. Any attempt to escape or assault other persons.
   2. Any outburst of movement which appears to threaten escape or assault.
   3. Any failure to comply with the lawful direction of the deputy.
   5. Anytime the wearer moves out of sight of the Control Deputy.

C. Immediately after the R-E-A-C-T System has cycled, secure the inmate with handcuffs, belly chains or other devices as necessary to control the inmate.

D. In the event the inmate is able to resist being immobilized after a single activation, a second activation may be initiated.

E. Subsequent activations will be used only if the inmate is still actively attempting assault or escape. If the inmate’s actions are limited to resistance to being secured, other physical restraint techniques should be attempted.

FOLLOWING USE

A. Immediately report the incident to the shift supervisor.
Remote Electronically Activated Control Technology (R-E-A-C-T)

B. Medical Examination: The R-E-A-C-T System is designed for temporary immobilization. It will not normally cause any significant injury. An inmate may however, receive secondary injuries as the result of falling when the device is activated.

1. If the inmate complains of medical problems after the use of the product, have him/her evaluated by medical staff or taken to the nearest medical facility.

2. Use caution if the inmate is moved to a civilian medical facility; this may be part of a planned escape effort.

C. Immediately following the incident, photograph signature marks (contact marks) and any secondary injury. Photographs should be taken both with and without a measuring tape or scale being included to establish the size and location of the marks.

WRITTEN REPORT

While the R-E-A-C-T System utilizes less-lethal pulse technology and causes no known permanent injuries or side effects, the use of this device is a serious matter.

A. Any activation of the product by an employee will be immediately brought to the attention of the shift supervisor.

B. On every occasion that the R-E-A-C-T System is activated, a written report will be completed by the activating deputy before he/she goes off duty. That report will comply with Lake County Sheriff Office report requirements and must also include:

1. The observed reaction of the inmate at the time of activation.
2. Description of any observable marks or injuries to the inmate.
3. Complaints from the inmate.
4. The time, location and by whom the photographs were taken.

C. In a separate memo, the activating deputy will write his/her observations regarding the effectiveness of the specific R-E-A-C-T System.

D. The memo and a copy of the report will be immediately forwarded to the Jail Commander or his/her designee. Reports will be entered into the InCustody Incident System, including photographs of any injuries/signature marks.

DANGEROUS AND UNAUTHORIZED USE

The R-E-A-C-T System shall not be used in the following circumstances:

A. With pregnant women.
Remote Electronically Activated Control Technology (R-E-A-C-T)

B. With persons known to have serious heart diseases, multiple sclerosis or muscular dystrophy.

C. To unlawfully threaten, coerce, harass, taunt, belittle or abuse any person.

D. In any form of horseplay between staff or with persons from outside the department.
   1. Persons violating this policy will be subject to disciplinary action and may be subject to criminal charges.
Control of Inmate Movement

519.1 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.

519.2 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.

519.3 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.

519.4 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.
Use of Force

521.1 PURPOSE AND SCOPE
The purpose of this policy is to establish guidelines governing application of force, limitations on the use of force, supervisor’s responsibilities, and reporting requirements for incidents involving the application of force (15 CCR 1029(a)(3)).

521.1.1 DEFINITIONS
Definitions related to this policy include:

**Deadly force** - Any use of force which creates a substantial risk of causing death or serious bodily injury, including but not limited to the discharge of a firearm (Penal Code § 835a).

**Excessive force** - The use of more force than is objectively reasonable under the circumstances to accomplish a lawful purpose.

**Use of force** - Any application of physical techniques or tactics, chemical agents or weapons to another person. It is not a use of force when the inmate allows him/herself to be searched, escorted, handcuffed or restrained.

**Use of force team technique** - The use of force team technique ordinarily involves trained staff clothed in protective gear, who enter the inmate’s area in tandem, each with a specific task, to achieve immediate control of the inmate.

521.2 POLICY
It is the policy of this office to accomplish the office’s functions with minimal reliance on the use of force.

521.3 USE OF FORCE
Authorized members may use force as reasonably appears necessary in the performance of their duties, but excessive force shall not be used. Members must use only that amount of force that appears reasonably necessary under the circumstances in order to gain control of the inmate, to protect and ensure the safety of inmates, staff, and others, to prevent serious property damage, prevent escape, obtain compliance with facility rules and staff orders, and to ensure the institution’s security and good order or for other lawful purposes.

The Office has provided a number of tools, weapons, and training on techniques to use when responding to resistance and violent encounters. While various degrees of force exist, each member is expected to use only that degree of force that is reasonable under the circumstances to successfully accomplish the legitimate and lawful purpose in accordance with this policy.

Circumstances may arise in which staff may reasonably believe it would be impractical or ineffective to use any of the standard tools, weapons, or methods provided by the Office. Staff members may find it more effective or practical to improvise their response to rapidly unfolding conditions 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 reasonably necessary to accomplish a legitimate government purpose.

In any review of an incident to determine whether a particular use of force conforms to this policy, the Office will evaluate the apparent need for an application of force, the relationship between that need and the amount of force used, the threat reasonably perceived, any efforts made to temper the severity of a forceful response, and the extent of any injury to the inmate.

Prior to resorting to the use of force, staff should, when practicable, attempt verbal persuasion, orders, or other tactics to avoid or mitigate the need for forceful action.

Force shall never be used as punishment or retaliation.

Medical checks will be performed by a qualified health care professional on all inmates who have been subjected to force as soon as practicable regardless of apparent injury. If no qualified health care professional is available, the inmate shall be transported to the designated health care facility.

Nothing in this policy is intended to require that force options be used in a particular order. However, the force option used must be objectively reasonable under the circumstances to accomplish a lawful objective.

521.3.1 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. 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.
(c) Member/inmate factors (e.g., age, size, relative strength, skill level, injuries sustained, level of exhaustion or fatigue, the number of members available vs. inmates).
(d) The conduct of the involved members (Penal Code § 835a).
(e) The effects of drugs or alcohol.
(f) Inmate’s apparent mental state or capacity (Penal Code § 835a).
(g) The inmate’s apparent ability to understand and comply with deputy commands (Penal Code § 835a).
(h) Proximity of weapons or dangerous improvised devices.
(i) The degree to which the inmate 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 inmate.
Use of Force

(l) Training and experience of the member.
(m) Potential for injury to members, inmates, and others.
(n) Whether the inmate appears to be resisting or is attacking the member.
(o) The risk and reasonably foreseeable consequences of escape.
(p) The apparent need for immediate control of the inmate or a prompt resolution of the situation to maintain or restore order.
(q) Whether the conduct of the inmate being confronted no longer reasonably appears to pose an imminent threat to the member or others.
(r) Awareness of the inmate’s propensity for violence.
(s) The feasibility of giving the inmate a warning prior to using force.
(t) Any other exigent circumstances.

521.3.2 DUTY TO INTERCEDE
Any member present and observing another staff member using force that is clearly not within this policy is expected, when reasonable to do so, to intercede to prevent the use of such force and in all cases report the use promptly to a supervisor.

521.4 IMMEDIATE AND CALCULATED USE OF FORCE
An immediate use of force occurs when force is used to respond without delay to a situation or circumstance that constitutes an imminent threat to security or safety. For example, the immediate or unplanned use of force by staff may be necessary to stop an inmate from inflicting life-threatening injuries to him/herself or to stop an assault on any other person, including other inmates.

The destruction of government property may require the immediate use of force by staff in some circumstances. A verbal warning should be given before an immediate use of force unless the circumstances preclude it.

If there is no need for immediate action, staff should attempt to resolve the situation through voluntary compliance or, if it reasonably appears necessary, the calculated use of force. A calculated use of force is called for when an inmate's presence or conduct poses a threat to safety or security and the inmate is located in an area that can be controlled or isolated, or when time and circumstances permit advance planning, staffing, and organization.

The assistance of available non-custodial staff (e.g., psychologists, counselors) should be considered when attempting to resolve a situation without confrontation.

A supervisor shall be present in any situation involving the calculated use of force. The supervisor shall notify the Jail Commander or the authorized designee for approval and consultation prior to any calculated use of force action.
521.4.1 CONFRONTATION AVOIDANCE PROCEDURES
Prior to any calculated use of force, the supervisor shall confer with the appropriate persons
to gather pertinent information about the inmate and the immediate situation. Based on the
supervisor’s assessment of the available information, he/she should direct staff to attempt to
obtain the inmate’s voluntary cooperation and consider other available options before determining
whether force is necessary.

The supervisor should consider including the following persons and resources in the process:

(a) Mental health specialist
(b) Qualified health care professional
(c) Chaplain
(d) Office Records Bureau
(e) Any other relevant resources

Regardless of whether discussions with any of the above resources are accomplished by
telephone or in person, the purpose is to gather information to assist in developing a plan of
action, such as the inmate's medical/mental history (e.g., asthma or other breathing related illness,
hypoglycemia, diabetes), any recent incident reports or situations that may be contributing to the
inmate's present condition (e.g., pending criminal prosecution or sentencing, recent death of a
loved one, divorce). The assessment should include discussions with staff members who are
familiar with the inmate's background or present status. This may provide insight into the cause
of the inmate's immediate agitation. It also may identify other staff who have a rapport with the
inmate and could possibly resolve the incident peacefully, without the use of force.

If force is determined to be necessary and other means of gaining control of an inmate are deemed
inappropriate or ineffective, then the use of force team technique should be used to control the
inmate and to apply restraints, if required.

Consideration should also be given to preventing exposure to communicable diseases in
calculated use of force situations and to ensuring that medical services personnel are available.

521.5 REPORTING THE USE OF FORCE
Every staff use of force is an incident that shall be reported on the appropriate report form. Any
staff member who uses force and any staff directly observing the incident shall make a verbal
report to a supervisor as soon as practicable and shall submit the appropriate documentation prior
to going off-duty, unless directed otherwise by a supervisor.

The documentation will reflect the actions and responses of each staff member participating in
the incident, as witnessed by the reporting staff member.

The report should include:

(a) A clear, detailed description of the incident, including any application of weapons or
restraints.

(b) The identity of all individuals involved in the incident (e.g. inmates, staff, others).
Use of Force

(c) The specific reasons for the application of force.
(d) The threat as perceived by the staff involved.
(e) Efforts made to temper the severity of a forceful response, and if there were none, the reasons why.
(f) 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.

A video recording is required for all calculated use of force incidents and should include the introduction of all staff 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 Jail Commander within three working days.

The supervisor responsible for gathering the reports may allow a reasonable delay in preparation of a report in consideration of immediate psychological and/or physical condition of the involved member.

521.6 SUPERVISOR RESPONSIBILITY

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:

(a) Ensure a crime scene is established to preserve and protect evidence.
(b) 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.
(c) In cases involving the use of deadly force or when serious injury has resulted, obtain an oral statement from the member. The statement should be restricted to concerns of anything that may present an ongoing threat to the security of the facility or public safety.
(d) Take appropriate measures to address public safety concerns, document the essence of the oral statement in writing, and submit it to the Shift Supervisor.
(e) Ensure that the appropriate investigation authority is notified, if needed.
(f) Ensure that any parties involved in a use of force situation are examined by medical staff, regardless of whether any injuries are reported or detectable, and afforded medical treatment as appropriate.
(g) Separately obtain a recorded interview with all inmates upon whom force was used. If this interview is conducted without the person having voluntarily waived his/her Miranda rights, the supervisor should ensure the following in the event a report is submitted to a prosecuting authority:

1. The fact that a recorded interview was conducted by a supervisor and retained for the use of force review should be clearly documented.
2. The content of the interview should not be summarized or included in any related reports submitted to the prosecuting authority.
Use of Force

(h) The recording of the interview should be distinctly marked for retention until all potential for civil litigation has expired.

(i) Once any initial medical assessment or first aid has been completed, ensure that photographs have been taken of any areas involving visible injury or complaint of pain as well as overall photographs of uninjured areas. These photographs should be retained until all potential civil litigation has expired.

(j) Identify any witnesses not already included in related reports.

(k) Review and approve all related reports.

If the supervisor determines that any application of force was not within policy, he/she should detail those findings in a separate report. If there is an injury or complaint of an injury, the supervisor should also prepare a risk management report and should submit all reports to the Shift Supervisor.

In the event that the supervisor believes the incident may give rise to civil litigation, a separate claim form should be completed and routed to the appropriate channels.

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.

If an inmate has made an allegation of an unnecessary or excessive use of force, the interview should be video-recorded and shall be documented on the appropriate report form.

521.7 USE OF DEADLY FORCE

If an objectively reasonable deputy would consider it safe and feasible to do so under the totality of the circumstances, deputies should evaluate the use of other reasonably available resources and techniques when determining whether to use deadly force. The use of deadly force is only justified 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 when the deputy has probable cause to believe that the inmate 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 inmate is not immediately apprehended. Under such circumstances and when feasible, prior to the use of force, the deputy shall identify him/herself and warn that deadly force may be used, if the deputy objectively believes the inmate is not aware of those facts.

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).
Use of Force

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).

521.7.1 USE OF DEADLY FORCE-REPORTING
A member, who intentionally or accidentally uses deadly force, whether on- or off-duty, shall ensure that a supervisor is notified of the incident without delay.

The supervisor shall ensure that the chain of command is notified and all necessary health and safety, medical and security measures are initiated.

The Shift Supervisor shall promptly notify the Jail Commander of any incident involving a staff member employing deadly force, or any incident where a death or serious bodily injury may have been caused by a staff member.

521.8 USE OF FORCE REVIEW
The Shift Supervisor shall review all related reports of use of force incidents occurring on his/her command. The review is to determine whether the use of force was in compliance with policy, procedure and applicable law, and to determine if follow-up action or investigation is necessary. If the supervisor determines that any application of force was not within policy, there is an injury sustained by the inmate or member, or the supervisor believes civil litigation may arise from the incident, all reports and a memorandum documenting the supervisors opinion(s) shall be submitted to the Jail Commander as soon as practicable.

521.9 FN 303 LESS LETHAL LAUNCHER
DEFINITIONS
1. “FN 303” is a less lethal shoulder fired device intended to propel a projectile containing a payload of various substances, most commonly OC chemical agent.
2. “Area Saturation” is the act of firing multiple projectiles at a hard surface in an attempt to release OC chemical agent into the air.
3. “Kinetic Energy Impacts” is firing projectiles directly at the body of an individual(s).

POLICY
The FN 303 may be used on a single inmate, multiple inmates, or for area saturation when;

1. At the direction of the Jail Commander; or
2. When the use of an impact weapon would be justified; or
3. When a higher level of force may be justified, but an opportunity exists to use a FN 303 instead.
Use of Force

Only those members who are trained in the operation of the FN 303 system may deploy the device. Although FN 303 is classified as less than lethal, it still may inflict serious injury if a projectile strikes the eye, neck or groin of a target. Members deploying the FN 303 should avoid intentionally striking those areas.

No person will be exposed to the FN 303 for the purpose of practical demonstration.

REPORTING

1. Members discharging the FN 303 outside of training shall report its use to their immediate supervisor, as soon as practicable. Supervisors shall require the member to prepare a written use of force incident report prior to the end of shift. Exceptions may be made if the member requires medical attention.

2. Photographs of the impact area(s) should be taken immediately following the incident.

MEDICAL ATTENTION

Whenever an inmate is struck with a projectile from the FN 303 or is exposed to the related OC chemical agent, the Shift Supervisor or SERT Supervisor is responsible for having the inmate examined by medical staff without delay to determine the extent of injury and provide the appropriate medical care. If an individual remains combative or uncooperative, a medical assessment shall be completed as soon as practicable.
Use of Restraints

523.1 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 inmate for prolonged periods.

This policy does not apply to the use of electrical restraints (see the Electronic Restraints Policy).

523.1.1 DEFINITIONS
Definitions related to this policy include:

Clinical restraints - Restraints applied when an inmate's disruptive, assaltive 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 inmate with a serious mental illness as part of his/her treatment when clinically indicated for preventive therapeutic purposes.

523.2 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 inmate classification, such as maximum security, to control the behavior of a high-risk inmate while he/she is being moved outside the cell or housing unit.

Restrainsts shall never be used for retaliation or as punishment. Restraints shall not be utilized any longer than is reasonably necessary to control the inmate. Restraints are to be applied only when less restrictive methods of controlling the dangerous behavior of an inmate have failed or appear likely to fail (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 inmate during movement and transportation inside or outside the facility.

523.3 USE OF RESTRAINTS - CONTROL
Supervisors shall proactively oversee the use of restraints on any inmate. Whenever feasible, the use of restraints, other than routine use during transfer, shall require the approval of the
Use of Restraints

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 inmate when it reasonably appears necessary to overcome resistance, prevent escape, or bring an incident under control, thereby preventing injury to the inmate 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 inmate in a restraint chair or other restraints for extended periods requires approval from the Jail 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 inmate for adequate circulation.

The use of restraints for purposes other than for the controlled movement or transportation of an inmate shall be documented on appropriate logs to include, at a minimum, the type of restraint used, when it was applied, a detailed description of why the restraint was needed, and when it was removed (15 CCR 1058).

The following provisions shall be followed when utilizing restraints to control an inmate (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 inmates shall not be placed face down 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) Inmates in restraints shall be housed either alone or in an area designated for restrained inmates.

(e) Restraints shall be applied for no longer than is reasonably necessary to protect the inmate or others from harm.

(f) Staff members shall conduct direct face-to-face observation at least twice every 30 minutes on an irregular schedule to check the inmate’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 inmate's behavior. Any actions taken should also be noted in the log.

(g) The specific reasons for the continued need for restraints shall be reviewed, documented, and approved by the Jail Commander or the Shift Supervisor at least every hour.
Use of Restraints

(h) Within one hour of placement in restraints, a qualified health care professional shall document an opinion regarding the placement and retention of the restraints.

(i) As soon as practicable, but within four hours of placement in restraints, the inmate shall be medically assessed to determine whether he/she 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.

(j) As soon as practicable, but within eight hours of placement in restraints, the inmate must be evaluated by a mental health professional to assess whether the inmate needs immediate and/or long-term mental health treatment. If the Jail Commander, or the authorized designee, in consultation with responsible health care staff determines that an inmate cannot be safely removed from restraints after eight hours, the inmate shall be taken to a medical facility for further evaluation.

523.3.1 RESTRAINT CHAIR & THE WRAP

POLICY

Only reasonable force and restraint may be used when necessary to control inmates who display behavior which results in the destruction of property or reveal intent to cause harm to self or others. The restraint chair or Wrap is considered an alternative and/or supplement to the safety cell. However, inmates who are violent or combative to the extent that placement in the safety cell would not likely protect them from injury, should be considered for placement in the restraint chair or Wrap to provide a greater degree of safety to the inmate and staff. Use of the restraint chair or Wrap will be used only as a last resort.

DEFINITIONS

Restraint Chair - A chair designed for the purpose of restraining violent inmates who are a danger to themselves or others, or whose behavior results in the destruction or property. Devices used are approved by Facility administration, such as the chair manufactured by E.R.C., Inc.

The Wrap - A restraint device available as an alternative to the restraint chair, but used for the same purpose. The Wrap device which is approved for use by members is manufactured and supplied by Safe Restraints, Inc.

Shift Supervisor - The Shift Sergeant or Officer in Charge (OIC) in the Jail Commander's absence.

Medical Staff - Medically certified personnel providing medical services to the Hill Road Correctional Facility, under contract with Wellpath.

PROCEDURE

(a) A medical opinion on placement and retention in the safety or restraint chair or Wrap will be obtained in any instance in which the chair or Wrap is used for more than 15 minutes. The medical opinion should be obtained as soon as is reasonably possible, but no later than one (1) hour after the placement.

(b) Continued retention in the restraint chair or Wrap will be reviewed a minimum of every two (2) hours, or more often if medically indicated.
Use of Restraints

1. CONTINUED RETENTION IN THE RESTRAINT CHAIR OR THE WRAP BEYOND TWO HOURS MUST BE APPROVED BY THE FACILITY COMMANDER.

   (c) At no time will a prisoner be in the restraint chair or Wrap for more than eight (8) hours in a single day.

   (d) The following guidelines will be followed in the use of the restraint/safety chair or Wrap.

   1. It will only be used with the approval of the Jail Commander or the Shift Sergeant

   2. A medical opinion will be obtained, if possible, prior to placement in the chair or Wrap.

   3. Direct supervision will be made once every fifteen (15) minutes to ensure the restraints are properly employed and to ensure the safety and well being of the inmate. All supervision will be documented on the restraint chair or Wrap log, which will be placed outside of the booking booth. Custody staff will initial the log and indicate the date and times the inmate is checked.

   4. The Shift Sergeant will check on the inmate every hour and note each check on the appropriate log.

   5. The inmate will be medically cleared for retention at least every four (4) hours thereafter by medical staff.

   6. If a determination is made to remove the inmate from the chair or Wrap, after four (4) hours, the Shift Sergeant and available medical personnel will be present during the attempt.

   7. Inmates placed in a restraint chair or Wrap will be kept physically separated from other inmates and housed alone.

   8. AT NO TIME AND UNDER NO CIRCUMSTANCES WILL THE RESTRAINT CHAIR OR WRAP BE USED FOR DISCIPLINE, NOR WILL AN INMATE BE PLACED IN A RESTRAINT CHAIR OR WRAP SIMPLY AT THE REQUEST OF AN ARRESTING OFFICER.

   9. The restraint chair or Wrap will not be used any longer than necessary for the safety of the inmate, other inmates or staff. Upon determination that the inmate is no longer combative or a danger to self or others, the inmate will be removed from the restraint chair or Wrap.

   10. If a deputy notes any respiratory distress, medical staff will be notified immediately.

   11. If a deputy observes lack of circulation in the hands or feet of the inmate during a direct supervisory check, the deputy will call a second deputy to assist and readjust the restraints to accommodate better circulation. Medical staff will be immediately notified.

   12. If an inmate complains of pain due to the restraints of his or her placement in the restraint chair or Wrap, the deputy will notify medical staff and ask them to examine the inmate. In addition, the inmate will be allowed the opportunity
Use of Restraints

for movement of his or her extremities for at least ten (10) minutes every two (2) hours, while at the same time allowing for the continued safety of the inmate, as well as staff.

13. Custody Staff will closely monitor any inmate placed in a restraint chair or Wrap and work with the medical staff to ensure that the inmate receives adequate fluids and nutrition. Staff will also ensure that the inmate’s sanitation needs are provided for. Each time fluids or food are given or offered, correctional staff will note the action taken on the Observation Log. Deputies will notify medical staff if an inmate refuses fluids for more than four (4) hours.

14. An incident report will be prepared to document the reason for placement in the restraint chair or Wrap. All documentation will be placed in the inmate’s booking file as a permanent record.

15. The restrained inmate’s mouth and nose will NOT be covered in any way that will restrict his or her ability to breathe or expel vomit. A “Spit Net” may be used on a temporary basis to prevent the arrestee or inmate from expectorating on staff, or biting during processing or movement.

523.3.2 COURT APPROVAL
Prior judicial approval should be obtained for the use of restraints when the inmate is in court if the restraints will be visible to a jury.

523.4 RANGE OF MOTION
Inmates 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.

523.4.1 RECEIVING INMATES FROM ARRESTING/TRANSPORTING AGENCIES
(a) Transported inmates will be placed in a seated, not prone, position.

(b) When an inmate is received from an arresting/transporting agency, the Hill Road Correctional Facility staff will make sure that all information has been obtained concerning the following conditions:

1. If an inmate is hog-tied upon arrival at the jail, or had been hot-tied prior to arrival, clearance by hospital medical staff is necessary before the facility will accept custody of the inmate.

2. Preexisting medical conditions (cardiac, respiratory, etc.).

3. Medical treatment requested or needed by the inmate due to respiratory difficulty or due to having become unconscious.

Advisory Guidelines:
(a) Where possible, avoid the use of maximally prone restraint devices (e.g., hog-tying).
Use of Restraints

(b) As soon as the suspect is handcuffed, get him off his or her stomach.

c) If an inmate continues to struggle, do **NOT** sit on his or her back. Hold his or her legs down, or wrap his or her legs in a strap.

(d) **Never** tie the handcuffs to a leg or ankle restraint.

(e) If required, get the subject immediate medical attention.

523.5 FOOD, HYDRATION, AND SANITATION

Inmates 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 inmate.

Offering food and hydration to inmates will be documented to include the time, the name of the person offering the food or water/juices, and the inmate’s response (receptive, rejected). Inmates shall be provided the opportunity to clean themselves or their clothing while they are in restraints.

523.6 AVAILABILITY OF CPR EQUIPMENT

CPR equipment, such as barrier masks, shall be provided by the facility and located in proximity to the location where inmates in restraints are held.

523.7 RESTRAINED INMATE HOLDING

Restrained inmates should be protected from abuse by other inmates. Under no circumstances will restrained inmates be housed with inmates who are not in restraints. In most instances, restrained inmates are housed alone or in an area designated for restrained inmates (15 CCR 1058).

523.8 PREGNANT INMATES

Restraints will not be used on inmates 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 inmate, the staff, or the public. Should restraints be necessary, the restraints shall be the least restrictive available and the most reasonable under the circumstances.

Inmates 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 inmate should be advised of the policies and procedures regarding the restraint of pregnant inmates (Penal Code § 3407; 15 CCR 1058.5).

523.8.1 INMATES IN LABOR

No inmate 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 inmate 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 inmate, the staff of this or the medical facility, other inmates, 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 inmate 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.
# Searches

## 527.1 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 Lake 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.

### 527.1.1 DEFINITIONS

Definitions related to this policy include:

**Contraband** - Anything unauthorized for inmates to possess or anything authorized to possess but in an unauthorized quantity.

**Modified strip search** - A search that requires a person to remove or rearrange some of his/her clothing that does not include a visual inspection of the breasts, buttocks or genitalia of the person but may include a thorough tactile search of an inmate's partially unclothed body. This also includes searching the inmate's clothing once it has been removed.

**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.

**Witnessed Clothing Exchange** - A witnessed clothing exchange is the process by which an arrestee exchanges his/her personal clothing for jail clothing, from behind a privacy screen and
under the general supervision of jail staff. The privacy screen prevents viewing of the inmate's breasts and genitalia, while ensuring that contraband is not transferred from personal clothing to jail clothing.

527.2 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.

527.3 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).

527.4 MODIFIED STRIP SEARCHES, 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.

527.4.1 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 modified strip search or 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:
**Searches**

1. 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.

2. 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 modified strip search or strip search of an inmate shall be conducted prior to admittance to a housing unit without prior authorization from the Shift Supervisor.

(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.

**527.4.2 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.

527.4.3 MODIFIED STRIP SEARCHES AND 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.

Staff members may conduct modified strip searches and 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.
Searches

- 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.

527.4.4 WITNESSED CLOTHING EXCHANGE
All arrestees will be subjected to a witnessed clothing exchange prior to being housed in general population. The exchange will be controlled and witnessed only by facility staff of the same sex as the arrestee.

(a) The witnessed clothing exchange will be conducted in the designated privacy areas. The arrestee will be instructed to stand behind the privacy wall and hand his or her clothing items over to the deputy in exchange for facility-issued clothing.

(b) The arrestee will remove his or her shoes. The deputy will turn the shoes over, shake them out, and bank the heels against the floor to see if they contain contraband.

(c) The deputy will have the arrestee remove his or her socks, and turn them inside out as they are removed.

(d) The deputy will instruct the arrestee to remove his or her outer and undergarments. The arrestee will pass these items to the deputy who will thoroughly examine the clothing for any possible weapons, controlled substances or contraband. The deputy will promptly pass facility-issued clothing to the arrestee. The deputy will instruct the arrestee to dress in the facility-issued clothing; however, the arrestee will refrain from putting on socks and shoes.

(e) After the exchange of clothing is complete and the arrestee is dressed in facility-issued clothing, the deputy will instruct the arrestee to do the following:

1. Face the deputy and lift his or her head so the deputy may look into the arrestee's nostrils.
2. Open his or her mouth and move the tongue back and forth. If the arrestee is wearing dentures, he or she will be instructed to remove them prior to inspection.
3. Comb fingers through the hair, bend the head down, and shake out the hair.
4. Turn to the left while the deputy checks within the left ear. The arrestee will pull the left ear down so a check may be done behind the ear. The same procedure will be followed for the right ear.
5. Raise one foot at a time so the deputy may examine the bottoms of the feet.

527.4.5 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:

1. 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 jail-supplied clothing, as appropriate.

527.4.6 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 Jail 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)).
Searches

(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.
   3. The Jail 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.

527.4.7 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.
527.5 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).

527.6 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.

527.7 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.

527.8 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.
Searches

(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.
(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.

527.8.1 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).

527.9 CRIMINAL EVIDENCE SEARCHES
The Jail 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.

527.10 TRAINING
The Training Manager 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).
BODY SCANNER POLICY

528.1 PURPOSE
The Lake County Sheriff's Office is dedicated to all components of workplace safety. This written program establishes procedures to safeguard the health of Sheriff’s employees, transporting officers from other agencies, and inmates in the vicinity of a body scan device and to ensure compliance with the applicable federal and state regulations.

It is the policy of the Lake County Sheriff’s Office Custody Division to ensure that radiation safety procedures and guidelines are followed to ensure the safe operation of the X-ray based body scan device.

528.2 POLICY
I. DEFINITIONS

**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 metals either concealed under the clothes, swallowed, or hidden in anatomical cavities of the human body without causing harm to the scanned person. (For example, the Conpass Full-Body Security Screening 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:** 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, the boundaries of the working zone and in adjacent rooms, if applicable.

**Exposure:** means being exposed to ionizing radiation or to radioactive material.

**Sievert:** A unit used to derive a quantity called equivalent dose. This relates the absorbed dose in human tissue to the effective biological damage of the radiation. Equivalent dose is often expressed in terms of millionths of a Sievert, or micro Sievert.

One Sv is equal to 1,000,000 micro Sieverts.

One Sievert equals 100 rem. (The rem is an older unit of measurement.)

**Dose:** A general term used to express how much radiation exposure a person or other material has received.
BODY SCANNER POLICY

The average effective dose from natural background radiation in the United States is 3.1 micro Sieverts per year. This figure does not include man-made doses, such as from medical procedures, which add another 3.1 micro Sieverts for a total of about 6.2 micro Sieverts per year.

Annual radiation dose limits for individual members of the public is 1 micro Sievert (does not include medical administrations (e.g., X-rays or CT exams) which can range as high as 10 micro Sieverts or higher for a single procedure.)

Annual occupational dose limits for adults is 50 micro Sieverts.

II. OVERVIEW

A. The Conpass Full-Body Security Screening System (hereinafter referred to as the Scanner) will be utilized to scan new bookings, housed inmates, objects and property. The intent is to prevent weapons, drugs, and contraband from entering the facility, and to detect contraband possessed by inmates within the facility, or hidden within their property.

B. All arrestees and housed inmates may be subject to an X-ray scan, unless a condition exists that would prohibit scanning (refer to Section IV).

C. The deputy performing the scan shall be the same sex as the person being scanned.

   1. Although the Scanner does not reveal identity or gender-specific images, the Scanner cannot be used for cross-gender searches. Penal Code Section 4030 treats all body scanners the same and requires that a person 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).

   2. “Sex” refers to the searched person’s gender, including the person’s gender identity and gender expression.

D. The Scanner may be used to scan any item belonging to an arrestee/inmate. Use of the Scanner to inspect the contents of packages or articles not belonging to an arrestee/inmate, or items that will not be stored inside the Jail Clothing or Property Rooms will not be conducted absent clear legal authority to do so.

E. The Conpass body scanner does not take the place of a pat search or strip search.

III. GUIDELINES FOR SCANNING

A. All arrestees will be scanned using the following procedure, unless a condition exists that would prohibit scanning.

   (a) Following the removal of all property, the arrestee will be instructed to remove their shoes and stand on the platform with their face pointed down toward the dot on the platform. The inmate will be instructed to hold their shoes during the scanning process.

   (b) If it is suspected that the inmate may have concealed weapons or drugs in their shoes, the shoes should be scanned separately to avoid potential use of the weapon or destruction of evidence.
BODY SCANNER POLICY

(c) The intake process will continue if no anomalies are detected.

B. To prevent the introduction, transfer or concealment of weapons, drugs and contraband inside the facility, all booked and housed inmates may be scanned at any time (unless pregnant). Considerations that may warrant use of the Scanner for housed inmates:

(a) After contact with the public (i.e., the inmate has returned from any place where they have not been under continuous staff supervision and could reasonably have obtained and concealed contraband before being returned to custody). Such contact includes, but is not limited to: inmates returning from court, outside medical appointments or hospital stay, court-ordered pass (e.g., funeral), and work crews.

(b) Inmates within housing units who demonstrate signs or symptoms of drug intoxication.

(c) Any time there is a reasonable suspicion to believe the inmate may have unauthorized or dangerous items concealed on their person, or that he or she may have been involved in an altercation of any kind.

(d) Prior to placement in a safety cell.

C. It is not necessary to obtain Watch Commander approval to scan an inmate. However, the Operations Sergeant must be notified in order to coordinate movement and ensure that the intake area is secured (i.e., the sallyport/intake door shall remain secured and not be opened when an inmate is in the intake area). All scans conducted of housed inmates shall be documented via an incident report (“Body Scanner”) regardless of the result.

IV. EXCEPTIONS AND CONSIDERATIONS

A. Pregnant inmates

Although the amount of radiation is minute and extremely unlikely to cause any sort of fetal effect, the Scanner shall not be used to scan a woman who is known or alleged to be pregnant. A statement by the subject that she is pregnant is sufficient to exempt the subject from a body scan at the time of booking, unless otherwise refuted by medical staff.

B. Disabled inmates

Persons who have a disability that prevents the use of the Scanner shall be afforded reasonable accommodation. Searches shall be thorough and professional, with safety and security being the paramount concern.

C. 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 their 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.

D. Pacemakers and Medical Devices
BODY SCANNER POLICY

There is no FDA published material indicating the use of the Scanner will adversely affect implanted medical devices such as a pacemaker, and pacemaker manufacturers regard the full-body scanners as safe for pacemakers and ICD’s. The presence of such a device should not preclude the use of the Scanner, unless other circumstances known to medical staff or Jail staff indicate otherwise.

E. Refusal to cooperate / Combative inmates

1. Due to the nature of the scanning process, scanning a combative subject will not produce a usable image. Subjects who refuse to cooperate with the scanning process should be placed into a cell where their activities can be monitored until they have been scanned or otherwise searched for weapons, drugs or contraband.

2. If the subject is an arrestee, they may be accepted into custody and booked.
   (a) They shall be strip searched (e.g., misdemeanor or infraction offenses involving weapons, controlled substances or violence; cite and release). Refer to Jail Division policy Searches of Inmates and Housing Units.
   (b) If the arrestee would not otherwise be qualified for a strip search, their 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. If the behavior warrants reasonable suspicion, the Booking deputy shall complete a form and submit the form for approval to the Watch Commander. The Watch Commander shall evaluate the information and circumstances, and approve or deny the request, as warranted.

V. DETECTION OF CONTRABAND

If the scanning process reveals an object that is clearly identifiable as a weapon, drug or other contraband, the following procedure will be followed:

A. If the object is clearly a weapon or suspected drug, that information shall be conveyed to the arresting/transporting officer and appropriate officer safety practices should be utilized.
   (a) The subject’s clothing shall be searched by the arresting/transporting officer, with focus on the approximate area where the object appeared to be located. The arrestee shall be re-scanned to ensure that all contraband was recovered.
   (b) If the clothing search is unsuccessful, and/or it appears that the anomaly may have been ingested or inserted into a body cavity (e.g., rectum, vagina, mouth), the arrestee will be asked to remove the object. If the arrestee refuses to remove the object, or the object appears to be in a location where a physical body cavity search or intrusive medical procedure would be required, a second opinion shall be obtained from another deputy. If both concur, the Operations Sergeant shall be contacted and advised of the detection.
   (c) The decision to accept or refuse the arrestee shall be made by the Sergeant.

NOTE: Arrestees who require a physical body cavity search shall not be accepted into custody.
**BODY SCANNER POLICY**

B. If the arrestee is refused admittance:
   
   (a) The Booking deputy who performed the scan shall initiate an incident report for “Pre-Booking Refusal.” The report should indicate the reason for refusal, and include a description of the suspected contraband and approximate area where the object appears to be located.
   
   (b) The Sergeant shall provide the arresting/transporting officer with the following:
       
       (a) A copy of the incident report (approved by the Sergeant).
       
       (b) A copy of the body scan image of the arrestee on a flash drive (if available) or disc.

3. The arresting/transporting officer will be required to obtain a medical clearance prior to return and acceptance of the arrestee.

C. If the arrestee is accepted into custody, a strip search shall be conducted prior to placement into a holding cell. Strip searches will be performed in accordance with LCSO Custody Policy.

D. If the inmate is already in custody and a physical body cavity search is determined to be necessary, the Operations Sergeant shall be notified and make the necessary arrangements to obtain a search warrant by contacting the Patrol Sergeant on duty.

E. Any contraband retrieved from a body cavity, or which is otherwise suspected of being contaminated, shall be handled using appropriate safeguards and shall be placed in a container which shall be clearly labeled “contaminated.”

VI. PRESERVATION OF IMAGES

A. Scanned images are automatically preserved under each inmate’s ID number.

B. In the event weapons, drugs or contraband items are identified or suspected, the image shall be noted in the log book maintained at the operator station.

   (a) An incident report shall be written if an arrestee is not accepted into custody (“Pre-Booking Refusal”), or if the item is retrieved via a visual body cavity search.
   
   (b) All scans conducted of housed inmates shall be documented via an incident report (“Body Scanner”) regardless of the result.

C. The Operations Sergeant shall be notified of the detection and appropriate steps will be taken to provide a copy of the image, if needed as evidence for a criminal prosecution.

VII. INMATE PROPERTY

A. Inmates have traditionally used a variety of methods to conceal weapons, drugs and contraband. Methods have involved concealing prohibited items inside inmate commissary containers, sack lunches, issued bedding, and within envelopes used for legal materials.

B. Any property located in inmate housing may be scanned at any time, for any reason.

C. Inmate property located in a stored property bag may be scanned when staff has reasonable suspicion to believe articles within the property bag may contain illegal
property, weapons, drugs or contraband that would pose a risk to the Jail facility if not recovered from the bag, 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.

VIII. SCANNER SYSTEM SAFETY AND OPERATING PARAMETERS

The following provisions shall be adhered to by all staff:

A. Operators of the Scanner shall use it in a responsible manner, in accordance with this policy, and in accordance with the manufacturer’s operating instructions.

B. The operator’s manual shall not be removed from the Booking Office.

C. During operation of the Scanner, unauthorized persons (other than service personnel) are not allowed within the working zone, approximately two (2) meters out from the base of the unit. The working zone shall be clearly marked on the floor around the unit. The Scanner shall be considered operational when the red light on the unit is on.

D. The operator shall continuously monitor the position of the person being scanned while the mobile platform moves. In case of an incident, the mobile platform shall be stopped by pressing the red Emergency Stop button mounted at the operator’s station (or pressing the STOP button on the SCANNING toolbar). Doing so will stop X-radiation output and halt movement of the platform.

E. Upon becoming aware of any safety issue related to the Scanner, staff shall immediately report their concern to their supervisor, who will forward the concern to the Radiation Safety Officer.

F. Any installation of scan device components or part removal shall be completed by a service engineer of the representative company and/or additional service contractors. Staff shall not disassemble or attempt any repair on the Scanner.

IX. TRAINING

No employee shall operate the Scanner without first successfully completing proper training.

A. Each operator shall be provided with training on the operation and use of the Scanner. At a minimum, this shall include preoperational checks, operation of the system, subject positioning, interpretation of images, procedures to be followed if the system is damaged or malfunctions, and practical operational experience.

B. The training will be performed by the Facility Training Officer supervisor. The training material to include power point presentation (provided by Adani) will be used to assist in the training.

C. Each operator shall be provided radiation safety training prior to performing security screening operations, which shall include:
   (a) The types of radiation
   (b) Sources and magnitudes of typical exposures
   (c) Radiation units
   (d) Concept of time, distance, and shielding
   (e) Concept of ALARA (As Low As Reasonably Achievable)
BODY SCANNER POLICY

(f) Biological effects
(g) Radiation risk
(h) Basic risk communication concepts
(i) Training on the administrative controls associated with ensuring that dose to subjects is limited and on the importance of these administrative controls (i.e., any individual screened shall be limited to no more than 250 micro Sieverts any 12-month period).

(j) Other safety hazards (e.g., unauthorized disassembly of the system).

(k) Physical security procedures to prevent unauthorized use or access.

(l) Operator awareness and control of inspection zones.

D. Refresher training shall be provided at least once every twelve (12) months.

X. DUTIES OF THE RADIATION SAFETY OFFICER

A. The weekday supervisor shall serve as the Radiation Safety Officer.

B. The Radiation Safety Officer (RSO) will:

(a) Maintain the Radiation Safety and Protection Program and coordinate the safe operation of X-ray based body scan devices in compliance with applicable federal and state regulations.

(b) Ensure all new or relocated radiation sourcing equipment operated by the Sheriff’s Office within the Jail Division is registered with the Radiologic Health Branch of the California Department of Public Health (form numbers RH-2261N and/or RH-2261C) within thirty (30) days.

(c) Ensure all radiation sourcing equipment operated within the Jail Division is maintained and serviced in compliance with applicable federal and state regulations.

(d) Arrange and schedule any needed repair or service for the Scanner upon being advised of any damage or malfunction.

(e) Ensure that radiation safety surveys are performed in compliance with ANSI (American National Standards Institute) Standards. Retain any survey, service, inspection, and instrument calibration records for the lifetime of the Scanner.

(f) Ensure that the annual fee for the Scanner is paid to the Radiologic Health Branch of the California Department of Public Health (CDPH-RHB) prior to the anniversary of the effective date of the license.

NOTE: Title 17 of the California Code of Regulations, Section 30231, requires the above payment and mandates that failure to do so requires all usage of the Scanner to immediately cease until such time that the fee and any late fees have been paid.

XI. CONPASS BODY SCAN DEVICE SAFETY FEATURES

A. The system operation modes are preset by the manufacturer during installation and are not to be changed by the operator.
B. Numerous safety features are built into the Scanner, which make it possible to minimize radiation doses to which personnel and persons being scanned could be exposed:

(a) X-ray generator enclosed in the X-ray protection case.
(b) System of slit diaphragms in the X-ray protection case provides a narrow fan-shaped X-radiation beam.
(c) X-ray protection shutter shuts off output of the X-ray radiation from the generator.
(d) Permanently connected additional X-ray filter.
(e) High-sensitivity digital X-ray converter.
(f) Built-in dosimeter for monitoring the stability of the X-ray generator.
(g) Emergency STOP button.
(h) Red signal lantern - when ON indicates the Scanner is in operation.

C. In the event 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 Conpass software tests the system when it is turned ON and during the scanning process. Error messages are displayed on the operator’s monitor screen.

XII. FAILURE OF SAFETY FEATURES / VENDOR REPAIR

(a) The safety features noted in Section XI are required to be functioning to operate the system. In the event any of the safety features become inoperable, the operator shall shut down the Scanner and immediately notify the Booking/Records Sergeant.

(b) The Operations Sergeant will:

(a) Notify the Watch Commander.
(b) Notify the RSO, who will contact a contracted vendor to make any repairs as necessary.

C. Facility staff shall not attempt any repair on the Scanner.

XIII. ANNUAL SERVICING AND SURVEY OF THE SCANNER

A. To ensure the Scanner is operating within manufacturer specifications, a calibration, maintenance, and service shall be performed twice a year by an authorized service engineer. Refer to the Conpass Operator’s Manual for detailed service tasks. The RSO will ensure the maintenance schedule is adhered to.

B. Radiation surveys shall verify the effective dose, radiation leakage, and inspection zone. Surveys shall be performed on each body scanner device:

(a) Upon installation of a new unit
(b) At least once every twelve (12) months

C. Upon relocation of an existing unit
D. Immediately following any service that could potentially increase the system output.
**BODY SCANNER POLICY**

**XIV. RADIATION DOSES**

**A. Safety of the Persons Scanned**

According to ANSI standards, the radiation dose shall not exceed 10 micro Sieverts per scanning session. The Scanner’s effective doses are pre-set at 0.25, 0.50, and 1.0 micro Sievert per scan. The level selected should be based on the individual’s density (i.e., weight), utilizing the dose as low as is reasonably achievable (ALARA). Administrative controls keep track of the accumulated doses and prevent any single person from exceeding 250 micro Sieverts in any 12-month period.

**Number of Allowed Screenings for One Individual**

<table>
<thead>
<tr>
<th>Approximate weight of individual to be scanned</th>
<th>Effective dose per screening</th>
<th>Setting</th>
<th>Number of screenings per year not to exceed</th>
</tr>
</thead>
<tbody>
<tr>
<td>75-155 lbs.</td>
<td>0.25 micro Sievert</td>
<td>Mode 1</td>
<td>1000</td>
</tr>
<tr>
<td>155-220 lbs.</td>
<td>0.50 micro Sievert</td>
<td>Mode 2</td>
<td>500</td>
</tr>
<tr>
<td>220-660 lbs.</td>
<td>1.00 micro Sievert</td>
<td>Mode 3</td>
<td>333</td>
</tr>
</tbody>
</table>

**B. Safety for the Operator**

Within an unshielded perimeter of approximately 2m (6.6 feet) from the base of the scanner, the maximum dose rate of the scattered radiation does not exceed 10 micro Sieverts per hour.

**NOTE:** The operator station for the Scanner is located outside the exposure perimeter.

**C. Safety for Bystanders**

With the exception of the inmate being scanned, all other persons shall remain outside of the restricted area clearly outlined on the floor around the Scanner while a scan is in progress. For incidental or occasional bystanders, the level of exposure per day and year is negligibly low. During scanning, the radiation leak dose rate must not exceed 0.05 micro Sieverts/h outside the area outlined.

**D. Dose per Screening**

The effective dose per screening shall not be greater than 1.0 micro Sievert.

**XV. DAILY SYSTEM CHECK**

**A.** The assigned operator of the Scanner for each shift will complete an initial status equipment and safety check prior to operating the device.

**B.** Staff completing a status equipment and safety check will:

(a) Inspect the Scanner for obvious damage.

(b) Ensure all access panels are securely in place.

(c) Ensure all accessible (external) cable connections and power cords are secure.
(d) If the system is not already on, turn it on using the key switch (clockwise).

(e) Verify the “POWER ON” light is lit.

(f) Record the check via the Safety Check System.

C. If any damage or malfunction is found during a system check, staff will:

(a) Power the unit off.

(b) Notify the Operations Sergeant, who will notify the Watch Commander and the RSO.

D. The Watch Commander will ensure the Scanner 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 person in the immediate vicinity of the device, the emergency procedures outlined in Section XVII will be followed.

E. During breaks between scanning sessions, operators should perform general cleaning of the Scanner and general maintenance of the operator’s workstation personal computer.

XVI. POSTINGS AND NOTICES

A. A current copy of the 17 CCR, incorporated sections of 10 CFR 20, the license, and a copy of operating and emergency procedures shall be posted, or if the posting of these documents is not practicable, a notice which describes each document and states where it may be examined may be posted instead.

B. A current copy of the California Department of Public Health Form RH-2364 (Notice to Employees). The document shall be posted so that it allows individuals working in or frequenting any portion of a restricted area to observe a copy on the way to or from such area.

C. Any notice of violation involving radiological working conditions or any order issued pursuant to the Radiation Control Law (Health and Safety Code § 114960 et seq.) and any required response from the registrant.

D. Information is to be provided to screened individuals, informing the person being screened that the Scanner emits radiation and that more information is available. At a minimum, the following information shall be made available to screening subjects prior to scanning:

(a) The estimated effective dose from one screening (i.e., the reference effective dose).

(b) An example shall be provided to compare the dose to a commonly known source of radiation, for example: “The radiation dose from one screening is roughly equivalent to that received from natural sources during 12 minutes of flight on an aircraft at an altitude of 30,000 feet.”

(c) The screening complies with the ANSI/HPS consensus standard N417; if requested, information on how to acquire this standard shall be provided.

E. A sign shall be conspicuously posted bearing the radiation symbol and the words reading Caution! Radiation Area

F. The Scanner shall be marked with the following labels:
BODY SCANNER POLICY

G. A binder titled “Radiation Safety and Protection” containing all required documents shall be kept at the Scanner. The RSO shall be responsible to ensure that the binder and all postings are replaced if defaced, altered, or missing.

H. Do not enter or open areas marked with the above labels.

XVII. EMERGENCY PROCEDURES

A. If an emergency situation occurs, the Scanner shall be powered off and the appropriate personnel shall be notified in accordance with the safety check procedures (Section XV).

NOTE: If the control panel is not accessible or functioning, the unit should be unplugged immediately.

B. If a situation occurs in which staff suspect possible exposure to excessive or dangerous levels of radiation while operating the Scanner, the operator will immediately notify the Booking/Records Sergeant and seek medical attention. The Sergeant will assess the situation and immediately notify the Watch Commander and the RSO.

C. If it is suspected that there was a potential exposure to excessive or dangerous levels of radiation, the Watch Commander will ensure that the use of the Scanner is immediately discontinued. The RSO will:

(a) Schedule any needed service and a radiation survey on the Scanner.

(b) If it is deemed safe to do so, ensure that the Scanner is surveyed in the condition it was in when it became suspect.

(c) Only clear the Scanner to return to normal operations if it is determined to be safe to do so by a service engineer of the representative company and/or other qualified service contractor.

D. The RSO will ensure that a qualified service contractor will calculate the approximate exposure (radiation intensity) of the person(s) possibly exposed.

E. California Radiation Control Regulations require that an employee be given a written report if they receive an exposure greater than the limits set in the radiation safety standards.

XVIII. DISPOSAL OF EQUIPMENT

A. Disposal shall be performed in accordance with the disposal instructions provided by the manufacturer.

B. Final disposition of the Scanner shall be reported within thirty (30) days to the CDPH Radiologic Health Branch on the form (RH2261) with substantiating documentation attached.

NOTE: Continued registration is required for X-ray machines that are not used but are physically present in the facility or are in storage.

XIX. RECORDKEEPING
BODY SCANNER POLICY

A. The designated Radiation Safety Officer shall be responsible to maintain all records and documentation associated with the Radiation Protection Program.

(a) Maintenance Logs. Records of modifications, maintenance, and repair shall be maintained for the life of the system.

(b) Survey Records. Survey records shall include: system make, model, serial number, and location; surveyor; survey date; instrumentation make, model, serial number, and calibration dates; results of visual inspection of system safety features; background measurements; survey measurements; survey diagram; and system parameters at which measurements were made.

(c) Training Records. Records of training shall be maintained that contain the date of training, an outline of the training, and the names of those in attendance.

(d) Conpass Log Book. The paper log maintained at the operator’s station shall be scanned and maintained in the Sergeant drive on a monthly basis.

B. Physical copies of any records will be maintained in the Services Unit Office. Scanned and computerized documents will be maintained in the Sergeant Drive - Scanner and Logs.

C. The Scanner’s software will register and store the personal data of the persons scanned into the computer database, and will include the number of times and dates when each individual was screened, the reference effective dose per screening, as well as the cumulative reference effective dose for the number of screenings undergone by each individual over the past 12 months.

XX. INTERNAL AUDIT

A. The RSO shall be responsible to ensure that the Radiation Protection Program is audited on a monthly basis.

B. The audit shall include any maintenance, inspections and servicing that took place during the rating period, and include a description of any corrective actions taken if problems were noted. In addition, the RSO shall:

(a) Review and ensure that training is current for all operators. Determine refresher training needs for the upcoming year.

(b) Perform a random sampling review of each operator’s scans. Ensure that the concept of ALARA has been adhered to and the appropriate effective dose has been used.

(c) Determine the total number of scans for the month, the number that resulted in the detection of contraband, the type of contraband located, and the number of inmates not accepted in Booking due to the detection of contraband.

C. The findings shall be documented via the and submitted to Jail Command Staff.

XXI. INSPECTIONS

A. The Sheriff’s Office shall afford the CDPH-RHB the opportunity to inspect materials, machines, activities, facilities, premises, and records pursuant to Title 17 regulations.

B. Any employee who believes that a violation of the Radiation Control Law, Title 17, or license conditions exists or has occurred, may request an inspection by giving notice
of the alleged violation to the CDPH-RHB. Any such notice shall be in writing. Refer to Title 17, 30254(h) for requirements and instructions.
Reporting In-Custody Deaths

530.1 PURPOSE AND SCOPE
This policy provides direction on how in-custody deaths shall be reported.

530.1.1 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.

530.2 POLICY
It is the policy of this office to follow state and local guidelines for reporting in-custody deaths (15 CCR 1046).

530.3 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 Jail 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 inmate’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 Jail 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)).

530.4 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 Jail Commander, patrol supervisor, District Attorney’s Office and make any other notifications required by policy or direction. The Jail Commander shall observe all pertinent laws and allow appropriate investigating agencies full access to all facts surrounding the death.

The Office shall establish policies and procedures for the investigation of any in-custody death.
Reporting In-Custody Deaths

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.

530.4.1 REPORTING

Jail personnel shall maintain a log of all times and activities until the immediate investigation are turned over to the Enforcement Sergeant.

Secure the area in which the deceased person is located.

Allow no one into the area except: The Sheriff and/or designee, Facility Commander, Enforcement Sergeant, District Attorney's Investigators or Emergency Medical Personnel, if needed.

All inmates in or about the area of the deceased person will be locked down or controlled in a manner to control the scene. No inmate will be moved or relocated without the approval of the shift supervisor.

(a) The Enforcement Sergeant will serve as coroner for all in-custody deaths.

(b) The coroner assigned the investigation will be responsible for notification of next of kin and investigate the cause of death.

(c) The Coroner assigned the investigation will secure all inmate property.

The Facility Commander and/or their designee shall ensure that the following is completed and turned over to the assigned Enforcement Sergeant investigating the death: Any suicide note(s). Any medications or list of medications that the inmate was prescribed. Copies of all pertinent documents and reports.

The Facility Commander, or in his/her absence, the Administrative Sergeant, shall notify the California Attorney General’s office and submit a report within ten calendar days of the death.

It will be forwarded to: C/O Bureau of Criminal Statistics California State Attorney General Attention: Death in Custody Program P.O. Box 903427 Sacramento, CA 94203-4270 (916 227-3551, ATSS 497-3923

The Enforcement Sergeant shall make provisions to take charge of the deceased person. Prior to the termination of his/her shift, the deputy(s) who discover the deceased person shall write a RIMS incident report regarding the incident. Supplemental RIMS incident reports shall be initiated by other deputies, when applicable.
530.5 IN-CUSTODY DEATH REVIEW
The Sheriff 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) Sheriff and/or the Jail Commander
(b) County Counsel
(c) District Attorney
(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

532.1 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.

532.2 POLICY
The Jail 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.

532.3 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 or derogatory comments, including any based on race, sex, age, personal appearance or sexual identity, 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.

532.3.1 STAFF- INMATE FRATERNIZATION
Employees must not trade, lend, or otherwise engage in other personal transactions with any inmate. Employees will not, directly or indirectly, give to or receive from any inmate, or friend or member of the family of any inmate, anything in the nature of a tip, gift, or promise of a gift.
Employees are prohibited from developing relationships with inmates other than those necessary in the normal course of business. Employees shall not use their positions to become emotionally or romantically involved with inmates. Employees shall not arrange any social contact with inmates during the inmate's incarceration or after his/her release.

532.4 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.

Members shall not knowingly maintain a personal or unofficial business relationship with any persons described in this section unless written permission is received from the Jail Commander.

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.

532.4.1 EXCEPTIONS

The Jail Commander may grant a written exception to an otherwise prohibited relationship on a case-by-case basis based upon the totality of the circumstance. In determining whether to grant an exception, the Jail 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.
532.5 REPORTING
Members 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 Jail Commander or the authorized designee.

Members shall report all attempts by inmates to intimidate or instill feelings of fear to their supervisor.

Members shall promptly notify their immediate supervisor in writing if:

- 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

534.1 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.

534.2 POLICY
It is the policy of the Lake County Sheriff's Office to provide safe, secure and humane transportation for all inmates and other persons as required by law.

The Sheriff's Office will transfer all inmates from the jail 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.

534.3 PROCEDURES
Only staff members who have completed office-approved training on inmate transportation should be assigned inmate transportation duty. 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:

(a) Obtaining all necessary paperwork for the inmate being transported (e.g., medical/dental records, commitment documents).

(b) Submitting a completed transportation plan to the transportation supervisor. Items that should be addressed in the plan include:

1. Type of restraints to be used on the inmates being transported.
2. The routes, including alternate routes, to be taken during the transportation assignment. Routes should be selected with security for the community in mind.
3. Emergency response procedures in the event of a collision, breakdown of a transportation vehicle, or other unforeseen event.

(c) Ensuring that all inmates are thoroughly searched and appropriate restraints are properly applied.

1. Inmates who are known to be pregnant will not be handcuffed behind their backs or placed in leg restraints/irons or waist restraints/chains while being transported (see the Use of Restraints Policy).

(d) Ensuring that all vehicle security devices (e.g., window bars, inside cages, door locks) are in good repair and are operational.
Transportation of Inmates Outside the Secure Facility

(e) Thoroughly searching the transporting vehicle for contraband before any inmate is placed inside, and again after removing the inmate from the transporting vehicle.

534.3.1 TRANSPORTATION LOGS
Inmate transportation records shall be maintained by the Transportation Sergeant or the authorized designee and used to track inmate transportation. The records should include:

- Name and identification number of the inmate.
- Date of the transport.
- Location where the inmate was transported.
- Circumstances of any unusual events associated with the transportation.

The records shall be retained by the facility in accordance with established records retention schedules.

534.4 TRAINING
The Training Manager shall ensure that all employees charged with inmate transportation duties receive training appropriate for the assignment.

Documentation of all training presented shall be retained in the employee's training file in accordance with established records retention schedules.
Safety and Sobering Cells

536.1 PURPOSE AND SCOPE
This policy establishes the requirement for placing inmates into and the continued placement of inmates in safety cells or sobering cells.

536.1.1 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 inmates 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.

Sobering cell - A holding cell designed to minimize the risk of injury by falling or dangerous behavior. It is used as an initial sobering place for arrestees or inmates 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 inmates.

536.2 POLICY
This facility will employ the use of safety and sobering cells to protect inmates from injury or to prevent the destruction of property by an inmate in accordance with applicable law.

A sobering or safety cell shall not be used as punishment or as a substitute for treatment. The Jail Commander or the authorized designee shall review this policy annually with the responsible physician.

The sobering cells will be used for the holding of prisoners who are a threat to their personal safety, the safety of other inmates or facility personnel due to their level of intoxication. Prisoners may be removed from the sobering cell for the booking and housing process if they are cooperative and not a threat. If still under the influence after booking, housing, etc., they will be placed back in the sobering cell until properly cleared.

In no case will an inmate remain in the sobering cell for over six (6) hours without an evaluation by medical staff, or an evaluation by the custody staff at the direction of medical staff to determine whether the prisoner has any urgent medical problems.

Visual checks of the prisoners in the sobering cells will be done four (4) times per hour, no longer than twenty (20) minutes apart exceeding Title 15 standards of once every half hour. All checks will be documented on the logs outside the sobering cell. Upon completion of each log page, it will be given to the Shift Sergeant, who will review it for errors and/or omissions. Upon the sergeant’s approval, the log sheet will be placed in the prisoner/inmate’s booking file.

536.3 SAFETY CELL PROCEDURES
The following guidelines apply when placing any inmate in a safety cell:
(a) Placement of an inmate into a safety cell requires approval of the Shift Supervisor or the Responsible Physician (15 CCR 1055).

(b) A safety cell log shall be initiated every time an inmate is placed into the safety cell and should be maintained for the entire time the inmate 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 inmate’s well-being and behavior shall occur twice every 30 minutes (15 CCR 1055). Each safety check of the inmate shall be documented. Supervisors shall inspect the logs for completeness every two hours and document this action on the safety cell log.

(d) Inmates should be permitted to remain normally clothed or should be provided a safety suit, except in cases where the inmate has demonstrated that clothing articles may pose a risk to the inmate's safety or the facility. In these cases, the reasons for not providing clothing shall be documented on the safety cell log.

(e) Inmates 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 inmates shall be given sufficient time to drink the fluids prior to the cup being removed. Each time an inmate is provided the opportunity to drink fluids will be documented on the safety cell log.

(f) Inmates will be provided meals during each meal period. Meals will be served on paper plates or in other safe containers, and the inmates will be monitored while eating the meals. Inmates shall be given ample time to complete their meals prior to the plate or container being removed. All meals provided to inmates 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 (15 CCR 1055). 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 inmate in the safety cell shall occur within 12 hours of placement or at the next daily sick call, whichever is earliest. Continued assessment of the inmate in the safety cell shall be conducted by a qualified health care professional and shall occur at least every 24 hours thereafter. Medical assessments shall be documented.

(i) A mental health assessment shall be conducted within 12 hours of an inmate’s placement in the safety cell (15 CCR 1055). The mental health professional’s recommendations shall be documented.

(j) When an inmate is placed in a safety cell, an incident report will be written in the RiMS InCustody system, stating the reason and circumstances for such placement.

536.4 SOBERING CELL PROCEDURES
The following guidelines apply when placing any inmate in a sobering cell:

(a) A sobering cell log shall be initiated every time an inmate is placed into a sobering cell. The log shall be maintained for the entire time the inmate 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 inmate’s well-being and behavior shall occur at least once every 30 minutes on an irregular schedule. Each visual observation of the inmate by staff shall be documented. Supervisors shall check the logs for completeness every two hours and document this action on the sobering cell log.

(c) Qualified health care professionals shall assess the medical condition of the inmate in the sobering cell at least every six hours (15 CCR 1056). Only inmates who continue to need the protective housing of a sobering cell will continue to be detained in such housing.

(d) Inmates will be removed from the sobering 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) Females and males will be detained in separate sobering cells.
Biological Samples

538.1 PURPOSE AND SCOPE
This policy provides guidelines for the collection of biological samples from those inmates 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.

538.2 POLICY
The Lake 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.

538.3 PERSONS SUBJECT TO BIOLOGICAL SAMPLE COLLECTION
The following inmates must submit a biological sample (Penal Code § 296):

(a) A person, including a juvenile, upon conviction or other adjudication of any felony offense
(b) A person, including a juvenile, upon conviction or other adjudication of any offense if the person has a prior felony on record
(c) An adult arrested or charged with any felony

538.4 PROCEDURE
When an inmate is required to provide a biological sample, a trained employee shall attempt to obtain the sample in accordance with this policy.

538.4.1 COLLECTION
The following steps should be taken to collect a sample:

(a) Verify that the inmate 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, checking page two of the inmate screen in In Custody. 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.
(d) Once the sample has been collected the tab for DNA Collected on page two of In Custody will be selected.
(e) Once the sample has been collected seal the envelope and place in the outgoing US Mail.
538.5  CALCULATED USE OF FORCE TO OBTAIN SAMPLES
If an inmate 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 approval of legal counsel and only with the approval of the Shift Supervisor. Methods to consider when seeking voluntary compliance include contacting:

(a) The inmate’s parole or probation officer when applicable.
(b) The prosecuting attorney to seek additional charges against the inmate for failure to comply or to otherwise bring the refusal before a judge.
(c) The judge at the inmate’s next court appearance.
(d) The inmate’s attorney.
(e) A chaplain.
(f) A supervisor who may be able to authorize disciplinary actions to compel compliance, if any 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.

538.5.1  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 (15 CCR 1059).

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).

538.6  LEGAL MANDATES AND RELEVANT LAWS
California law provides for the following:

538.6.1  DOCUMENTATION RELATED TO FORCE
The Shift Supervisor 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.
538.6.2 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)).

538.6.3 LITIGATION
The Sheriff or the authorized designee should notify the California DOJ's DNA Legal Unit in the event this office is named in a lawsuit involving the DNA Data Bank.
End of Term Release

540.1 PURPOSE AND SCOPE
The purpose of this policy is to establish and maintain procedures governing the end of term release of inmates to ensure that inmates are not released in error.

540.2 POLICY
It will be the policy of the Lake County Sheriff's Office to provide for the timely, efficient, and legal release of inmates.

540.2.1 INMATE RELEASE
DEFINITIONS

Permanent Release - A permanent release occurs when all charges pending, in this or other jurisdictions, have been satisfied.

Temporary Release - A temporary release is for a limited time, which is specified by the Court of the Sheriff.

Rolled-up - An inmate gathering his or her personal effects and stripping the bed of sheets and blanket for release or reassignment.

PROCEDURES

(a) Procedure
1. Time Served - An inmate will be released after serving a specified number of days as ordered by the court system upon conviction.

2. Court Order - A court of competent jurisdiction may order the release from custody of either a sentenced or unsentenced inmate. The court issuing the order must have jurisdiction over the matter. The Sheriff is obliged to accept the order and make the release, if the order appears to be completed correctly. The court order must cover all holds, if applicable, before an inmate can be released.

3. Release to Another Agency - An inmate held on another agency's warrant, or en route bookings, with no local charges pending, may be released to that agency without other documents. 821/822 P.C. forms will be filled out and signed immediately upon receipt and completion of booking.

(a) To ensure consistency on all shifts, when computing the "Five (5) Day Rule" in compliance with 821/822 P.C. the following will be followed:

1. Once an inmate becomes "en route", i.e. no local charges, and falls within the guidelines of 821/822 P.C., the responsible agency will be notified immediately via teletype, "Ready for Pick Up".

2. The responsible agency will have the date and time of the last day for pick up listed on the teletype.
3. The date and time listed will be five (5) days from the date and time that the inmate became "en route"; or five (5) court days, if the law enforcement agency requesting the arrest is more than 400 miles from the county in which the defendant is held in custody.

(b) Any time an inmate is released due to the expiration of the pick up time, the person authorizing the release will ensure the responsible agency (s) is notified by teletype and a copy is filed in the booking file as a permanent record.

(c) Due to the Penal Code requirement of "immediate" notification, if only one agency is notified and fails to appear, the inmate must be released on all wants, even though the other agencies were NOT notified.

1. The following should be used as a guide:

(a) Consider the seriousness of the charge and distance to be traveled by the responsible agency.

(b) When any doubt exists, a teletype may be sent to all agencies or request a RSVP teletype from the agency notified.

(c) When an inmate requests to appear before a magistrate in compliance with 821 P.C. the five (5) days will start after the court appearance.

4. **Bail Bond** - a bond in the amount set by the court may be posted by a licensed bondsman or his authorized agency to affect the release of an inmate. The bond must be an authorized, unexpired bond of an amount equal to or exceeding the amount of bail. It must contain the court, charge amount of bail, appearance date, and either the docket number, case file number, or warrant number. The bond must be delivered to the facility by a licensed bondsman. The bondsman's license number must be printed at the top of the bond under the bail agency's name.

(b) **Cash Bail** - Anyone, including the inmate, may post cash in the amount of the set bail.

(c) **Cite Release** - The release of prisoners with misdemeanor charges, should be done in the field, by the arresting agency's deputy or officer. A person arrested on qualifying charges, in accordance with current cite release policy, i.e. infractions, misdemeanor on view, or warrants, should be released from custody on his or her signed promise to appear. The court of jurisdiction, appearance date and time will be indicated on the cite for release.

(a) **Exceptions:**

(a) The misdemeanor cited involves, in the opinion of the arresting agency, a violation of 243 (e)1 P.C. Domestic Violence.

(b) The person arrested is a danger to himself or herself, or others due to the state of intoxication, or influence of drugs or narcotics.

(c) The person arrested requires a medical examination or medical care, or is otherwise unable to care for his or her own safety.
End of Term Release

(d) The person arrested has other charges pending for which they are ineligible for cite release.

(e) There is a reasonable likelihood that the offense or offenses would continue or resume, or that the safety of persons or property would be immediately endangered by the release of the person.

(f) The person arrested refuses to sign the cite.

(g) The person arrested cannot give satisfactory identification.

(h) Failure to appear on a warrant.

(i) The misdemeanor involves a firearm.

(j) The misdemeanor involves giving false information to a peace officer.

(k) The person arrested has been booked for 23152 (a) or (b) CVC and has been convicted of two (2) prior 23152 (a) or (b) CVC violations within the past five (5) years.

(d) Fine Paid - Fines may be paid either with cash or certified checks directly to the court. The Sheriff's Office does NOT accept the payment of fines.

(e) 825 P.C. Complaint Filed (No Complaint Filed) - Notification will be made to the arresting agency on all felony inmates being held under the 48-hour arraignment requirement prior to release under the provisions of 825 P.C.

1. All misdemeanors will be released without notification to the arresting agency.

2. Re-Arrest After Release Under 825 P.C.

   (a) All inmate files pertaining to this arrest will be closed.

   (b) If the arresting agency wishes to re-arrest on the same charges, they may do so without the defendant being released outside the secured area of the custodial facility.

   (c) A new booking will be completed and new fingerprints and processing will be completed on the new arrest.

PERMANENT INMATE RELEASE

(a) The Booking Officer will confirm the release date, validity of release date and validity of the release of the releasing authority. All releases must be pre-approved by the Shift Sergeant, NO EXCEPTIONS.

(b) The Booking Officer will have a warrant check run to verify that there are no new warrants.

(c) After confirming that the inmate is eligible for release, the Booking Officer will clear the inmate's finance account by writing a check made out to the inmate.
(d) The Facility Staff will collect all facility property assigned to the inmate or in the inmate's possession. This includes, but may not be limited to:

1. All facility clothing, linens, and towels
2. Inmate's drinking cup
3. Inmates orientation pamphlet (rule book)
4. Lock to personal locker, if applicable
5. Inmate's identity wristband or name tag

(e) The inmate will be sent from his or her assigned housing unit to an assigned holding cell in the booking area.

(f) A deputy will use the inmate's booking photo to verify the identity of the inmate being released.

(g) After verification of the inmate's identity has been made, the personal clothing and property of the inmate will be returned. This return of clothing will be recorded in the RIMS System.

(h) Inmates who have no clothing available at the time of their release due to clothing loss, the taking of clothing as evidence, etc., will be given clothing purchased by the Inmate Welfare Fund.

(i) Upon completion of the exchange of clothing and when the inmate is dressed in civilian clothes, the inmate will be escorted to the booking counter to be released.

(j) The Booking Officer or his or her designee will return the inmate's money and personal property and obtain the inmate's signature to verify that these items were returned to him or her. A copy of the receipt for the property will remain in the permanent booking file.

1. If, at release, or any other time, it is discovered that an inmate's property is missing, the following will occur:

   (a) The releasing/discovering deputy will prepare an incident report. The report will contain a complete description of each item that the inmate claims is missing. The incident report will also describe all efforts made to locate the missing property.

   (b) The deputy will attach a copy of the inmate's intake form and property sheet. Each missing item will be highlighted on the booking property sheet.

   (c) A sergeant will review the incident report and ensure that an effort had been made to locate the property and that the description of the missing property is complete. The sergeant will also be responsible for identifying any deputy who did not sign the intake form or who has an illegible signature.

   (d) The sergeant will require the deputy(s) who actually booked the inmate to prepare a supplemental report describing his, her or their handling of the missing property. If the deputy(s) work different shifts, the request will be forwarded to his, her or their current supervisor.
(e) The completed incident report will be forwarded to the Administrative Sergeant.

(f) Following review by the Jail Commander, a complete copy of the report will be sent to Lake County Risk Management. The original will be retained in the inmate's booking file.

(g) Should the staff be unable to locate the inmate's personal clothing or property, the deputy will ensure that the lost or missing property claims procedure is explained to the inmate. He or she can file a claim directly through the Lake County Risk Management.

(k) The Booking Officer will conduct a final review of the booking to ensure the following:

(a) Inmate's identity is confirmed as the person actually authorized to be released.

(b) Verification of release documents, including date and time of release.

(c) Completion of release arrangements, including the person to whom or agency to which the inmate is to be released, when applicable.

(d) All personal effects, including money, have been returned to the inmate.

(e) No facility property is leaving with the inmate.

(f) All pending action, such as grievances of claims for damaged or lost property, is completed.

(g) Property receipt and inmate release forms are signed.

(h) The inmate is aware of his or her next court date, if applicable.

(i) The inmate has no holds or wants outstanding.

(j) The booking check of list is completed.

(k) **IMPORTANT: THE BOOKING FILE WILL BE THOROUGHLY REVIEWED BY A SERGEANT AND THE RELEASE APPROVED.**

(l) Upon completion of the final review, the Booking Officer will have the inmate escorted to the release exit. Once the area is secure, the subject can be released.

(m) The release file will be placed in the "Release" file cabinet.

**TEMPORARY RELEASE**

**Court Order** - Courts of competent jurisdiction may order the temporary release of an inmate for, but not limited to, a temporary pass, pre-sentence evaluation, hospitalization, or temporary commitment.

**Removal Order** - An inmate may be removed from the Lake County Hill Road Correctional Facility on a removal order by another county. For the removal order to be valid, it must contain the inmate's name, date, and time the person is due in court, and the reason. It must also contain the
End of Term Release

name of the agency requesting the removal, the agency where the inmate is to be removed from, and the ensuring Judge's signature. It must be stamped and filed with the County Clerk's Office of the county requesting the removal. The removal order will be retained in the inmate's booking file.

Sheriff's Pass - The Sheriff or his or her designee may, under certain circumstances, such as a family emergency or as preparation for return to the community, allow an inmate to be released from custody for a temporary period.

(a) A Shift Sergeant will review requests Sheriff's Passes and make recommendations for approval or denial and will advise the Jail Commander. Only the Jail Commander, or in his absence a Corrections Sergeant, may approve a Sheriff's Pass.

Out of County Housing - An inmate may be temporarily housed under contractual arrangements and/or court order in another jurisdiction if circumstances dictate, i.e. special housing, overcrowding, etc..

Medical Treatment - An inmate without a court order may be taken to a medical facility within the county for special medical treatment, tests, etc.. Appropriate security based on the inmate's classification will be provided.

Transport or Release to Another Jurisdiction - Medical staff must be notified when an inmate is being transported to or released to another jurisdiction in order that medical charts and medication can accompany the inmate. Medical staff must complete an 'Inter-Facility Transfer of Medical Information Form'.

TEMPORARY INMATE RELEASE PROCEDURE

NOTE: When an inmate is released from the custody of the Lake County Sheriff's Office, and his file is NOT closed, the releasing deputy will complete a 'Temporary Release from Custody Form'.

(a) In the event that an inmate is scheduled for a temporary release, the Shift Sergeant will be notified, and confirmation of the release date and the release authority will be made.

(b) After confirming that the inmate is eligible for the temporary release, the deputy will complete the withdrawal of funds in the In-Custody system.

(c) The deputy will notify the housing unit that the inmate is to be sent to booking for release on a temporary pass.

(d) The Housing deputy will advise the inmate of the temporary release, and the inmate's cell or area will be secured until the inmate returns from the release. In the event that the inmate is to be gone longer than 48 hours, the inmate will be "rolled-up".

(e) The deputy will request that the inmate be sent from the housing unit to the booking area.
End of Term Release

(f) In the event that the inmate is being temporarily released and has an official escort, i.e. investigator, parole/probation officer, etc., the inmate will not be dressed out in civilian clothing, nor will any of the inmate's money or personal property be returned. The Shift Sergeant will have the official escort sign for the inmate, and the official escorting deputy will exit the facility with the inmate.

(g) If applicable, all money and property will be returned, and the inmate's signature will be obtained on the property receipt, to verify that all property has been returned and the return of property will be recorded in the RIMS system.

(h) In the event that the inmate is being temporarily released on a court order, removal order, or out of county housing, the inmate's property will be given to the agency doing the transport. Upon return to the facility, a new bag will be issued and a new property receipt and screen in RIMS will be filled out.

(i) In the event that the inmate is being temporarily released and no official escort will be with the inmate, the Shift Sergeant, or his or her designee, will read the conditions of the temporary release, including the date, time and place of return, to the inmate.

(j) Upon completion of reading the conditions of the temporary release to the inmate, the Shift Sergeant or his or her designee will have the inmate sign the original document authorizing the temporary release. After the inmate has signed the document, the Shift Sergeant will give a copy of the document to the inmate.

(k) The deputy or his or her designee will make a final review of the booking to ensure the following:
   1. Inmate’s identity
   2. Verification of temporary release authority
   3. All personal effects, including money, have been returned, when applicable

(l) All inmates who return from a temporary release will be given a urine test.

RELEASE OF INTOXICATED OFFENDERS

(a) Persons arrested for driving under the influence who choose to take a urine, blood test, or no test at all, will be held until the Booking Officer has determined that the arrestee has detoxified to the point of being legally sober. At least three standard Field Sobriety Tests will be conducted on the intoxicated arrestee prior to release: Horizontal Nystagmus, Walk and Turn, One Leg Stand, Standing Balance, Finger to Nose, Finger Count, Romberg, Pulse, Pupil.

COMPUTATION OF RELEASE DATES

(a) 1. Commitment papers received from the courts located in Lake County are maintained in the booking pouches and must contain the following information:
End of Term Release

(a) Inmate's name
(b) Docket number
(c) Charges
(d) Length of sentence
(e) Credit for time served, if any
(f) Date sentence starts
(g) Concurrent or consecutive time
(h) Signature of court authority

GOOD TIME/WORK TIME

(a) All sentenced inmates will automatically be credited with good time, per section 4019 P.C., unless forfeited through a disciplinary action.

(b) The exceptions to this rule are for court ordered fines converted to in-custody time and sentences on juvenile cases. No good time or work time is given in these instances.

540.3 RELEASE PROCEDURE

Inmates who have reached the end of their sentenced term or who are ordered released by the court will be scheduled for release at 0900 Hours on their release date. Inmates scheduled for release shall be escorted by the staff to the booking area to begin the release procedure 30 minutes prior to their scheduled release time.

The Sheriff's Office to the extent reasonably practicable, will not release an inmate in severe weather in such a manner as to endanger the inmate's health, safety or well-being, unless otherwise required by law. The inmate may, when practicable, be offered a safe mode of transportation to the closest place of safety or the opportunity to remain in a public area of the facility until the inclement weather passes.

The Shift Supervisor or releasing deputy shall sign and date the release paperwork on the same day the inmate is to be released.

Inmates shall not be released or moved during inmate count, change of shift or at any time that would pose a potential safety threat or disrupt the orderly operation of the facility.

All inmates must be positively identified by the staff prior to being released from the facility. Inmate identities should be verified using intake records bearing the inmate's name, photograph and facility identification number.

The inmate should be permitted to make arrangements for transportation prior to release.

Before any inmate may be released, the following conditions must be met:
(a) The identity of the inmate has been verified.

(b) All required paperwork for release is present. The staff shall review the active inmate 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.

(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. If any agency has outstanding charges against the inmate, the staff shall notify the agency that the inmate is available for release.

(d) If an inmate has known mental health concerns, the inmate shall be evaluated by an certified 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 inmate during the release process. The inmate must acknowledge receiving his/her property by signed receipt. Any discrepancies shall be promptly reported to the Shift Supervisor.

(f) All facility property must be returned by the inmate. Any missing or damaged facility property should be documented and promptly reported to the Shift Supervisor. The inmate shall remain in custody until the Shift Supervisor reviews the damage and authorizes the release.

(g) A forwarding address for the inmate should be on file and verified with the inmate.

(h) Inmates 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 inmate's release, if required.

(i) Arrangements shall be made for completion of any pending action, such as grievances, or claims of damaged or lost possessions.

(j) The housing sheet and release log shall be updated accordingly after the inmate's release. The Shift Supervisor shall ensure all release documents are complete and properly signed by the inmate and the staff where required.

(k) If needed, inmates may be allowed to make a reasonable number of telephone calls in their housing unit to arrange for transportation.

(l) If the inmate has been in custody for longer than two (2) months or has changed their appearance a new photo will be taken and entered into the mugshot portion of In Custody.

(m) It is NOT Hill Road Correctional Facility Policy to provide inmates with transportation after release. There is a pay telephone in the Lobby outside of booking.
End of Term Release

1. Upon release from the Facility, inmates will be advised: DO NOT walk to Sutter Lakeside Hospital, unless you have a legitimate medical need. DO NOT walk along the Highway. DO NOT loiter on the Hill Road Correctional Facility property. The lobby outside Booking is open 24 hours a day. DO wait in the lobby for a ride.

540.3.1 DISCHARGE OF INMATES WITH MENTAL ILLNESS OR SUBSTANCE ADDICTION
Inmates 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 inmate to be discharged to a treatment center or be discharged during daylight hours. The inmate may revoke his/her consent and be released as soon as possible and practicable (Penal Code § 4024).

540.3.2 DISCHARGE OF INMATES CONVICTED OF FELONIES
Inmates 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 Bureau shall inform the inmate in writing of the inmate’s right to petition, and of the procedures for filing a petition and obtaining the certificate (Penal Code § 4852.21).

540.3.3 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.

540.3.4 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 jail shall display the required signage that complies with Penal Code § 851.91 advising an arrestee of the right to obtain the Judicial Council forms.

540.3.5 DISCHARGE OF SEX OFFENDER REGISTRANTS
The Records Bureau shall inform the California Department of Justice when inmates required to register address changes under Penal Code § 290.013 have been released from the jail within 15 days of release (Penal Code § 290.013).
Chapter 6 - Inmate Due Process
Inmate Discipline

600.1 PURPOSE AND SCOPE
This policy addresses the fair and equitable application of inmate rules and disciplinary sanctions for those who fail to comply (15 CCR 1081).

600.2 POLICY
It is the policy of the Sheriff's office to maintain written general categories of prohibited inmate behavior that are clear, consistent, and uniformly applied. Written rules and guidelines will be made available to all inmates. They will include a process for resolving minor infractions and a hearing process for a more serious breach of inmate rules. Criminal acts may be referred to the appropriate criminal agency.

600.3 DUE PROCESS
Inmates 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 inmate discipline. All inmates 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 inmates. All disciplinary actions will follow clearly established procedures. All disciplinary sanctions will be fairly and consistently applied (15 CCR 1081 et seq.).

The process for an inmate accused of a major rule violation includes:

(a) A fair hearing in which the Jail Commander or the authorized designee presents factual evidence supporting the rule violation and the disciplinary action.
(b) Advance notice to the inmate of the disciplinary hearing, to allow the inmate time to prepare a defense.
(c) An impartial hearing officer.
(d) The limited right to call witnesses and/or present evidence on his/her behalf.
(e) The appointment of an assistant or representative in cases where the inmate may be incapable of self-representation.
(f) A formal written decision that shows the evidence used by the hearing officer, the reasons for any sanctions and an explanation of the appeal process.
(g) Reasonable sanctions for violating rules that relate to the severity of the violation.
(h) The opportunity to appeal the finding.

600.3.1 INMATE RULES AND SANCTIONS
The Jail Commander is responsible for ensuring that inmate rules and sanctions are developed, distributed, reviewed annually, and revised as needed.
Inmate Discipline

Inmates 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 a detention facility. Therefore, a current list of recognized infractions that are generally prohibited should be available in each housing unit. All inmates, regardless of their housing unit, shall have access to these rules. Inmate rules shall be translated into the languages that are understood by the inmates (see the Inmate Handbook and Orientation Policy).

Disciplinary procedures governing inmate rule violations should address rules, minor, and major violations, criminal offenses, disciplinary reports, pre-hearing detention, and pre-hearing actions or investigations.

600.3.2 RULE VIOLATION REPORTS

California Penal Code § 4019.5 requires that all disciplinary infractions and punishment 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 inmate.
- The inmate’s response to the charges.
- Reasons for any sanctions.
- The identity of any staff or witnesses involved, as revealed by the inmate.
- The findings of the hearing officer.
- The inmate’s appeal, if any.
Inmate Discipline

- The appeal findings, if applicable.

600.3.3 POSTING
The Jail Commander or the authorized designee is responsible for conspicuously posting notices about rules, disciplinary procedures, and penalties in a conspicuous location, as set forth in 15 CCR 1080, and establishing procedures for communicating the rules effectively to inmates with disabilities and those who cannot read English sufficiently.

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 sanctions 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 sanction.

Disciplinary sanctions that may be imposed for minor rule violations include (15 CCR 1081):

- Counseling the inmate 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 inmate’s assigned cell or confinement in the inmate’s bunk area for a period not to exceed 24 hours.

An inmate may request that a supervisor review the imposed sanction. However, this request must be made within one hour of receiving notice of the sanction. 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 inmate 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, inmates, or visitors. Staff members witnessing or becoming aware of a major rule violation shall take immediate steps to stabilize and manage the situation, including immediate
Inmate Discipline

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 ADMINISTRATIVE SEGREGATION HOUSING
Inmates who are accused of a major rule violation may be moved to administrative segregation housing for pre-hearing detention, with the Shift Supervisor’s approval, if there is a threat to safety or security (15 CCR 1081). Inmates placed in pre-hearing detention are subject to the property and privilege restrictions commensurate with segregated confinement (15 CCR 1081).

The Jail Commander or the authorized designee shall, within 72 hours including weekends and holidays, review the status of any inmate in pre-hearing detention to determine whether continued pre-hearing segregation 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 inmate to have a disciplinary hearing, which is required within 72 hours of the time the inmate 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 inmate 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, he/she may discuss alternative sanctions 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 inmate’s file.

If the investigating supervisor determines that sufficient evidence exists to support a major rule violation, he/she 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 inmate.
- Identifying any witnesses that may be called to the hearing.

600.6 NOTIFICATIONS
An inmate 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 inmate, hearings may not be held in less than 24 hours from the time of notification (15 CCR 1081).

**600.7 HEARING OFFICER**
The Jail 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 inmate rule violations. The hearing officer shall also have the power to impose sanctions. The hearing officer shall not investigate nor preside over any inmate disciplinary hearing on cases where he/she was a witness or was directly involved in the incident that generated the complaint (15 CCR 1081).

**600.8 HEARING PROCEDURE**
Inmates 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 inmate 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 Jail 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 Jail Commander (15 CCR 1081).

The hearing officer shall disclose to the accused inmate all witnesses who will be participating in the hearing. Inmates have no right to cross-examine witnesses. However, the accused inmate may be permitted to suggest questions that the hearing officer, in his/her discretion, may ask.

**600.8.1 EVIDENCE**
Accused inmates 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 inmate 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 inmate shall also be documented in the hearing record.

A witness’s signed written statement may be submitted by the inmate 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.
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 inmate prior to the hearing.

600.8.2 CONFIDENTIAL INFORMANTS
If information from any confidential informant is to be presented at the hearing, information establishing the reliability and credibility of the informant shall be provided to the hearing officer prior to the hearing. The hearing officer shall review such information to determine whether the informant is reliable and credible.

600.8.3 STAFF ASSISTANCE
A staff member shall be assigned to assist an inmate who is incapable of representing him/herself at a disciplinary hearing due to 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 inmate to fulfill his/her obligations. In these cases, the inmate does not have a right to appoint a person to assist in his/her disciplinary hearing. The final decision regarding the appointment rests with the hearing officer.

Inmate discipline is an administrative and not a judicial process. Inmates 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.

600.8.4 DISCIPLINARY DECISIONS
Disciplinary decisions shall be based on the preponderance of evidence presented during the disciplinary hearing.

The disciplinary process shall consider whether an inmate’s mental disabilities or mental illness contributed to the inmate’s behavior when determining what type of discipline, if any, should be imposed (28 CFR 115.78(c)).

600.8.5 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 inmate. 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 inmate’s file (15 CCR 1081).

If it is determined that the inmate’s charge is not sustained at the end of the disciplinary hearing, the documentation shall be removed from the inmate’s file but otherwise maintained in accordance with records retention requirements.

All disciplinary hearing reports and dispositions shall be reviewed by the Jail Commander or the authorized designee soon after the final disposition. Inmates in disciplinary segregation shall
Inmate Discipline

receive visits from the Jail Commander or the authorized designee at least once every seven days as part of the disciplinary review process (15 CCR 1081).

600.8.6 TIME OF HEARING
Unless declined by the inmate, a hearing shall be provided no sooner than 24 hours and no later than 72 hours after the report has been submitted to the hearing officer and the inmate has been informed of the charges in writing (15 CCR 1081).

600.9 DISCIPLINARY APPEALS
Inmates 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 Jail Commander or the authorized designee for review (15 CCR 1081).

Only appeals based on the following will be considered:

(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 inmate’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 inmate in writing.

600.10 LIMITATIONS ON DISCIPLINARY ACTIONS
The U.S. and state constitutions expressly prohibit all cruel or unusual punishment. Additionally, there shall be the following limitations (15 CCR 1083(a) through (i)):

• In no case shall any inmate or group of inmates be delegated the authority to punish any other inmate or group of inmates (Penal Code § 4019.5; 15 CCR 1083).
• In no case shall a safety cell, as specified in the Juvenile Housing Policy and 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.
• Food shall not be withheld as a disciplinary measure (15 CCR 1083).
• Correspondence privileges shall not be withheld except in cases where the inmate 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 Jail 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 inmate may be deprived of the implements necessary to maintain an acceptable level of personal hygiene (15 CCR 1083; 15 CCR 1265).
Disciplinary segregation in excess of 30 days without review by the Jail Commander is prohibited. 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.

Discipline may be imposed for sexual activity between inmates. 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 inmate 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)).

Disciplinary separation diets may only be applied to major rule violations (15 CCR 1083).

600.11 GUIDELINES FOR DISCIPLINARY SANCTIONS
The sanctions imposed for rule violations can range from counseling, loss of privileges, extra work, loss of good and/or work time, and segregation and a disciplinary separation diet as provided in the Disciplinary Separation Policy (15 CCR 1081). 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 inmate 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)).

Discipline shall be commensurate with the nature and circumstances of the offense committed, the inmate’s disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories (28 CFR 115.78(b); 15 CCR 1082).

Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse (28 CFR 115.78(a)).

In all cases, sanctions should be imposed for the purpose of controlling or changing an inmate’s behavior 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
**Inmate Discipline**

- Disciplinary detention
- Disciplinary separation diet

The Sheriff or the Jail Commander shall be responsible for developing and implementing a range of disciplinary sanctions for violations.

**600.12 TRAINING**

The Jail 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 Manager 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.

**600.13 INMATE DISCIPLINARY RULES OF CONDUCT**

The Sheriff’s Office Hill Road Correctional Facility cannot operate safely or effectively unless the behavior of the inmates conforms to the minimum standards set forth by the "Uniform Rules of Prisoners’ Conduct". Corrections Facility personnel will hold inmates accountable for conduct that violates the Uniform Rules of Prisoners’ Conduct, by implementing disciplinary procedures in order to:

(a) Maintain security, control and safety.
(b) Ensure the inmates’ due process rights.
(c) Ensure fair and consistent disciplinary practices.

Attempting to commit any of the listed offenses, aiding another person to commit any of the listed offenses and/or making plans to commit any of the listed offenses shall be considered the same as a commission of the offense itself.

**UNIFORM RULES OF PRISONER CONDUCT**

(a) The Uniform Rules of Prisoner Conduct shall apply to all inmates at the Lake County Hill Road Correctional Facility.
(b) Inmates will obey all laws of the United States, State of California, County of Lake and the Uniform Rules of Prisoner Conduct.
(c) Certain violations of the Uniform Rules of Prisoner Conduct may result in exclusion or termination from certain programs.

**CRIMINAL RULE VIOLATIONS**

(a) Inmates who commit criminal (Penal Code) violations while incarcerated can be prosecuted criminally within the guidelines of due process.

**MINOR RULE VIOLATION PROCEDURES**
Inmate Discipline

(a) The inmate will be allowed to meet with the disciplinary officer to explain his/her version of the incident. The disciplinary officer will determine if the inmate is guilty or not guilty.

1. **Appeal Procedure** - If a prisoner disagrees with the findings, he or she may file an appeal with a facility Lieutenant designated to answer appeals.
   
   (a) The prisoner has five (5) calendar days to submit a written appeal. It must be submitted on the proper form which can be obtained from any deputy. The prisoner will receive a written reply within a reasonable amount of time, normally ten (10) judicial days.

(b) **Disciplinary actions for minor rule violations**:
   
   (a) Inmates violating this type of rule may be charged with a minor rule violation. Two (2) or more minor rule violations may be treated as a major rule violation. Inmates found guilty of minor rule violations(s) are subject to the following disciplinary action(s) unless deemed to be a major rule violation.
      
      (a) Removal from work program.
      
      (b) Restriction of visiting privileges not to exceed three (3) days per violation.
      
      (c) Loss of exercise yard, not to exceed three (3) days per violation.
      
      (d) Loss of commissary privileges, not to exceed three (3) days per violation.
      
      (e) Reclassification and/or re-housing.

**MAJOR RULE VIOLATIONS**

(a) Prisoners violating a major rule may be charged with a Major Rule Violation and face a hearing to determine if they are guilty or not guilty.

(b) Two or more Minor Rule Violations may be treated as a Major Rule Violation with appropriate and applicable penalties.

(c) Prisoners found guilty of one or more Major Rule Violations are subject to the following disciplinary actions:
   
   (a) Loss of good time.
   
   (b) Loss of work time.
   
   (c) Removal from work program.
   
   (d) Restriction of visiting privileges, not to exceed ten (10) visiting days per violation.
   
   (e) Loss of use of exercise yard, not to exceed ten (10) days.
   
   (f) Loss of commissary privileges, not to exceed ten (10) days per violation.
   
   (g) Reclassification and/or re-housing
   
   (h) Imposition of a disciplinary separation diet, per Title 15, for up to three (3) days total, for those inmates housed in disciplinary isolation.

**MAJOR RULE VIOLATION PROCEDURE**

(a) When charged with a major rule violation, you have the following procedural rights:
Inmate Discipline

1. A written copy of the charges against you at least twenty-four (24) hours prior to appearing before a hearing board. You must consent, in writing, to a waiver of the twenty-four (24) hour preparation time.

2. A fair and impartial hearing within seventy-two (72) hours of written notice, including weekends and legal holidays.

3. You may be represented by a fellow inmate, or staff member. (This only applies if you are illiterate or if there is a complexity of issues.

4. You may call witnesses (with some exceptions), and present documentary evidence on your behalf. Witnesses may choose not to give testimony.

5. You may remain silent, however, your silence may be used to draw an adverse inference against you. It alone cannot be used to support a finding that you committed a prohibited act.

6. You may be present throughout the hearing, except during committee deliberations or where facility safety or security would be jeopardized. You will lose your right to be present if you are disruptive during the proceedings.

7. You will be advised in writing of the committee's decision and the facts supporting it, except where facility safety or security would be jeopardized.

8. You have the right to appeal, in writing the disciplinary committee's decision within five (5) calendar days of the hearing.

9. If an inmate disrupts a disciplinary hearing, the inmate will be ejected from the hearing and the hearing will be completed without the inmate's presence.

10. Confidential informants will be interviewed by the disciplinary officer(s) in private, prior to the hearing.

(b) Inmates will be allowed to use pleading paper as additional pages when writing grievances and/or appeals.

INMATE RULES -

• MAJOR RULES
  • 101 Inmates will obey all lawful orders from jail staff.
  • 102 Inmates will show respect to jail staff at all times.
  • 103 Inmates will not furnish false information or falsely identify themselves to jail staff.
  • 104 Inmates ordered to lock down or directed from one area to another will proceed in an orderly and quiet manner without delay.
  • 105 Inmates will not engage in conduct which interferes with or disrupts the security of the jail.
  • 106 Inmates will not communicate with anyone other than jail staff or a work site supervisor unless specifically authorized to do so. This includes the courtroom, segregation cells or in another security status.
Inmate Discipline

- 107 Inmates will not bring any unauthorized items into the jail from outside.
- 108 Inmates will not expose themselves, engage in sexual acts or make sexual threats toward other inmates, civilians or jail staff.
- 109 Inmates will not make unnecessary noise or leave their assigned bed after lights out, except to use the bathroom.
- 110 Inmates will not remove, take, alter, tamper with, destroy or lose any facility property. (4600 P.C.)
- 111 Inmates will not be in possession of any contraband. (Contraband is any item not issued or approved by jail staff, any item not used for its intended purpose and any item that has been damaged, altered, tampered with or destroyed.)
- 112 Inmates will submit to urinalysis and/or breathalyzer tests when directed by a deputy.
- 113 Inmates will not pound on doors or windows or summon a deputy under the pretext of an emergency.
- 114 Inmates will wear their I.D. badges/wristbands at all times.
- 115 Inmates will not use the intercom system for non-emergency purposes.
- 116 Inmates will not write, possess or display any gang symbols, slogans, numbers, signs or figures.
- 117 Inmates will work as instructed.
- 118 Inmates will not threaten or imply a threat toward jail staff, the public or other inmates. (422, 69 P.C.)
- 119 Fighting is prohibited. (242 P.C.)
- 120 Inmates will not be loud, boisterous or offensive or engage in any horseplay.
- 121 Stockpiling, giving away, selling or possessing unauthorized medication is prohibited.
- 122 Inmates will stand for formal counts at 0600 and 1800.
- 123 Inmates will not pass notes or make other exchanges with inmates in another security status.
- 124 Inmates will not incite or take part in a disturbance or riot. (415.1 P.C.)
- 125 Inmates will not possess, consume or be under the influence of any unauthorized drug or alcoholic beverage. (4573.6 P.C.)
- 126 Inmates will not deliberately cause a fire or flood. (452 P.C.)
- 127 Inmates will not steal jail or other inmate's property. (484 P.C.)
- 128 Inmates will not be absent from any housing unit or job assignment without prior authorization will be considered escapees. (4532 P.C.)
Inmate Discipline

- 129 Inmates will not possess or use any form of tobacco or tobacco products. (Only inmates assigned to the worker dormitories are permitted to possess and use tobacco products.)
- 130 Inmates will not possess any sharpened or pointed objects, excluding authorized pencils or razors, except with the express permission of a deputy. Fashioning or possessing weapons of any kind is prohibited. (4502 P.C.)
- 131 Inmates will not give or offer to give any staff member a bribe or anything of value nor will inmates extort, blackmail, demand or receive money or anything of value in return for protection against others. (519 P.C)
- 132 No inmate shall perform tattooing on themselves or other inmates or allow themselves to be tattooed.
- 133 Unauthorized communication with members of the public (4570 PC).
- 134 Inmates will not make requests or interrupt deputies during formal counts.
- 135 Inmates will not attempt to manipulate housing.

- **MINOR RULES**
  - 201 Inmates will not affix anything to their lockers, bunks, walls or windows.
  - 230 Inmates will not exercise in groups greater than two inmates.
  - 229 Inmates may not possess handballs in the inmate worker dorms.
  - 228 Inmates will not be in the exercise yard after it is closed, except in the event of a fire alarm of other emergency. Exercise yards are open at Facility Staff's discretion.
  - 227 Inmates may not wear jackets in the day room.
  - 226 Inmates too sick to work will stay in their assigned dorm until cleared by medical staff.
  - 225 Inmate workers will not possess more than one extra set of clothing at a time.
  - 224 Inmates will not enter any dorm other than their assigned dorm (this includes standing in the doorway).
  - 223 To prevent the spread of disease and vermin, inmates will not share clothing, linen, hair brushes, etc.
  - 222 Inmates will wear shoes at all times, shower shoes in the shower.
  - 221 Inmates will not place anything into the toilets other than liquids, toilet paper and feces, and only liquids are allowed in the sinks.
  - 220 Inmates will wear work boots only while working.
  - 219 Inmates will wear a complete set of assigned clothing in the day room at all times, including while going to and from the restroom area, during waking hours. Work clothing shall only be worn to work. After work inmates will immediately change into their assigned clothing.
Inmate Discipline

- 218 Inmates may remove their outer shirts in the exercise yards. A Tee-shirt must be worn at all times. Female inmates must wear a bra and t shirt at all times. (Pods A thru G only)

- 217 Inmates will be responsible for returning their tray.

- 216 Inmates shall not be in the exercise yard after it is closed.

- 215 Inmates will not tamper with food.

- 214 Pro-per inmates shall not make demands of custody staff. (Custody staff will issue items to pro-per inmates at their earliest convenience.)

- 213 All inmates will be fully and appropriately clothed as instructed by jail staff.

- 212 Inmates will not prop open any door.

- 211 Inmates will not conceal full or partial view of their cell or sleeping area.

- 210 Inmates will not touch property belonging to another inmate without permission.

- 209 Inmates will not use stairs, tables, bunks or any other furnishings for the purpose of working out/exercise.

- 208 Inmates will keep their cells neat and clean their bunks made when not in use.

- 207 Inmates will not lay or sit on another inmate's bunk or enter the assigned living area of another inmate.

- 206 Inmates will not move or change bed assignments without prior authorization from jail staff.

- 205 Inmates will be responsible for all clothing and bedding items issued to them. Excess items will not be allowed.

- 204 Inmates will not misuse the telephone or mail system.

- 203 Inmates will not possess nor save any food or drink items except those sold through commissary.

- 202 Inmates will not engage in conduct that interferes with or disrupt the orderly running of the jail.

GRIEVANCE PROCEDURE

(a) A grievance is an act and/or policy, written or unwritten, in which an inmate feels that his/her personal and/or human and/or constitutional rights have been violated. Any inmate of the Lake County Jail may grieve any condition of confinement over which the Lake County Sheriff's Office has control.

(b) A grievance involving disciplinary action will be refused, as there is an appeals procedure designed specifically for that purpose. The grievance procedure will not be allowed to be confused with the established disciplinary process.
Inmate Discipline

(c) A grievance should be resolved at the lowest possible level. This means that the inmate should first direct his/her problem to the on-duty deputy.

(d) If the problem is not resolved by the deputy, the next step is to complete an inmate grievance form. All formal grievances will be directed to the Sergeant so designated.

(e) If the grievance directly involves the sergeant it will be directed to the Facility Lieutenant to resolve. The Facility Lieutenant will attempt to resolve the problem. You will receive a written reply within a reasonable amount of time, normally within ten (10) judicial days.

APPEAL The inmate with a grievance has five (5) calendar days to submit a written appeal to the Facility Lieutenant. The appeal must be on an approved form and complete. It must list specific problem being appealed. You will receive a written reply within a reasonable amount of time, normally within ten (10) judicial days of receipt by the Lieutenant.

Final Appeal The inmate may appeal the lieutenant’s response within three (3) calendar days to the Jail Commander. You will receive a written reply within a reasonable amount of time, normally within fifteen (15) judicial days of receipt by the Jail Commander.
Disciplinary Separation

602.1 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 inmates in disciplinary separation or classified as requiring special management needs.

602.1.1 DEFINITIONS
Definitions related to this policy include:

Disciplinary separation - A status assigned to an inmate after a disciplinary hearing in which the inmate was found to be in violation of a jail rule or state or federal law. This status results in separating the inmate from the rest of the inmate population to serve the consequence imposed.

602.2 POLICY
The Lake County Sheriff's Office will maintain a disciplinary separation unit to house inmates who, after an impartial due process hearing, are being sanctioned for violating one or more jail rules. Restrictions on privileges will be subject to the disciplinary process and in accordance with this policy.

602.3 DISCIPLINARY SEPARATION
Inmates may be placed into disciplinary separation only after an impartial hearing to determine the facts of the rule violation, in accordance with the office Inmate Discipline Policy. The hearing officer shall impose discipline in accordance with the discipline schedule established by the Jail 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 Jail 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)).

602.4 INMATE ACCESS TO SERVICES
The ability to discipline inmates for conduct violations is not absolute. Absent legitimate government reason, inmates continue to have a right to receive certain services. However, inmates in disciplinary separation, in accordance with the Inmate Discipline Policy, or special management inmates who are disciplined for one or more rule violations, may be subject to loss of privileges or credit for good time and work.

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
Disciplinary Separation

them in the supervision of inmates held in disciplinary separation or classified as requiring special management needs.

602.4.1 MEDICATION, CLOTHING, AND PERSONAL ITEMS
Inmates placed in disciplinary separation are considered special management inmates and shall not be denied prescribed medication.

Special management inmates will be provided with clothing that identifies their status, but in no case will this clothing be used to intentionally disgrace the inmate.

Absent unusual circumstances, special management inmates will continue to have the same access to personal items in their cell as general population inmates have, including the following:

- Clean laundry
- Barbering and hair care services
- Clothing exchanges
- Bedding and linen exchanges

Inmates 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(b)). The decision to continue to deprive the inmate of these articles must be made by the Jail Commander or the authorized designee and reviewed every 24 hours.

602.4.2 SHOWERING AND PERSONAL HYGIENE
Inmates in disciplinary separation should be allowed to shower with the same frequency as the general inmate population, if reasonably practicable, but at minimum shall be afforded the opportunity to shower at least every other day and shave daily (15 CCR 1083(e)). The opportunities for each inmate to shave and shower will be documented on the Razor/Hair Clipper Logs.

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.

602.4.3 DENIAL OF AUTHORIZED ITEMS OR ACTIVITIES
Personal items may be withheld when it reasonably appears that the items will be destroyed by the inmate or it is reasonably believed that the personal item will be used for a self-inflicted injury or to harm others.

Whenever an inmate in disciplinary separation is denied personal care items or activities that are usually authorized to the general population inmates, 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 or activities. The report shall
Disciplinary Separation

be submitted to a supervisor for review, who will then forward it to the Jail Commander. A copy of the report shall be placed in the inmate’s file.

A deputy will see that the inmate gathers all of his or her property prior to escorting the inmate to the designated location where disciplinary separation will occur.

The inmate will be allowed to possess **ONLY** the following items while housed in disciplinary separation:

(a) One mattress  
(b) All jail issued clothing and bedding  
(c) Jail issued hygiene kit  
(d) Jail issued rule book  
(e) Pen, paper and envelopes on request  
(f) Shower shoes that are available through commissary (one pair only)  
(g) Legal/personal mail  
(h) One book of faith (Bible, Book of Mormon, Koran, etc.)  
(i) One regular book to read

The inmate may lose the following privileges while housed in disciplinary isolation:

(a) Commissary  
(b) Television

602.4.4 MAIL AND CORRESPONDENCE

Inmates in disciplinary separation shall have the same privileges to write and receive correspondence as inmates in general population, except in cases where inmates violated correspondence regulations. In such cases, mail privilege may be suspended. The Jail 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 inmate (15 CCR 1083(h)).

602.4.5 VISITATION

Inmates in disciplinary separation shall have the same opportunities for visitation as general population inmates, 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.
Disciplinary Separation

602.4.6 READING AND LEGAL MATERIALS
Inmates in disciplinary separation shall have the same access to reading materials and legal materials as the general population inmates, 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 inmate’s file and unit log. Access to courts and legal counsel shall not be suspended as a disciplinary measure (15 CCR 1083(i)).

602.4.7 EXERCISE
Inmates 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.

Cell numbering will coincide with odd/even days and determines the scheduling for each inmate's time out of his or her cell, and recreation.

602.4.8 LIMITED TELEPHONE PRIVILEGES
Inmates 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 Jail Commander

All telephone access based on the above exceptions shall be documented on the unit log.

602.4.9 BEDDING AND CLOTHING
Inmates in disciplinary separation shall not be deprived of bedding or clothing except in cases where the inmate destroys such articles or uses them to harm him/herself or others or for something other than the intended purpose. Clothing and bedding shall be returned to the inmate as soon as it is reasonable to believe the behavior that caused the action will not continue. The decision to continue to deprive the inmate of these articles must be made by the Jail Commander or the authorized designee and reviewed at least every eight hours. This review shall be documented and placed into the inmate's file.

Inmates in disciplinary separation shall be provided two (2) tear resistant safety blankets.

602.5 DISCIPLINARY SEPARATION DIET
Under no circumstances will an inmate be denied food as a means of punishment (15 CCR 1083(f)). A disciplinary separation diet may only be used for major violations of jail rules (15 CCR 1083(g)). No inmate receiving a prescribed medical diet is to be placed on a disciplinary separation diet without review and written approval of a physician or pursuant to a written plan approved by the physician. Disciplinary separation diets shall be served twice during each 24-hour period and
must meet statutorily prescribed minimum food and nutritional requirements as described in the Disciplinary Separation Diet Policy.

Before any inmate is placed on a disciplinary separation diet, the following shall occur:

(a) The physician shall review the medical condition and history of the inmate and approve the alternative meal service.
(b) The Jail Commander shall review the incident report and medical reports and shall approve the use of a disciplinary separation diet.
(c) Custody and medical staff shall monitor these special circumstances and report their observations to the Jail Commander.
(d) Disciplinary separation diets shall not be served in any case for more than 72 hours without the written approval of the Jail Commander and a physician.

602.6 MENTAL HEALTH CONSIDERATIONS
Due to the possibility of self-inflicted injury and depression during periods of separation, health evaluations should include notations of any bruises and other trauma markings, and the qualified health care professional’s comments regarding the inmate’s attitude and outlook.

(a) A qualified health care professional should visit each inmate a minimum of once a day and more often if needed. A medical assessment should be documented in the inmate’s medical file.
(b) Mental health staff or a qualified mental health professional should also conduct weekly rounds.

When an inmate is classified as a special management inmate due to the presence of a serious mental illness and is placed in a separation setting, the mental health progress notes and management plan should reflect the changed environment. When an inmate is expected to remain in separation for more than 30 days (based upon disciplinary decisions, protective needs or other factors) the special management treatment plan should be updated to reflect this.

Where reasonably practicable, a qualified health care professional should provide screening for suicide risk following admission to the separation unit.

602.7 SAFETY CHECKS
A staff member shall conduct a face-to-face safety check of all disciplinary separation inmates at least every 30 minutes on an irregular schedule. If an inmate 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.

Inmates 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 inmates shall receive increased monitoring to include at a minimum:
Disciplinary Separation

(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.

602.7.1 DOCUMENTATION OF SEPARATION CHECKS
Separation rounds shall be documented on door cards, logs, and/or rounds forms, and include the following:

(a) Date and time of contact
(b) Signature or initials of the qualified health care professional making rounds
(c) Any needed referrals
(d) All significant findings and observations, medical assessment, treatment, recommendations, notifications, and actions, all of which should be documented in the inmate’s health record

602.8 LOG PROCEDURES
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.

Handwritten logs should be completed in ink. Once an entry is made it should not be modified. If corrections or changes are needed they should be done by way of a supplemental entry.

Electronically captured logs will be maintained in a way that prevents entries from being deleted or modified once they are entered. Corrections or changes must be done by way of supplemental entries. At a minimum the log will contain the following:

(a) Inmate name
(b) Inmate booking number
(c) Housing location
(d) Classification status
(e) Date and time placed in separation
(f) Date and time of entry and exit from the cell
(g) Violation and length of discipline
(h) Scheduled date of removal from separation
(i) Medical, psychological, or behavioral considerations
(j) Counseling for behavior
Disciplinary Separation

(k) Date and time of removal from separation

Log entries should be legible, be entered promptly, and provide sufficient detail to adequately reflect the events of the day for future reference.

The date and time of the observation or incident and the name and identification number of the staff member making the log entry shall be included on each entry.

Supervisors should review the logs frequently during the shift and enter comments as appropriate. At a minimum, supervisors should enter the date and time of each review.

All safety checks will be documented in detail and should include the exact time of the safety check and the identification information of the employee conducting the check. All documentation will be gathered and provided to the Shift Supervisor or the Jail Commander at midnight each day.

602.8.1 LOG INSPECTION AND ARCHIVAL OF LOGS
The Shift Supervisor shall review and evaluate the logs and pass any significant incidents via the chain of command to the Jail Commander for review.

The logs will be retained by the Office in accordance with established records retention schedules but in no case less than one year.
Inmates with Disabilities

604.1 PURPOSE AND SCOPE
This policy provides guidelines for addressing the needs and rights of inmates detained by this office, in accordance with the Americans with Disabilities Act (ADA).

604.1.1 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.

604.2 POLICY
This office will take all reasonable steps to accommodate inmates 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.

604.3 FACILITY COMMANDER RESPONSIBILITIES
The Jail Commander, in coordination with the Responsible Physician and the ADA Coordinator (see Accessibility - Facility and Equipment Policy), will establish written procedures to assess and reasonably accommodate disabilities of inmates. The procedures will include, but not be limited to:

- Establishing housing areas that are equipped to meet the physical needs of disabled inmates, including areas that allow for personal care and hygiene in a reasonably private setting and for reasonable interaction with inmates.
- Establishing classification criteria to make housing assignments to inmates with disabilities.
- Assigning individuals with adequate training to assist disabled inmates with basic life functions as needed. Inmates should not provide this assistance except as allowed in the Inmate Assistants Policy.
- Establishing transportation procedures for moving inmates with limited mobility.
- Establishing guidelines for services, programs and activities for the disabled and ensuring that inmates 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).
- Enlisting or contracting for trained service personnel who have experience working with disabled people.
- Establishing procedures for the request and review of accommodations.
Inmates with Disabilities

- Establishing guidelines for the accommodation of individuals who are deaf or hard of hearing, have common disabilities such as sight and mobility impairments, developmental disabilities and common medical issues, such as epilepsy.
- Identification and evaluation of all developmentally disabled inmates, 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 Jail Commander is responsible for ensuring the Lake County Sheriff's Office jail is designed or adapted to reasonably accommodate inmates with disabilities. At a minimum this includes:

- Access to telephones equipped with a telecommunications device for the deaf (TDD) for inmates who are deaf, hard of hearing or speech-impaired.
- If orientation videos are used to explain facility rules to newly admitted inmates, subtitles may be displayed on the video presentation to assist inmates who have impaired hearing.
- Some cells and dormitories should be equipped with wheelchair accessible toilet and shower facilities. Inmates 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.

604.4 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 inmates 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 classification deputy should consult with the qualified health care professional or the Responsible Physician regarding housing location.

Deputies should assist an inmate with a disability by accommodating the inmate consistent with any guidelines related to the inmate’s disability. If there are no current guidelines in place, deputies receiving an inmate request for accommodation of a disability should direct the inmate to provide the request in writing or assist the inmate 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 upon request if the accommodation would not raise a safety concern or affect the orderly function of the jail. The formal written request should still be submitted to the on-duty supervisor.
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 inmate with a cold. Such requests need not be made in writing.

604.5 ACCOMMODATION REQUESTS

Inmates 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 Jail 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 inmate’s file.

A supervisor who does not grant the accommodation, either in part or in full, should forward the request to the Jail Commander and the ADA Coordinator within 48 hours of the request being made. The Jail 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.

604.6 TRAINING

The ADA Coordinator should work with the Training Manager to provide periodic training on such topics as:

(a) Policies, procedures, forms and available resources for disabled inmates.

(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**

**606.1 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.

**606.2 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).

**606.3 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 Jail 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, that is provided during inmate orientation.

**606.4 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 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.

606.5 INMATE REQUEST FOR ASSISTANCE
Written materials addressing how an inmate can access local attorneys and key legal documents shall be available in each housing unit. Staff shall provide these materials to any inmate upon request. However, staff shall not provide legal advice or assist any inmate in the completion of any legal document.

Habeas corpus forms shall be made available to any inmate by the staff upon request.

Legal forms filled out by the inmate shall be forwarded to court administration directly.

606.6 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 Jail 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.

606.7 MAIL
Legal mail shall be handled in accordance with the Inmate Mail Policy.

606.8 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.
**Inmate Access to Courts and Counsel**

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.

**606.8.1 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 Jail Commander. The Jail Commander may recommend the suspension or a limitation of the inmate's pro per privileges if they adversely affect the safety and security of the facility.

Upon the concurrence with the findings and recommendation of the Jail Commander, Sheriff or the authorized designee shall consult with the Sheriff's Office 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.

**606.8.2 PRO PER STATUS - MATERIALS AND SUPPLIES**

The facility will only provide supplies to indigent pro per inmates Bi weekly. These items may be retained by the inmate but must be kept in the container supplied for such purpose. At time of request inmates must be indigent as defined by custody's policy. The items may include:

(a) Up to two ruled legal notepads bi weekly

(b) 10 - Standard legal size envelopes unless proof of more is provided

(c) 2 - 9-inch x 12-inch manila envelopes and/or 10-inch x 14-inch manila envelopes if required.

(d) Unless otherwise ordered by the court, the Sheriff's Office shall have no obligation to supply more materials beyond those listed above for indigent inmates. Replacement of any of the listed items shall be accomplished through a request slip. Supplies provided by a court legal liaison will be received and distributed by the Housing Officer. All supplies distributed to the inmate will be recorded on the request slip. Supplies not listed in this policy are subject to approval by the Jail Commander or the authorized designee.

One Copy of an inmate's final legal (criminal case) work product, upon the inmate's request, may be provided subject to arrangements with the court. ONLY if the inmate is indigent.
Inmate Access to Courts and Counsel

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.

606.8.3 PRO PER INMATES INTERVIEWING WITNESSES
A pro per 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 the Sheriff's Office or otherwise detained by a government agency, except upon a specific court order.

606.8.4 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).
Foreign Nationals and Diplomats

608.1 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.

608.2 POLICY
The Lake County Sheriff's Office Jail 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 Lake County Sheriff's Office Jail 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.

608.3 DIPLOMATIC AND CONSULAR IMMUNITY

608.3.1 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.

608.3.2 ADDRESSING CLAIMS OF DIPLOMATIC OR CONSULAR IMMUNITY
When an arrestee who claims diplomatic or consular immunity is brought to the Lake County Sheriff's Office Jail 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 Lake County Sheriff's Office Jail 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.
Foreign Nationals and Diplomats

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 Lake 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.

608.3.3 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.

608.4 CONSULAR NOTIFICATIONS

608.4.1 CONSULAR NOTIFICATION LIST AND CONTACTS
The Jail 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.

608.4.2 CONSULAR NOTIFICATION ON BOOKING
Sheriff's Office members assigned to book inmates shall:

(a) Inform the foreign national, without delay, that he/she may have his/her consular office 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 office be notified, then:
   1. 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 office without delay.

(d) If the foreign national's country is on the list for mandatory notification, then:
   1. 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
Foreign Nationals and Diplomats

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 office.

3. Forward any communication from the foreign national to his/her consular office 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

610.1 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.

610.2 POLICY
It is the policy of the Sheriff's 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 Jail 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.

610.3 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 Jail Commander.
Inmate Rights - Protection from Abuse

- Referring sick or injured inmates to a qualified health care professional without unnecessary delay.
- Maintaining high standards of cleanliness throughout the jail.
- Documenting all abuse protection efforts in facility logs and incident reports as applicable.

610.4 TRAINING
The Training Manager shall be responsible for developing and delivering a training curriculum on the topic of protecting inmates from abuse to all staff. A roster of attendees shall be maintained from each class. Training completion documents shall be filed in each employee's training file.
Prison Rape Elimination Act

612.1 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).

612.1.1 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 inmate 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
(b) Contact between the mouth and the penis, vulva, or anus
(c) 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 inmate, 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
**Prison Rape Elimination Act**

- Any display by a staff member, contractor, or volunteer of his/her uncovered genitalia, buttocks, or breast in the presence of an inmate, 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 inmate, detainee, or resident that are directed toward another; repeated verbal comments or gestures of a sexual nature to an inmate, 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).

**612.2 POLICY**
The Sheriff's 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 inmates from sexual abuse and harassment, and promptly and thoroughly investigate all allegations of sexual abuse and sexual harassment.

**612.3 PREA COORDINATOR**
The Jail Commander shall appoint an upper-level manager with sufficient time and authority to develop, implement, and oversee office efforts to comply with PREA standards. The PREA coordinator shall review facility policies and practices and make appropriate compliance recommendations to the Jail Commander (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 inmates 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, inmates 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, in order 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.
Prison Rape Elimination Act

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 inmates may be isolated.
6. The composition of the inmate 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 inmates from sexual abuse (28 CFR 115.18).

(e) Ensuring that any contract for the confinement of office detainees or inmates 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 inmates with confidential, emotional support services related to sexual abuse. The facility shall provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, state, or national victim advocacy or rape crisis organizations. Persons detained solely for civil immigration purposes shall be given contact information for immigrant services agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies in as confidential a manner as possible. The facility shall inform inmates, 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 inmates 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 inmate reports
Prison Rape Elimination Act

of sexual abuse and sexual harassment to the Jail Commander, allowing the inmate 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).

(a) 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. DOJ.

(b) 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:

1. 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)

2. Information on how to report sexual abuse and sexual harassment on behalf of an inmate (28 CFR 115.54)

(l) 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 Lake County Sheriff’s Office informed of the progress of the investigation (28 CFR 115.71).

(o) Ensuring that information for uninvolved inmates, 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 inmates or has in place a system for otherwise capturing such information (28 CFR 115.17).

612.4 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 inmates or staff shall immediately notify
Prison Rape Elimination Act

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 inmates (e.g., report to the Jail 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).

Inmates may report incidents anonymously or to any staff member they choose. Staff shall accommodate all inmate requests to report allegations. 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, sexual harassment, or retaliation, regardless of the source, shall be documented and referred for investigation. 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).

612.4.1 REPORTING TO OTHER FACILITIES
If there is an allegation that an inmate was sexually abused while he/she was confined at another facility, the Jail Commander shall notify the head of that facility as soon as possible but not later than 72 hours after receiving the allegation. The Jail Commander shall ensure that the notification has been documented (28 CFR 115.63).

612.5 RETALIATION
All inmates 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 inmates or staff who fear retaliation, shall be utilized (28 CFR 115.67; 15 CCR 1029).

The Jail Commander or the authorized designee shall assign a supervisor to monitor, for at least 90 days, the conduct and treatment of inmates or staff who report sexual abuse or sexual harassment, as well as inmates 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 inmate disciplinary reports, housing or program changes, negative staff performance reviews, or reassignment of staff members. Monitoring may continue beyond 90 days if needed. Inmate monitoring shall also include periodic status checks. The Jail 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).

612.5.1 REPORTS BY INMATES
Inmates may report sexual assault or abuse incidents anonymously or to any staff member they choose and shall not be required to use their normal point of contact. Staff shall accommodate all inmate requests to report allegations of sexual abuse and assaults.

Retaliation against an inmate by any staff member for filing a sexual abuse, assault or harassment incident will not be tolerated.

612.6 FIRST RESPONDERS
If an allegation of inmate 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 segregated 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 inmates who have disabilities or who have limited English proficiency, the first responder shall not rely on inmate interpreters, inmate readers or other types of inmate assistants, except in limited circumstances where an extended delay in obtaining an interpreter could compromise inmate safety, the performance of first responder duties or the investigation of sexual abuse or sexual harassment allegations (28 CFR 115.16).
612.7 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 sex 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 inmate’s sexual orientation, sex or gender identity. Investigators should not assume that any sexual activity among inmates is consensual.

The departure of the alleged abuser or victim from the employment or control of the jail 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 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 developmentally appropriate for youth, if applicable, and 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).

Inmates 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 is under 18 or 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).

612.7.1 INVESTIGATIVE FINDINGS
All completed written investigations shall be forwarded to the Jail Commander or, if the allegations may reasonably involve the Jail Commander, to the Sheriff. The Jail 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).
Prison Rape Elimination Act

The staff shall be subject to disciplinary sanctions, up to and including termination, for violating this policy. Termination shall be the presumptive disciplinary sanction 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 sanctions 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).

612.7.2 REPORTING TO INMATES
The Jail Commander or the authorized designee shall inform a victim inmate 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 inmate.

If a staff member is the accused (unless the Office has determined that the allegation is unfounded), the inmate shall also be informed whenever:

(a) The staff member is no longer assigned to the inmate’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 inmate 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 inmate is in custody, the inmate will sign a copy of the notification letter. The letter will be added to the case file (28 CFR 115.73).

612.8 SEXUAL ABUSE AND SEXUAL HARASSMENT BETWEEN STAFF AND INMATES
Sexual abuse and sexual harassment between staff, volunteers or contract personnel and inmates is strictly prohibited. The fact that an inmate 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-inmate sexual abuse or sexual harassment shall be referred to the Professional Standards Unit for investigation.

612.8.1 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 inmates. He/she 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).
Prison Rape Elimination Act

612.9 SEXUAL ABUSE VICTIMS
Inmates 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 inmate 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 (b)(2)(C), 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).

612.10 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 SAFE nor SANE are available, other qualified medical practitioners can perform the examination. The Office shall document its efforts to provide SAFE or SANE (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 inmates before reporting information to jail staff about prior sexual victimization that occurred somewhere other than an institutional setting, unless the inmate 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 jail staff about security or management decisions (28 CFR 115.81).

612.11 PROTECTIVE CUSTODY
Inmates 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. Inmates 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 Jail Commander shall clearly document the basis for the concern for the inmate’s safety and the reasons why no alternative means of separation can be arranged (28 CFR 115.43).

The facility shall assign these inmates to involuntary protective custody only until an alternative means of separation from likely abusers can be arranged, not ordinarily in excess of 30 days.

Inmates 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 Jail 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 Jail Commander shall afford each such inmate a review to determine whether there is a continuing need for protective custody (28 CFR 115.43).

612.12 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.
Prison Rape Elimination Act

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 Jail Commander or the authorized designee shall implement the recommendations for improvement or document the reasons for not doing so.

612.13 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.

The reports shall be approved by the Jail 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 Lake 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).

612.14 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).

612.15 PRESERVATION OF ABILITY TO PROTECT INMATES
The Office shall not enter into or renew any collective bargaining agreement or other agreement that limits the deputy’s ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted (28 CFR 115.66).

612.16 RESPONSE PLAN
The Lake County Jail shall develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership. (§ 115.65)

When an incident of sexual abuse has occurred between inmates, both inmates will be immediately removed from the location and separated from sight and sound contact of each other.

The supervisor will ensure that the scene of the incident, affected clothing and physical evidence is not disturbed pending a scene investigation. If there are questions about whether physical evidence may still be recovered, the on-call Detective or evidence technician should be called directly.

If the person reporting the incident is not a security staff member, the responder shall be required to inform the alleged victim not to take any action that could destroy physical evidence. The responder should not question the victim or suspect inmates. Jail staff will take immediate steps to secure the inmates, consistent with the steps listed above.

In cases of inmate / inmate sexual abuse, the shift supervisor will contact the patrol supervisor to have a deputy conduct a preliminary inquiry into the circumstances. The deputy should attempt to obtain enough information to: determine if the victim inmate requires medical treatment, identity of the suspect, the location of the assault and any possible witnesses. The deputy should
not conduct any further detailed interviews of the victim unless directed to do so by the shift supervisor or detectives. Detailed interviews of victim inmates should only be conducted by LCSO investigators, or other equally qualified investigators, unless exigent circumstances require an immediate interview.

Jail staff should avoid questioning of the suspect inmate, unless circumstances make this unavoidable, or they are directed to do so by the shift supervisor or a detective. If circumstances require questioning, the suspect shall be provided a Miranda Admonishment. In either case of victim or suspect interviews, if circumstances permit, the interviews should be audio or video recorded.

LCSO detectives shall be responsible for initiating SART exams, Victim / Witness notifications and related standards applicable to the community at large. Evidence collection from the victim or suspect shall be handled in accordance with standards used for investigating sexual assault in the community.

If an inmate is taken outside the facility for a medical or SART exam, when possible, a deputy of the same sex will be assigned to escort the inmate. The deputy should not be present in the exam room during a medical or SART exam unless specifically requested by medical staff, or when the security level and behavior of the inmate requires close supervision for the safety and security of hospital staff, and to prevent escape.

In all cases where non-consensual inmate / inmate sexual abuse is alleged, the shift supervisor or PREA coordinator will contact the detective supervisor, or on-call detective. The detective will assess the circumstances and, based upon the nature and date of the allegations, will determine the necessary response and investigative follow up.

If non-consensual abuse has occurred within a time frame that permits collection of physical evidence, detectives will be responsible for evidence collection pursuant to accepted practices. Depending on the unique circumstances of each case, detectives may direct deputies to collect items as necessary to preserve evidence. LCSO detectives will be responsible for follow up interviews with victims, witnesses and suspects unless exigent circumstances exist, as listed previously.

In cases of consensual, inmate / inmate sexual contact, the shift supervisor will contact the patrol supervisor to have a deputy conduct a preliminary investigation and take steps appropriate for the circumstances. All reports of consensual inmate / inmate sexual activity will be forwarded to the LCSO detective unit for review.

If allegations involve staff / inmate sexual abuse, the supervisor with knowledge of the circumstances will immediately contact jail administration and take all steps consistent with this policy to preserve any physical evidence. Based upon the circumstances of the event, or if jail administration is unavailable, the shift supervisor will make direct contact with the detective supervisor, the Investigations Lieutenant or on-call detective. The shift supervisor, in the absence of jail administration, will contact LCSO administration for direction regarding the employee. All reasonable steps should be taken to protect the victim inmate from any additional contact with the
employee, while preserving the employee’s confidentiality and rights provided by law. All steps taken with regard to allegations of employee sexual abuse involving inmates will conform to state laws regarding criminal and administrative investigations.

Evidence Collection

In cases of sexual assault, evidence containing potential biological fluids should only be collected by trained Sheriff’s Investigators, D.A. Investigators, LSCO evidence technicians, or deputies who have training for evidence collection related to sexual assault.

If exigent circumstances require that physical evidence must be collected due to contamination concerns, field trained deputies will be tasked with the recovery of the clothing or evidence. In such cases, the following guidelines should be followed:

The inmate(s) will be photographed, front and back, prior to removing any clothing. The deputy will remove each article of clothing separately while wearing fresh, sterile gloves. The collecting deputy shall change gloves between each item of evidence to prevent cross contamination. As each item of clothing is removed, it will be photographed and placed into a paper evidence bag, the bag sealed and the evidence item number noted on the bag. To avoid cross contamination, the person documenting the evidence should not be the person collecting the evidence. At no time will any of the evidence or clothing be co-mingled in any fashion: one item of evidence = one pair of gloves = one evidence container. Evidence containing potential biological evidence or fluids should never be packaged in plastic.

If physical evidence must be recovered from the scene, the full scene will first be photographed. Each item will then be photographed in place before it is handled or moved in any fashion. The deputies will adhere to the same collection standards as listed for clothing: one item of evidence = one evidence container = one pair of gloves.

Collection or handling of any evidence will be documented using LCSO report forms. On-call evidence technicians should be consulted if there are any questions about proper packaging for unusual items of evidence.

612.17 INMATES WITH DISABILITIES AND INMATES WHO ARE LIMITED ENGLISH PROFICIENT (PREA)

(a) The Lake County Jail shall take appropriate steps to ensure that inmates with disabilities (including, for example; inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the Lake County Jail’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, written materials shall be provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading
skills, or who are blind or have low vision. The Sheriff’s Office is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the Americans With Disabilities Act, 28 CFR 35.164.

(b) Reasonable steps shall be taken to ensure meaningful access to all aspects of the Lake County Jail’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

(c) Custody staff shall not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate’s safety, the performance of first-response duties under PREA section 115.364, or the investigation of the inmate’s allegations (28 CFR 115.16)
Grooming

616.1 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.

616.2 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 Jail 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.

616.3 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.

616.3.1 HAIR CARE SERVICES
The Jail 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.

616.3.2 HAIR CUTTING PROCEDURES
(a) HAIR CUT SCHEDULE
1. Haircuts will be conducted during the Swing Shift on the following days:
   (a) Pods A & C 1st and 3rd Thursday of each month
   (b) Pods D & E 1st and 3rd Tuesday of each month
   (c) Pods F, G, H & I 1st and 3rd Monday of each month
2. Inmates in Administrative or Disciplinary Segregation, and Pod B will be considered on a case by case basis; and haircuts will be completed during the Day Shift. It will be the Shift Sergeant's discretion as to where the hair cuts will be done, and who will perform them. These inmates may be allowed to cut their own hair.

3. Inmate workers are allowed hair cuts every Monday. They may check out hair cutting equipment, and will disinfect all items before returning them. The Housing Officer will record the equipment check out and return in the housing log.

(b) DESIGNATED HAIR CUT AREAS
   (a) Hair cuts will be done only in designated areas
       (a) Pods A - E In the interview room
       (b) Pods F & G In the hair care room between Pods F & G
       (c) Pod H In the old visiting area
       (d) Pod I In the hair care room

(c) HAIR CUT PROCEDURE
   1. The Housing Unit Officer will check to make sure that the inmate cutting hair does not have enemies within the facility. Then he will check out the hair clippers, combs, and spray bottle of water to the hair cutter. When hair cutting is complete he will enter the items' return in the log to ensure that they have all been sanitized and returned in good condition.

   2. The Housing Unit Officer will check the inmates frequently while the hair cuts are being given. He or she will not mix different classifications of inmates.

   3. Hair cuts identifying inmates as members of a particular gang (such as Mongolian style, Mohawk, etc.) will NOT be allowed. Refusal to cut or re-style hair could result in the inmate involved being administratively segregated by classification.

   4. When the hair cuts are complete the Housing Unit Officer will check the hair cutting equipment to ensure that there has been no damage to the items and that all of the parts are intact. The hair cutting area will be checked for cleanliness.

(d) DISINFECTANT PROCEDURE
   1. The cordless electric razors are cleaned by the Unit Housing Officer.
      (a) The electric cordless razor will have removable heads and will be sanitized after each use with the disinfectant provided, "Barbicide".
      (b) The disinfectant solution will meet the following requirements:
Grooming

1. Accepted HIV label
2. EPA registered
3. Virucidal
4. Fungicidal
5. Bactericidal

(c) No substitute disinfectant solution will be permissible unless approved by the Lake County Department of Health.

(d) The razor heads will be soaked in "Barbicide" for a minimum of ten (10) minutes after each individual use.

(e) The inside of the razor will be thoroughly dusted until free of hair, then sprayed with Lysol or similar disinfectant after each individual use. The pre-cleaned surfaces will be sprayed for 2 to 3 seconds until covered in mist and allowed to air dry for ten (10) minutes.

2. The inmate hair cutters will be responsible for sanitizing all other equipment with the disinfectant supplied to them by the Housing Officer.

(a) The Unit Officer will enter the following information in the housing log:
   (a) Name of inmate using the razor
   (b) Inmate’s booking number
   (c) Date and time of use
   (d) Signature of the Housing Officer

(b) Inmates in Pod B, Administrative or Disciplinary Segregation and Mental Health, will NOT have access to disposable razors. They will be supplied with razor less cream shave (1 ounce in a paper cup). They will be allowed to shave daily (except Pod B inmates who will shave only during their designated days out.

(c) If an inmate is allergic to the cream shave they will have to submit a sick call slip. Once the nursing staff has determined that the inmate is allergic and submitted a Medical Treatment Order, the inmate will be allowed to use the electric razor.

616.4 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.

Inmates may be restricted from significantly altering their appearance for reasons of identification in court (15 CCR 1267(b)).

616.5 NAILS
Nail clippers will be kept at the officer's station and will be issued to inmates upon request. Inmate workers are required to keep their nails clean and trimmed. Inmates with long nails may be required to trim their nails if there is a security concern and the inmate is admitted to general population.

616.6 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.

616.7 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).

616.8 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.
Grooming

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 Non-Discrimination

618.1 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 non-discriminatory administrative decisions by defining classes protected by the 1964 Civil Rights Act and detailing an inmate complaint and discrimination investigation process.

618.2 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. This policy prohibits the staff from discriminating against an inmate based upon age, sex, race, religion, national origin or sexual orientation. It establishes a process by which the inmate can report possible discrimination.

Reasonable and comparable opportunities for participation in vocational, educational and religious programs shall be made available to all inmates. Males and females housed at the same facility shall have comparable access to all services and programs. Neither sex shall be denied opportunities on the basis of its smaller representation in the total population.

The Jail Commander should periodically conduct interviews with inmates and staff members to identify and resolve potential problem areas related to discrimination before they occur.

618.3 INMATES REPORTING DISCRIMINATION
Inmates who wish to report an allegation of discrimination may communicate with facility management by way of the following:

(a) Inmate Grievance Form provided by the facility staff
(b) Confidential correspondence addressed to the Jail Commander or Sheriff or other government official, including the courts or legal representative
(c) Verbally to any supervisor or other staff member of this facility

618.3.1 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 grievance or written complaint submitted by the inmate is clearly identified as confidential and addressed to the Jail 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 Jail 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

618.4 DISCRIMINATION GRIEVANCE/COMPLAINT AUDITS
The Jail Commander should perform an annual audit of all inmate discrimination grievances and complaints to evaluate whether any policy or procedure changes or training are indicated. The Jail Commander should record these findings in a confidential memorandum to the Sheriff. Specific details of complaints and identifying information, such as names of the involved persons, dates or times, are not part of this process and should not be included in the memorandum. If the audit identifies any recommended changes or content that may warrant a critical revision to this Custody Manual, the Jail Commander should promptly notify the Sheriff.

Any training issues identified as a result of this audit should be forwarded to the Training Manager, who shall be responsible for ensuring all necessary and required training is scheduled and completed.
Inmate Grievances

620.1 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.

620.2 POLICY
It is the policy of this office that any inmate may file a grievance relating to conditions of confinement, which includes release date, housing, medical care, food services, hygiene and sanitation needs, recreation opportunities, classification actions, disciplinary actions, program participation, telephone and mail use procedures, visiting procedures and allegations of sexual abuse (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.

620.3 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 14 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.

620.3.1 EXCEPTION TO INITIAL GRIEVANCE FILING
Inmates may request to submit the grievance directly to a supervisor or mail it directly to the Jail 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 deposit their grievances in the locked grievance box within their housing unit or place their grievance in a sealed envelope labeled “Grievance” and deposit it in the regular mail boxes. These envelopes will be delivered directly to the Jail Commander and not forwarded to the United States Postal Service.
620.3.2 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 Jail 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 Jail 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 Jail 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 Jail Commander as the final level of appeal.

620.3.3 APPEALS TO GRIEVANCE FINDINGS
Inmates may appeal the finding of a grievance to the Jail Commander as the final level of appeal within five days of receiving the findings of the original grievance. The Jail Commander will review the grievance and either confirm or deny it. If the Jail 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 Jail Commander within 10 calendar days.

620.3.4 RECORDING GRIEVANCES
The Jail 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 Jail Commander or the authorized designee to ensure that grievances are being handled properly and in a timely manner. A copy of each grievance should be filed in the inmate’s official record and maintained throughout the inmate’s period of incarceration.

The original grievance should be retained in a file maintained by the Jail Commander or the authorized designee, and shall be retained in accordance with established records retention schedules.

620.3.5 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.
Inmate Grievances

(a) Inmate Abuse of the Grievance Procedure

1. The Jail Commander may order a limit of the number of grievances by an individual inmate should it appear that the grievances are excessive in number and/or frivolous in nature.

2. The staff member handling grievances will evaluate the potential abuse and advise the Jail Commander. When abuse is determined, the inmate will be limited to two grievances a month.

620.4 GRIEVANCE AUDITS

The Jail Commander should perform an annual audit of all inmate grievances and complaints filed the previous calendar year. The Jail Commander should forward a memorandum to the Sheriff detailing the findings, including recommendations regarding any changes to policy or procedures or any additional training that might be warranted to reduce future complaints. Specific identifying information regarding dates, times or individuals named in the complaints is not part of this process and should not be included in the memorandum.

The Sheriff should evaluate the recommendations and ensure appropriate action is taken.

Any training issues identified as a result of this audit should be forwarded to the Training Manager, who will be responsible for ensuring all necessary and required training is scheduled and completed.

620.5 TRAINING

The Training Manager shall ensure that all custody staff receive initial and periodic training regarding all aspects of this policy. All training delivered should include testing to document that the employee understands the subject matter.

620.6 ADDITIONAL PROVISIONS FOR GRIEVANCES RELATED TO SEXUAL ABUSE

The following apply to grievances that relate to sexual abuse allegations (28 CFR 115.52; 15 CCR 1029):

(a) Inmates may submit a grievance regarding an allegation of sexual abuse at any time.

(b) Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, are permitted to assist inmates in filing such grievances and to file such grievances on behalf of inmates if the inmate agrees to have the grievance filed on his/her behalf. Staff members who receive a grievance filed by a third party on behalf of an inmate shall inquire whether the inmate wishes to have the grievance processed and shall document the inmate’s decision.

(c) Grievances may be submitted to any staff member and need not be submitted to the member who is the subject of the complaint

(d) Staff receiving a grievance shall forward the grievance to a supervisor. Grievances shall not be forwarded to any supervisor who is the subject of the complaint. The supervisor receiving the grievance shall refer the grievance to the Shift Supervisor for
Inmate Grievances

investigation. Inmates and staff are not required to attempt to informally resolve grievances related to sexual abuse.

(e) The Shift Supervisor shall ensure that grievances related to sexual abuse are investigated and resolved within 90 days of the initial filing. The Shift Supervisor may grant an extension of up to 70 days if reasonable to make an appropriate decision. If an extension is granted, the inmate shall be notified and provided a date by which a decision will be made.

(f) At any level of the process, including the appeal, if the inmate does not receive a response within the allotted time, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level.

(g) Inmates may be disciplined for filing a false grievance related to alleged sexual abuse only when it is determined that the inmate filed the grievance in bad faith.

620.6.1 EMERGENCY GRIEVANCES RELATED TO SEXUAL ABUSE
Any inmate who believes he/she or any other inmate is in substantial risk of imminent sexual abuse may file an emergency grievance with any supervisor. The supervisor shall determine whether immediate action is reasonably necessary to protect the inmate and shall provide an initial response within 48 hours.

The supervisor shall refer the grievance to the Shift Supervisor, who will investigate and issue a final decision within five calendar days.

The initial response and final decision shall be documented and shall include a determination whether the inmate is in substantial risk of imminent sexual abuse and identify actions taken in response to the emergency grievance (28 CFR 115.52).

620.7 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.

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

622.1 PURPOSE AND SCOPE
This policy establishes the requirement for providing eligible inmates the opportunity to vote during elections, pursuant to election statutes.

622.2 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 Jail 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.

622.3 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.
(h) Not on parole as a result of a felony conviction.

622.4 PROCEDURES
Prior to each election, the Jail Commander will designate a deputy to be a liaison between the Sheriff’s Office and the local Registrar of Voters. The designated deputy will be responsible for assisting inmates who have requested to vote.

622.4.1 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.
Inmate Voting

622.4.2 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.

622.4.3 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 jail 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 Lake County Public Health Department holds a contract with Wellpath which provides healthcare for correctional facilities. Wellpath manages all Health Care Administrative Meetings and Reports.

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 off-site, 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, Public Health Director 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 well-being 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.

Health-trained custody staff - A deputy or other facility employee who has received training from the Responsible Physician or the authorized licensed designee in limited aspects of health care coordination.

HIPAA - Health Insurance Portability and Accountability Act
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
The Sheriff shall select the Responsible Physician in accordance with the Health Authority Policy. It is the policy of this facility that the Responsible Physician should meet with the Jail Commander at least quarterly. The Responsible Physician 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 quarterly 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 quarterly report should be gathered by the Responsible Physician via monthly meetings with the facility Lieutenant and qualified health care professionals. The monthly meetings should cover the following topics:
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 quarterly report described above, a statistical report will be provided annually to the Jail Commander. The statistical report will be prepared by the Responsible Physician 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) Prescriptions written and 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
(l) 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 Jail Commander 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

702.1 PURPOSE AND SCOPE
The provision of adequate health services in a custody setting is a constitutional right afforded to all inmates. The purpose of this policy is to provide custody personnel and qualified health care professionals with a process to inform newly booked inmates of the procedure to access health care services and how to use the grievance system, if necessary.

702.2 POLICY
It is the policy of this office that all inmates, 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 Lake County Sheriff's Office facility will provide medical, dental and mental health services as necessary to maintain the health and well-being of inmates to a reasonable and socially acceptable standard (15 CCR 1200 et seq.; 15 CCR 1208).

702.3 ACCESS TO CARE
Inmate medical requests will be evaluated by qualified health care professionals or health-trained custody staff. Health care services will be made available to inmates from the time of admission until they are released. Information regarding how to contact the medical staff will be posted in all inmate housing areas (15 CCR 1200 et seq.; 15 CCR 1208). Medications and community health resources and referrals may be provided upon request when the inmate is released.

Unreasonable barriers shall not be placed on an inmate’s ability to access health services. Health care that is necessary during the period of confinement shall be provided regardless of an inmate’s ability to pay, the size of the facility, or the duration of the inmate’s incarceration. Such unreasonable barriers include:

- Punishing inmates for seeking care for their health needs.
- Deterring inmates 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 inmate 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 Jail Commander.

702.4 HEALTH CARE GRIEVANCES
Custody personnel should authorize and encourage resolution of inmate complaints and requests on an informal basis whenever possible. To the extent practicable, custody personnel should provide inmates with opportunities to make suggestions to improve programs and conditions.
Access to Health Care

Inmates will be informed of the grievance process during inmate orientation. The grievance process is also explained in the inmate handbook, which all inmates receive and which they should have additional access to in their housing units. Grievances will be handled in accordance with the Inmate Grievances Policy (15 CCR 1073(a)).

Custody personnel should minimize technical requirements for grievances and allow inmates 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, inmates may meet with a qualified health care professional or may submit a written correspondence.

Inmate 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 inmate should be provided with a written response in accordance with the schedule set forth in the Inmate Grievances Policy. Responses to inmate grievances should be based on the community standard of health care.

Copies of grievances and the facility’s response shall be sent to the Jail Commander, who, in consultation with the Responsible Physician, shall serve as the final authority in response to all inmate grievances.

If an inmate is not satisfied with the response, the inmate may appeal the grievance as outlined in the Inmate Grievances Policy.

702.5 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.

702.6 SICK CALL PROCEDURES
Emergency services for inmates are available 24 hours a day 7 days a week. If an inmate experiences a medical emergency, the inmate will contact a deputy or press the speaker button in their housing unit or cell. Custodial Personnel will contact medical staff and advise them of the medical emergency or concern. Medical staff will determine the need to see the inmate at that time or place him/her on the next available Sick Call List.

Routine medical services are available Monday through Friday. If an inmate requests to be seen for non-emergency medical, psychiatric or dental problems, the inmate must submit a Sick Call Form and give it to the housing deputy in their assigned unit.

Wellpath staff will be responsible for generating the Sick Call lists on a daily basis. Sick Call will begin after the breakfast meal, however Custodial Personnel will accommodate any unforeseen delays. Custodial Personnel will stand by with medical staff at all times to ensure their safety and monitor inmate behavior in conjunction with their normal duties.
Access to Health Care

702.7 MEDICATION PASS PROCEDURES
Med Pass will be conducted on a daily basis. Custodial Personnel will stand by with the nurse during med pass at all times. Custodial Personnel will ensure the inmate receiving medication ingests it after it is administered. Inmates attempting to conceal medication will be subject to disciplinary action according to the rules of conduct for inmates and shall be enforced by Custodial Personnel.

Med Pass times will be but are not limited to the following schedule:

    Dayshift - Start time between 1600-1700 hours.
    Graveyards - Start time between 0400-0500 hours.

Medications will be dispensed at Breakfast, Lunch, and Dinner between 2000-2100 hours.

Some inmates may require noon medications which may be administered before or after the lunch meal.

Custodial Personnel will accommodate Medication Pass at all times barring an emergency jeopardizing the safety and security of the facility. At no time will Custodial Personnel leave nursing staff unattended during Med Pass.
Non-Emergency Health Care Requests and Services

704.1 PURPOSE AND SCOPE
The purpose of this policy is to establish a daily triage system of inmate requests for routine health care services or to discuss options for elective procedures. This is to ensure that the health needs of the population are addressed properly and in a timely manner.

Lake County Health Services holds a contract with the Wellpath which provides healthcare for correctional facilities.

704.1.1 DEFINITIONS
Access to care - Means that, in a timely manner, an inmate may be seen by a clinician, be given a professional clinical diagnosis and receive treatment that is ordered.

Daily - Seven days a week, including holidays

Sick call - The evaluation and treatment of an ambulatory patient in a clinical setting, either on- or off-site, with a qualified health care professional

Clinical setting - An examination or treatment room appropriately supplied and equipped to address a patient's health care needs

Triage - The sorting and classifying of health care requests to determine priority of need and the proper place for health care to be rendered

704.2 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 Physician, in coordination with the Jail 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.
Non-Emergency Health Care Requests and Services

(e) Restrictions that prohibit non-health services personnel from diagnosing or treating an illness.

704.3 HEALTH CARE REQUESTS
Lake County Health Services holds a contract with the Wellpath which provides healthcare for correctional facilities. Wellpath staff collects, processes, and documents all Health Care Requests.

704.4 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).

704.5 GUIDELINES FOR ELECTIVE PROCEDURES OR SURGERY
Lake County Health Services holds a contract with Wellpath which provides healthcare for correctional facilities. Elective procedures and surgery will be at the discretion of Wellpath.

704.6 REQUESTS FOR OUTSIDE MEDICAL CARE
Inmates who request access to health care services outside the facility may do so with advance authorization from the Jail 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

706.1 PURPOSE AND SCOPE
Lake County Health Services holds a contract with Wellpath which provides healthcare for correctional facilities.

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 services from alternate providers. Specialty care includes specialist-provided health care, such as nephrology, surgery, dermatology and orthopedics.

706.2 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)).

706.3 JAIL COMMANDER RESPONSIBILITY
The Jail Commander or the authorized designee, in coordination with the Responsible Physician, is responsible for establishing written agreements with outside specialty health care services for emergency and urgent care that is not available within the facility. In addition, a plan shall be developed for the secure transportation of inmates to a facility where such care is available.

706.4 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).

706.5 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 Jail Commander should establish a written transportation procedure that ensures inmates are transported securely and in a timely manner for medical,
Referrals and Coordination of Specialty Care

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 Jail Commander or the authorized designee so that modifications may be made.

The jail 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 Jail Commander (15 CCR 1206(c); 15 CCR 1206(n)).
Emergency Health Care Services

708.1 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.

708.2 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.

708.3 PROCEDURES
The Jail 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.
Emergency Health Care Services

(i) The Jail 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 notifications will be made in accordance with the Inmate Death - Clinical Care Review Policy.

(j) Procedures to implement a program wherein staff may possess and administer epinephrine medication according to Health and Safety Code § 1797.197a and 22 CCR 100019, including the retention of related records pursuant to Business and Professions Code § 4119.4.

(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).

(l) 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.

708.4 EMERGENCY PROCEDURES
Lake County Health Services holds a contract with Wellpath which provides healthcare for correctional facilities. Wellpath is responsible for ensuring the following information, equipment and personnel are available in the event an inmate requires emergency treatment (Title 15 CCR § 1206(c)):

(a) A current list of names, addresses and phone numbers of all persons and agencies to be notified in an emergency. The list should be available to all health care 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, and there should be a back-up provider 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 use 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 health staff.

(g) Whenever possible, the on-call provider should be notified prior to transporting the inmate to the hospital. However, in the event of a life- or limb-threatening emergency,
Emergency Health Care Services

the inmate shall be sent to the hospital in the most expedient way possible, which may require notifying the provider after the inmate has been transported.

708.5 TRAINING
The Jail 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 Jail 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.
(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.

708.6 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.

708.7 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):
Emergency Health Care Services

(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.

   (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 health-trained custody staff.

(c) Inspections and testing of supplies and equipment are documented and maintained in accordance with established records retention schedules.
Health Care for Pregnant Inmates

710.1 PURPOSE AND SCOPE
The purpose of this policy is to establish prenatal and postpartum health care services for inmates 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 inmate pregnancies are classified as high-risk. This policy is intended to protect the health of the pregnant inmate and her fetus.

710.2 POLICY
It is the policy of this office that a qualified health care professional should provide comprehensive prenatal and postpartum care for all pregnant inmates during their incarceration, which includes but is not limited to the following:

- Pregnancy testing
- Prenatal care, both routine and high-risk if needed
- Management of drug or alcohol addicted pregnant inmates
- Comprehensive counseling and assistance services
- Nutrition modification for term of pregnancy and lactation
- Birthing in an appropriate setting
- Postpartum care
- Family planning education and services
- Access to privately funded pregnancy alternative options

A qualified health care professional shall provide counseling and information to pregnant inmates regarding planning for their unborn child (15 CCR 1206(f); Penal Code § 4023.5).

710.2.1 ADVISEMENT AND COUNSELING
Inmates who are pregnant shall be advised of the provisions of this policy manual, the Penal Code, and standards established by Board of State and Community Corrections related to pregnant inmates (Penal Code § 3407(e); 15 CCR 1058.5).

710.3 BOOKING - PREGNANCY SCREENING
When booking a female inmate, the following steps shall be taken:

(a) All females shall be asked if they are pregnant. If the inmate states she is pregnant, a confirming urine test should be performed within 48 hours and documented in the medical record.
Health Care for Pregnant Inmates

(b) Pregnant inmates who appear to be under the influence of or withdrawing from alcohol or other substances shall be referred to a qualified health care professional.

(c) The Responsible Physician, in collaboration with facility staff, shall ensure the appropriate clinic visits are scheduled.

(d) A medical record should be opened with a notation indicating pregnancy.

(e) The inmate 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, seizures, diabetes/DM, hypertension/HTN)
12. If recent heroin or methadone use is identified, notify the on-site or on-call physician for orders.

(f) Each pregnant inmate should have:

1. A completed medical recommendation form for a low bunk assignment, in a lower tier, with no waist chains, as appropriate.
2. A completed special diet form ordering a pregnant diet.
3. Prenatal vitamins prescribed at one per day for the duration of the pregnancy.
4. An appointment at the next available obstetric clinic if the inmate is 10 or more weeks gestation.
Health Care for Pregnant Inmates

710.4 COUNSELING AND TREATMENT
The Office will provide all necessary counseling and treatment to pregnant inmates 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 Jail Commander and Responsible Physician shall develop a process by which perceived conflicts between medical orders/recommendations and safety and security interests of the jail can be discussed and resolved. Ultimately, the jail must provide adequate treatment for an inmate’s medical needs.

(b) The Responsible Physician shall be consulted immediately if a patient is under 10 weeks gestation and has medical concerns.

(c) Any pregnant inmate 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 inmate shall be sent to the hospital for evaluation.

(d) The inmate 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

(e) Postpartum examinations and additional appointments shall be scheduled by the obstetric clinic as needed.

(f) Any female prisoner shall have the right to summon and receive the services of any physician and surgeon of her choice in order to determine whether she is pregnant. The Jail Commander may develop reasonable rules and regulations governing the conduct of such examinations. If found to be pregnant, the prisoner is entitled to determine the extent of medical services needed, from providers with valid license to practice medicine, as long as she is able to pay for the expense of the private services.
Health Care for Pregnant Inmates

The rights provided in this section shall be conspicuously posted in at least one place to which all female prisoners have access (Penal Code § 4023.6).

710.5 RESTRAINTS
Inmates 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.

710.5.1 REQUIRED PROCEDURES
The health authority shall, in cooperation with the Jail Commander, develop procedures in conformance with Penal Code § 3407 for the application and removal of restraints on pregnant inmates. The procedures shall be reviewed and updated at least every two years (15 CCR 1206).

710.6 ABORTIONS
Inmates who wish to terminate their pregnancy shall be referred to outside counseling services for further information regarding available options. The Office shall not impede the woman’s access to abortion counseling or services, and shall provide necessary transportation and supervision to such services. Any financial obligations will be the responsibility of the inmate. These rights will be posted in all areas that house female inmates (Penal Code § 4028).

710.6.1 STAFF INVOLVEMENT
Staff members who object to facilitating an inmate’s elective abortion (including arranging, transporting, security) should not be required to perform such duties.
Health Authority

714.1 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).

714.2 POLICY
The health authority is responsible and accountable for all levels of health care and has the final authority regarding clinical issues within this jail. 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.

Lake County Hill Road Correctional Facility Health Authority has been delegated to Wellpath, which provides healthcare services for inmates in the custody of the Sheriff; by contract with the Lake County Public Health Department.

714.3 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.
Health Authority

(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.

(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)).

714.4 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 Jail 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).

714.5 PSYCHOTROPIC MEDICATIONS FOR MINORS
The health authority, in cooperation with the mental health director and the Jail Commander, shall develop written policies and procedures governing the use of voluntary and involuntary psychotropic medications for minors that comply with 15 CCR 1125.
714.6  LACTATION PROGRAM
The health authority, in cooperation with the Jail 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).
Health Appraisals

716.1 PURPOSE AND SCOPE
The purpose of this policy is to establish the process for conducting health appraisals on all inmates following their arrival at this facility and for the continuity of care for inmates who remain in custody for extended periods. Further, it is to ensure the inmate’s health care needs are met and that health care started at one facility continues as needed.
Healthy Lifestyle Promotion

718.1 PURPOSE AND SCOPE
The purpose of this policy is to affirm the Office's commitment to promote healthy lifestyle choices by inmates by providing health education and inmate self-care learning opportunities that include classes, audio and video presentations and brochures and pamphlets.
Transfer Screening

720.1 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.

720.2 POLICY
It is the policy of this office that inmates who are transferred to another jail, 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)).

720.3 TRANSFERS
All inmates being transferred to another facility within the Lake County Sheriff's Office correctional system will be screened by Wellpath staff to determine if the intended transfer location is equipped to handle the patient's health care needs.

720.3.1 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.

720.4 RECEIVING TRANSFERRED INMATES
Any inmate being transferred to a custody facility outside the Lake County Sheriff's Office correctional system shall be medically screened as described above.

Completed discharge summaries shall accompany inmates being transferred to another office's jurisdiction to ensure that the receiving health care provider can assume and continue necessary care. A release of information authorization is not required.

The discharge summary and any related medical records being transferred shall be placed in a file or envelope that maintains the patient's confidentiality. The transporting personnel shall be provided written separate instructions regarding medication or health interventions, including necessary precautions that are required en route. The transporting personnel shall also document the transfer log with the date, time and name of the person receiving the inmate and medical records.
Medical Screening

722.1 PURPOSE AND SCOPE
The purpose of this policy is to establish a medical screening process for newly booked inmates so that medical, mental health and dental issues are properly identified and addressed, and to obtain a medical clearance when necessary.

722.2 POLICY
It is the policy of this office that a medical screening be performed on all inmates 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 inmates 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).

722.3 ELEMENTS OF MEDICAL SCREENING
The medical screening shall be performed by health services personnel. A review of any positive finding shall be performed by a qualified health care professional.

Regardless of training, no inmate should be allowed to conduct health care evaluations or provide treatment to any other inmate.

All inmates 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 he/she cooperates with the remainder of the screening process.

The Responsible Physician should work cooperatively with the Jail 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 inmate but prior to an inmate 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.

722.3.1 MEDICAL SCREENING INQUIRY
The medical screening inquiry should include a review of the inmate’s prior jail 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
Medical Screening

- 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
- Females 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

Qualified health care professionals should assist in developing specific mental health medical screening questions and should provide training in analyzing inmate 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 inmate, a qualified health care professional should initiate appropriate follow-up action, which may include transporting the inmate to an off-site medical facility.

722.3.2 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)
Medical Screening

- 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 Jail Commander and the Responsible Physician should develop a procedure through which it can be reliably determined what prescription medications the inmate is taking and the medical urgency for continuing those medications without interruption.

722.3.3 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 inmate's responses to questions asked by the interviewer
- Other individualized observations and recommendations

The initial medical screening should become part of the inmate's medical record and should be retained in accordance with established records retention schedules.

722.4 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
Medical Screening

- 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

Inmates 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 inmates 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 Jail Commander is responsible for notifying local police agencies and medical facilities of the jail admission refusal policy and the required clearance documentation.

Based upon the information obtained during the screening process, the medical classification disposition of the inmate 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

722.5 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 inmate’s health condition, an early health appraisal should be recommended. An inmate 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 inmate’s overall classification. Upon the identification of a mentally disordered inmate, a physician’s opinion will be secured within 24 hours, or next sick call, whichever is earliest (15 CCR 1052).

722.5.1 TELEHEALTH
Telehealth may be incorporated into procedures used to identify and evaluate inmates who have a mental disorder (15 CCR 1052).
Medical Screening

722.5.2 MEMBERS CONDUCTING HEALTH APPRAISALS
Medical screening should be completed by licensed health personnel, 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).
Mental Health Services

724.1 PURPOSE AND SCOPE
The purpose of this policy is to ensure that all inmates have access to mental health services and that inmates identified as needing these services are referred appropriately.

724.1.1 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.

724.2 POLICY
It is the policy of this office that a range of mental health services shall be available for any inmate who requires them (15 CCR 1206(g); 15 CCR 1207; 15 CCR 1209).

724.3 MENTAL HEALTH SERVICES
The Jail Commander should collaborate with the local public and private organizations that offer mental health services, treatment, and care to those inmates in need of such services.

In coordination with the health authority, Responsible Physician, and Jail Commander, such services shall include but are not limited to (15 CCR 1209):

- Identification and referral of inmates 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 inmates as clinically indicated.
- Medication support services.
- Suicide prevention.
- Referral, transportation, and admission to licensed mental health facilities for inmates 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.
### 724.4 BASIC MENTAL HEALTH SERVICES

Inmates 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 inmate has received previous mental health treatment, the inmate should be asked to complete a release of information form so his/her treatment records can be obtained.

(b) Inmates 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) Inmates 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) Inmates who are suspected or known to be developmentally disabled 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 inmate is suspected or confirmed to be developmentally disabled. Inmates who are developmentally disabled should be referred, where appropriate and available, for placement in non-correctional facilities or in units specifically designated for housing the developmentally disabled (15 CCR 1057).

(e) Inmates 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 inmate to establish his/her consent to treatment. The signed forms should be placed in the inmate’s health record and retained in accordance with established records retention schedules.

(f) A treatment plan should be established for all inmates enrolled in mental health services.

1. Psychiatric and special needs treatment plans shall be reviewed every 180 days, at a minimum. Inmates taking psychotropic medication should be seen by a psychiatrist at least every 90 days. Inmates classified as requiring mental health special needs should be seen at least monthly by a qualified health care professional.
Mental Health Services

2. Inmates enrolled in other ongoing forms of mental health treatment should have treatment plan updates completed every six months, at a minimum.

3. Inmates 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 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 inmate'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 inmates who present with a risk of self-harm.

1. Qualified health care professionals should be assigned to daily rounds in the segregation unit to determine the mental health status of inmates housed there.

2. Segregated inmates may be referred by the jail 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 inmate housed in the facility, the health authority shall be notified and the Responsible Physician shall be the decision-maker regarding the health care needs of the inmate.

1. The Responsible Physician may consult with a psychiatrist, specialist or other health care service in determining whether the inmate should be transferred to a facility that is better equipped to handle the inmate's psychiatric needs.

2. The Responsible Physician should notify the Jail Commander of the request to transfer the inmate for medical treatment.

3. The case review and disposition of the patient should be documented in the inmate's health record and retained in accordance with established records retention schedules.

Inmates 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

726.1 PURPOSE AND SCOPE
The purpose of this policy is to establish the process by which all inmates receive an initial mental health screening by qualified mental health care personnel. Lake County Health Services holds a contract with Wellpath which provides healthcare for correctional facilities including Mental Health Screening and Evaluation.

726.2 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)).

726.3 MENTAL HEALTH SCREENING
An initial receiving screening shall be performed on inmates by Wellpath personnel upon arrival at the facility. This is 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 the general population and should include:

(a) Inquiry into whether the inmate:
1. Has a present suicidal ideation.
2. Has a history of suicidal behavior.
3. Is presently prescribed or is taking psychotropic medication.
4. Has a current mental health complaint.
5. Is being treated for mental health problems.

(b) Observation of:
1. General appearance and behavior.
2. Evidence of abuse and/or trauma.
3. Current symptoms of psychosis, depression, anxiety and/or aggression.

(c) Disposition of the inmate:
1. Cleared for general population
2. Cleared for general population with appropriate referral to mental health services
3. Referral to appropriate mental health care service for emergency treatment
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.

726.4 MENTAL HEALTH APPRAISAL
Lake County Health Services holds a contract with Wellpath which provides healthcare for correctional facilities. Wellpath conducts all Mental Health Appraisals.
Special Needs Medical Treatment

728.1 PURPOSE AND SCOPE
Lake County Health Services holds a contract with Wellpath which provides healthcare for correctional facilities. Wellpath determines 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 health care providers and custodial personnel.

728.1.1 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.

728.2 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 Jail 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)).

728.3 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
Special Needs Medical Treatment

- Communicable diseases
- 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

728.4 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.

728.5 CHRONIC CARE PROGRAM
Special Needs Medical Treatment

(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.

2. A special needs communication form should be completed and sent to the classification unit, the Shift Supervisor and the housing deputy 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 Jail 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.

1. 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) 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 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.

(h) Inmates identified as developmentally disabled shall be considered for discharge planning services.
   1. The local center for the developmentally disabled will be contacted within 24 hours of incarceration of an inmate suspected to be developmentally disabled.
   2. Referrals will be made to the jail's discharge planning specialist. If no such position exists, the need for transition planning should be noted on the treatment plan.

(i) 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.
   3. 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.

(j) Contacts with community providers should be documented via an administrative note in the patient's health record.

(k) 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.

(l) Medications should be provided as appropriate.

(m) The Responsible Physician is responsible for ensuring that local site-specific procedures facilitate discharge planning.
Communicable Diseases

730.1 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.

730.1.1 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
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.

730.1.2 TRANSMISSION OF INFECTIOUS DISEASES
Transmission of any infectious disease requires the presence of five factors
Communicable Diseases

- **Infectious agent**, a microscopic organism such as a virus or bacterium usually found in an infected person.
- **Exit** of the infectious agent through the blood or other body fluids, or with airborne droplets of the infectious agent.
- **Contact** by a person with contaminated blood or other body fluids or with airborne droplets of an infectious agent.
- **Entry** into the person’s body through a needle stick, or contact with the person’s mouth, nose or eyes, through respiration or by other means.
- **Susceptibility**, or the person’s lack of protection from the infection; e.g., a person not vaccinated against the agent.

730.2 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 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)).

730.2.1 EXPOSURE CONTROL OFFICER
The Jail Commander shall designate an Exposure Control Officer (ECO) 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 Jail 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 ECO and the affected employees to ensure that the proper procedures are followed.

730.2.2 PROCEDURES
The ECO shall be responsible for establishing, implementing and maintaining effective written procedures for the following:
Communicable Diseases

(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.

(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.

(k) Establishing procedures to ensure that members request exposure notification from health facilities after potential exposure to a person who may have a communicable disease who has been transported to a health facility and that the member is notified of any exposure as required by Health and Safety Code § 1797.188.

(l) Informing members of the provisions of Health and Safety Code § 1797.188 (exposure to communicable diseases and notification).

(m) Acting as the designated officer liaison with health care facilities regarding communicable disease or condition exposure notification. The designated officer should coordinate with other office members to fulfill the role when not available. The designated officer shall ensure that the name, title and telephone number of the designated officer is posted on the office website (Health and Safety Code § 1797.188).

730.3 COMMUNICABLE DISEASE PROGRAM COMPONENTS
730.3.1 SURVEILLANCE
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 Jail 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 Jail 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.

730.3.2 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)).

730.3.3 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)).
Communicable Diseases

(a) The Responsible Physician and the Jail Commander shall collaborate on treatment planning with the public health department, as appropriate.

(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.

730.3.4 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 Jail Commander shall be kept informed of any incidence of communicable disease.

(c) The Jail Commander shall be apprised of any medical situation that raises the risk of disease level for inmates, deputies or any other staff members.

730.3.5 CONTINUOUS QUALITY IMPROVEMENT
A continuous quality improvement (CQI) committee shall be formed consisting of the Responsible Physician, the Jail 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.

730.3.6 EMPLOYEE TRAINING
The Training Manager shall ensure that all correctional staff who have contact with infected inmates will receive the necessary training during the initial employee orientation and annually thereafter. The Training Manager shall schedule this training and shall retain all associated records in accordance with established records retention schedules.

730.3.7 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.).
Communicable Diseases

730.3.8 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 authority shall be responsible for establishing basic guidelines including, but not limited to (15 CCR 1206.5(b)(4)):

- 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.

730.3.9 TRANSMISSION-BASED PRECAUTIONS
Lake County Health Services holds a contract with Wellpath which provides healthcare for correctional facilities. Wellpath will determine if 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).
Communicable Diseases

1. Health care workers and other facility 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.

(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:

1. Antibiotic-resistant bacteria
2. Hepatitis A
3. 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 will be provided with appropriate barrier devices.

Precautions for Inmate Contact and Transportation

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730.3.10 ENVIRONMENTAL HEALTH AND SAFETY
Wellpath 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.
Communicable Diseases

730.3.11 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 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.

730.4 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.

1. 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.

2. 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:
Communicable Diseases

(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.

(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.

    3. 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.

730.5 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.

730.5.1 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.

730.5.2 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 replaced immediately after each use and when it becomes damaged.

730.5.3 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.

730.5.4 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.
Communicable Diseases

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.

730.5.5 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 ECO. The ECO 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.

730.5.6 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.

730.5.7 DECONTAMINATION OF THE CLEANING AREA
The ECO 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.

730.6 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.
730.6.1 CRITERIA FOR EVALUATING EXPOSURE

(a) Use the following questions as guidelines for determining exposure

1. Is the substance with which the person had contact one of the following
   (a) Blood
   (b) Semen
   (c) Vaginal secretions
   (d) Body tissue
   (e) Any blood related fluids (cerebrospinal fluid, synovial fluid, pleural blood, peritoneal fluid, pericardial fluid, breast milk, amniotic fluid or any other fluid containing blood; e.g. vomit or saliva mixed with blood).

2. Did the fluid or substance (identified in question #1 above, enter the body through any of the following 'portals of entry'? 
   (a) Needle stick injury
   (b) Laceration e.g. with broken glass, razor blade, or other sharp object.
   (c) Open cut, wound, oozing (weeping) lesion i.e. non-intact skin
   (d) Contact with eyes, mouth, nose, genitals, or anus (mucous membranes).

(b) If the answers to both 1 and 2 are yes, the person did sustain an exposure. If the answer to either 1 or 2 is no, an exposure did not occur.

Concerning HIV, saliva is considered a lower risk body fluid; however, HIV has been detected in saliva in small quantities. It may be impossible to visualize small quantities of blood that may be mixed in saliva or vomit. Therefore, any body fluid should be considered hazardous, and every exposure should be evaluated by competent medical personnel or persons trained in evaluating exposures to blood or body fluids. If in doubt about an exposure, consult with the County Health Department or Wellpath staff at the Correctional Facility.

730.6.2 EMPLOYEE RESPONSIBILITY

• File a Worker’s Compensation Report
• Insure that a LCSO Crime/Incident Report is written on the incident
• File a Department Exposure Report Form

730.7 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.

730.7.1 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)).

730.7.2 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 ECO 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.

730.7.3 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 ECO 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:

• 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.
Communicable Diseases

• 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.

730.7.4 COUNSELING
The Office shall provide the exposed employee (and his/her family if necessary) the opportunity for counseling and consultation.

730.7.5 CONFIDENTIALITY OF REPORTS
Most of the information involved in this process must remain confidential. The ECO shall ensure that all records and reports are kept in the strictest confidence. The ECO shall be responsible for maintaining records containing the employee’s treatment status and the results of examinations, medical testing and follow-up procedures.

The Office’s risk manager 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)).

730.7.6 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 ECO 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.
(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.
Communicable Diseases

(e) Under certain circumstances, a court may issue a search warrant for testing an adult when an employee of the Lake County Sheriff's Office qualifies as a crime victim.

730.7.7 EXPOSURE FROM A NON-INMATE
Upon notification of an employee's exposure to a non-inmate (e.g., visitor, attorney, volunteer, vendor) the ECO 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 ECO 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 ECO should promptly consult with the County Counsel and consider requesting that a court order be sought for appropriate testing.

730.7.8 EXPOSURE FROM AN INMATE
If the ECO 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.

Since there is potential for overlap between the two statutory schemes, the ECO 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 ECO should seek consent or a court order in the same manner as for a non-inmate.

730.8 SUPERVISOR'S RESPONSIBILITIES
When a supervisor is made aware of a suspected infectious disease exposure, he or she will be sure to do the following:
Communicable Diseases

- Ensure that the employee receives appropriate first aid care.
- Ensure that the employee disinfects the contaminated area.
- Ensure that the contaminated equipment, work area, etc. is disinfected.
- Evaluate the incident and determine if an exposure has occurred. (If in doubt, call Wellpath staff, who will alert the County Health Department or refer the employee to the emergency room.)
- Ensure that a copy of Exposure Form is forwarded to the Jail Commander.

If an exposure occurred, whether or not it is know if his or her body fluid is contaminated, treat the event as if it is an emergency. Because this is an emergency Wellpath should not hesitate to contact the local emergency room.
Aids to Impairment

732.1 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 Lake 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.

732.1.1 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.

732.2 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).

732.3 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 Jail Commander. If the Jail 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 Jail Commander may remove the device and place it in the inmate’s property.

(c) The Jail Commander shall return the device to the inmate if circumstances change and the cause for removal no longer exists.

(d) The Jail Commander shall have the inmate examined by a physician within 24 hours after a device is removed.

(e) The Jail 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 Jail Commander if the removal is or will be injurious to the health or safety of the inmate. When the Jail Commander is so informed but still does not return the device, the Jail 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 Jail Commander shall promptly file the form with the Superior Court after it is signed by the inmate. The Jail Commander should consider the following alternatives to removal of the device:

1. Reclassifying the inmate to another housing unit or administratively segregating the inmate from the general population.
2. 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 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.

732.4 REQUESTS FOR MEDICAL AND DENTAL PROSTHESES
All requests for new or replacement medical or dental prostheses shall be individually evaluated and approved by Wellpath staff or dentist. Considerations for approval shall be based upon:

- Medical needs of the inmate.
- The anticipated length of incarceration.
- The safety and security of the facility.
Detoxification and Withdrawal

734.1 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.

734.1.1 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.

734.2 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 Physician 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).

734.3 STAFF RESPONSIBILITY
Wellpath 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 promptly notify the Shift Supervisor, who shall ensure that the appropriate medical staff is notified.
734.4 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.

734.5 PROCEDURE
Inmates who are observed experiencing severe, life-threatening intoxication (overdose) or withdrawal symptoms will be promptly seen by a Wellpath staff member and possibly 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 Wellpath medical personnel determine 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.

734.6 WITHDRAWAL AND DETOXIFICATION PROTOCOLS
Protocols are available to nursing staff 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 and/or the health authority, fall within nationally accepted guidelines and are reviewed annually.

When dealing with inmates who are in a custody situation, nursing personnel 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 nursing supervisors, medical providers and the chief medical officer. Registered nurses shall evaluate and provide care to patients utilizing written procedures and/or physician orders.

734.7 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.

<table>
<thead>
<tr>
<th></th>
<th>MILD</th>
<th>MODERATE</th>
<th>SEVERE (Delirium Tremens)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ANXIETY</td>
<td>Mild restlessness and anxiety</td>
<td>Obvious motor restlessness</td>
<td>Extreme restlessness and agitation with appearance of intense fear is common</td>
</tr>
<tr>
<td>APPETITE</td>
<td>Impaired appetite</td>
<td>Marked anorexia</td>
<td>Often rejects all food and fluid except alcohol</td>
</tr>
</tbody>
</table>
Detoxification and Withdrawal

<table>
<thead>
<tr>
<th></th>
<th>Normal or slightly elevated systolic</th>
<th>Usually elevated systolic</th>
<th>Elevated systolic and diastolic</th>
</tr>
</thead>
<tbody>
<tr>
<td>BLOOD PRESSURE</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CONFUSION</td>
<td>Oriented, no confusion</td>
<td>Variable confusion</td>
<td>Marked confusion and disorientation</td>
</tr>
<tr>
<td>CONVULSIONS</td>
<td>No</td>
<td>May occur</td>
<td>Severe convulsions are common</td>
</tr>
<tr>
<td>HALLUCINATIONS</td>
<td>No hallucinations</td>
<td>Often vague, transient, visual and auditory hallucinations and delusions, often with insight, often occurring only at night</td>
<td>Visual and occasional auditory hallucinations, usually of fearful or threatening content. Misidentification of persons and frightening delusions relating to hallucinatory experiences</td>
</tr>
<tr>
<td>MOTOR CONTROL</td>
<td>Inner &quot;shaky&quot;</td>
<td>Visible tremulousness</td>
<td>Gross uncontrollable shaking</td>
</tr>
<tr>
<td>NAUSEA</td>
<td>Nausea</td>
<td>Nausea and vomiting</td>
<td>Dry heaves and vomiting</td>
</tr>
<tr>
<td>PULSE</td>
<td>Tachycardia</td>
<td>Pulse 100-120</td>
<td>Pulse 120-140</td>
</tr>
<tr>
<td>SLEEP</td>
<td>Marked insomnia and nightmares</td>
<td>Total wakefulness</td>
<td></td>
</tr>
<tr>
<td>SWEATING</td>
<td>Restless sleep or insomnia</td>
<td>Obvious</td>
<td>Extreme</td>
</tr>
</tbody>
</table>
Clinical Performance Enhancement

738.1 PURPOSE AND SCOPE
This office recognizes the importance of ensuring that primary care personnel are competent in their clinical skills and that the clinical performance enhancement review addresses areas in need of improvement.

738.1.1 DEFINITIONS
Definitions related to this policy include:

Clinical performance enhancement review - The process of having a qualified health care professional's work reviewed by another professional (peer review) of at least equal training in the same general discipline, e.g., review of the facility's physicians by the Responsible Physician.

Independent review - The assessment of a qualified health care professional's compliance with discipline-specific and community standards. The review is an analysis of a practitioner's clinical practice. This review may be conducted by someone who may or may not be directly employed by the institution. However, if the review was prompted by an inmate complaint, the reviewing practitioner must not have been previously involved in the care of that inmate.

738.2 POLICY
It is the policy of this office to conduct a biannual peer review of all qualified health care professionals. The clinical performance enhancement review process is neither an annual performance review nor a clinical case conference process. It is a professional review focused on the qualified health care professional's clinical skills. Its purpose is to enhance competence and address areas in need of improvement.

An immediate peer review may be authorized by the Responsible Physician if serious problems of practice arise with a specific qualified health care professional.

738.3 COMPONENTS OF THE CLINICAL PERFORMANCE ENHANCEMENT
The clinical performance enhancement review process is to be conducted biannually on all qualified health care professionals. The result of these reviews shall be kept confidential. Documentation from the review shall include:

- Name of the individual being reviewed.
- Date of the review.
- Name and credentials of the reviewer.
- Confirmation that the review was shared with the qualified health care professional.
- Summary of findings and corrective action, if any.

If a clinical performance enhancement review identifies a serious concern, the Responsible Physician shall implement an independent review by someone who is not directly employed by
this office. The result of this review shall be shared with the appropriate health care service by the Responsible Physician, and a plan of correction shall be implemented.

The Responsible Physician will keep a log of clinical performance enhancement reviews of all qualified health care professionals to ensure compliance with this policy.

738.4 HEALTH CARE COMPLAINTS
The Jail Commander, in cooperation with the Responsible Physician, shall be responsible for developing and implementing a process by which inmates may submit complaints about the health care services they have received. There shall also be a means of collecting and analyzing the observations of other qualified health care professionals, correctional staff or other nonmedical staff regarding the delivery of health care services.

The Responsible Physician shall convene a panel of independent physicians to review the practice of the physician about whom complaints or observations have been made. The Responsible Physician shall take appropriate action at the recommendation of the panel.

738.5 RECORDS
All clinical performance enhancement review reports and complaint investigations shall be considered confidential. The contents of such files shall not be revealed to other than the involved employee or authorized personnel, except pursuant to lawful process or as otherwise authorized or required by statute.
Clinical Decisions

740.1 PURPOSE AND SCOPE
This policy recognizes that a coordinated effort between the Responsible Physician and the Jail 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.

740.1.1 DEFINITIONS
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.

Qualified health care professionals - Physicians, physician assistants, nurses, nurse practitioners, dentists, mental health professionals and others who, by virtue of their education, credentials and experience, are permitted by law to evaluate and care for patients.

740.2 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 Physician shall be responsible for arranging for appropriate health resources and for determining what services are needed. The Jail 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)).

740.3 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.

740.4 PROBLEM RESOLUTION
Any issues arising because of the clinical decision process shall be reviewed under the provisions of the Continuous Quality Improvement Policy using medical records, grievances, staff complaints and any other relevant data.
Health-Trained Staff

742.1 DUTIES OF THE HEALTH-TRAINED STAFF
The County of Lake has contracted with Wellpath to provide all medical services to inmates within the Lake County Jail. Designated health-trained staff shall be responsible for:

- Reviewing the screening forms completed during the booking process for any follow-up care needed.
- Managing triage of health care requests.
- Preparing inmates and their medical records for sick call.
- Assisting with the implementation of orders regarding diets, housing and work assignments.

742.2 UNREASONABLE BARRIERS
No member of the Lake County Sheriff's Office correctional facility shall create unreasonable barriers to an inmate’s access to health care services. The following are examples of conduct that are likely to create unreasonable barriers and are prohibited:

(a) Punishing inmates for seeking care for their serious health needs.
(b) Deterring inmates from seeking care for their serious health needs by scheduling sick call at unreasonable times.

742.3 PURPOSE AND SCOPE
The purpose of this policy is to establish a process for inmates to access 24–hour health care services in the event that a qualified health care professional is not on-site.

742.4 POLICY
It is the policy of this office that a designated health-trained staff member shall be responsible for coordinating the delivery of health care services in the facility any time that qualified health care professionals are not available on-site (15 CCR 1028).
Licensure, Certification, and Registration Requirements

744.1 PURPOSE AND SCOPE
The purpose of this policy is to recognize that inmates are entitled to health care services that are provided by qualified health care professionals working within the scope of their respective licensure, certification, registration, and training. This policy also establishes a credentials verification process.

744.2 POLICY
It is the policy of this office that all qualified health care professionals who provide health care services to inmates meet the same standards as those working in the community, including required licenses, certifications, and restrictions, including those defining the recognized scope of practice specific to the profession (15 CCR 1203). Job descriptions shall include minimum qualifications and specific duties and responsibilities, and shall be approved by the Responsible Physician.

The current credentials and job descriptions for all qualified health care professionals are on file at the facility and retained in accordance with established records retention schedules.

Any health care provided to inmates at the facility that is not provided by a physician is provided in accordance with a standing order or direct order issued by personnel qualified under governing laws to give such orders (15 CCR 1203; 15 CCR 1204).

744.3 CREDENTIALING AND FILE MAINTENANCE
A completed file of current licenses, certifications, registration, reference checks and applications shall be maintained by Wellpath or the authorized designee at this facility.

(a) The Responsible Physician or the authorized designee should obtain confirmation of current licensure, certification and registration prior to making any offer of employment.

(b) Inquiries into any sanctions or disciplinary actions of state boards, employers and the U.S. Department of Health and Human Services’ National Practitioner Data Bank should be conducted prior to making any offer of employment.

(c) Individuals should be required to pass a job related pre-employment background investigation. Employment references may be obtained via mail or over the telephone with documentation.

(d) Each employee should be held responsible for providing renewal verification of licenses, certificates and registration prior to the expiration date.

(e) Any group or individual providing health care services must complete the credentialing process that is appropriate for their profession and must provide the facility a copy of current licensure and, when appropriate, a Drug Enforcement Administration certificate to prescribe controlled substances.
**Licensure, Certification, and Registration Requirements**

(f) To be eligible for hire, all clinical health care personnel must possess and maintain a current CPR certification and provide documentation to the Responsible Physician or the authorized designee.

744.4 STUDENTS AND/OR INTERNS
If the health care services provided to an inmate are performed by any intern, resident or student who is authorized to provide specific health care services as part of a formal medical training program, the individuals in training will work under the control and supervision of a qualified health care professional. Assigned tasks shall be commensurate with the intern, student or resident's level of training.

There shall be a written agreement between the facility and the entity sponsoring the training program that covers the scope of work, duration of the agreement and any legal or liability issues.

Any student, intern or resident working in the facility shall participate in a facility orientation that includes, but is not limited to, topics such as fire safety, facility security, items considered contraband and inmate culture.

All students, interns or residents shall be required to agree in writing to abide by all facility policies, including those relating to hostages, facility security and the confidentiality of information.

All training provided, written agreements and/or contracts shall be maintained in the intern, resident or student's file by the Responsible Physician or the authorized designee in accordance with established records retention schedules.
Inmate Assistants

746.1 PURPOSE AND SCOPE
Lake County Health Services holds a contract with Wellpath which provides healthcare for correctional facilities. Wellpath is to recognize the value of inmate assistants and establish parameters for their appropriate use in the provision of health care services.

There are NO Health Inmate Assistants at the Hill Road Correctional Facility.

746.2 POLICY
It is the policy of this office that all inmate assistants shall be under direct supervision and used in a manner that does not give them control or authority over other inmates, access to confidential medical information, or authority to make treatment decisions or provide patient care. Inmate assistants shall not be used as a substitute for qualified health care professionals.

746.3 INMATE ASSISTANTS
Inmates who have received appropriate training may perform limited duties involving assistance to other inmates however, only while under the direct supervision of qualified health care professionals. The duties that inmate assistants may perform include the following:

- Peer support and education
- Emotional support activities for inmates who are ill
- Assisting disabled inmates with of daily living activities such as providing escort assistance or assistance with bathing and dressing to inmates who are blind or physically disabled
- When qualified and properly trained and when participating in a formal suicide prevention plan, inmate assistants may serve as a companion to other inmates who are at risk of suicide

746.4 TRAINING
Inmate assistants assigned to health care services shall receive education and training specific to their anticipated duties to ensure that they understand and can perform their duties in a safe and lawful manner.
Suicide Prevention and Intervention

748.1 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 inmates 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 inmate's unspoken indications that suicide is being considered. The three key components of this plan are evaluation, training, and screening with intervention.

748.2 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 inmates who are at risk of suicide and to intervene appropriately whenever possible. The program shall be developed by the Jail Commander and the Responsible Physician, approved by the local public health entity, and reviewed annually by the Jail 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).

748.3 SUICIDE PREVENTION TEAM
The Jail 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 Jail 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 inmate 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 inmate/management team meetings. If physical modifications are recommended, the team shall ensure the Jail Commander is promptly notified.

It shall also be the responsibility of the suicide prevention team to coordinate with the Training Manager to ensure that suicide prevention training is provided in compliance with applicable statutes and standards.
Suicide Prevention and Intervention

748.4 STAFF TRAINING
All facility staff members who are responsible for supervising inmates shall receive initial and annual training on suicide risk identification, prevention, and intervention, to include, at minimum (15 CCR 1030):

- 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 inmates.
- Communication between corrections and health care personnel.
- Using referral procedures.
- Housing observation and suicide watch-level procedures.
- Follow-up monitoring of inmates who attempt suicide.
- Communication between members and arresting/transporting deputies.

Recommendations for modification to suicide training should be directed to the Jail Commander, who shall review the recommendations and approve, if appropriate.

748.5 SCREENING AND INTERVENTION
All inmates 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 inmates at risk for suicide. Upon an inmate entering the facility, he/she should be assessed by custody staff for the ability to answer medical and mental health screening questions.

Any inmate 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. Inmates 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 inmate who is at risk for suicide to classification, health services, and mental health services. The inmate shall remain under direct and constant observation in a safe setting until designated staff makes appropriate health care and housing decisions (15 CCR 1030).

748.6 SUICIDE WATCH
Inmates 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 not present in the jail, the Shift Supervisor may make the decision to place an inmate on suicide watch but should
notify a qualified health care professional as soon as practicable. Inmates 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 inmate, the staff should carefully inspect the cell for objects that may pose a threat to the inmate's safety.

Qualified health care professionals are primarily responsible for the treatment of inmates on suicide watch. Deputies and general employees are responsible for the physical safety of inmates. All staff members should coordinate their efforts to ensure that inmates do not have the means or the opportunity to injure themselves.

An observation log shall be maintained for each inmate on suicide watch. A staff member shall be designated to make a direct visual observation of the inmate twice every 30 minutes at approximately 15-minute intervals. A Shift Supervisor and a qualified health care professional, if available, must observe the inmate at least once every five hours. Each staff member who is required to observe the inmate shall make notations in the observation log documenting the time of observation and a brief description of the inmate's behavior.

An inmate 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 inmates should be readily identifiable in a manner discernible by staff. When standard-issue clothing presents a security or medical risk to the inmate or others, the inmate shall be supplied with a security garment that is designed to promote inmate safety and not cause unnecessary humiliation and degradation. Use of the security garment shall be documented in the inmate's health record. Suicidal inmates 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 or sheets). Inmates 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.

Inmates 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.

**748.6.1 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 should take reasonable and appropriate precautions to mitigate the ability of the inmate to injure him/herself, and should consider establishing and maintaining a non-threatening conversation with the inmate while awaiting assistance. If a qualified health care professional is not immediately
available, the inmate 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).

748.6.2 NOTIFICATION
In the event of an attempted or completed suicide, the Jail Commander should be promptly notified. The Jail Commander should notify the Sheriff.

The location where a suicide or attempted suicide has occurred should be treated as a crime scene after the inmate 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 inmate 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).

748.7 FOLLOW-UP
Qualified health care professionals should evaluate any inmate 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 inmate on suicide watch. Only a qualified health care professional may remove an inmate from suicide watch.

All changes in inmate status should be reported to the qualified health care professional to ensure the inmate receives appropriate care. The inmate'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 inmates after release must also be considered. Inmates who are at risk for suicide should work with local or area mental health resources and inmate families after release. A deputy should complete the necessary application, documenting the reasons why the inmate is believed to be suicidal. The completed application should accompany the released inmate to the designated facility.

748.7.1 DEBRIEFING
Any suicide attempt or death of an inmate or on-site staff member requires a staff debriefing. Information will be communicated to the oncoming Shift Supervisor and staff to apprise them of
Suicide Prevention and Intervention

the incident and the actions taken with regard to the incident. Such debriefing will be appropriately documented and shall be reviewed by administration, security and the Responsible Physician.

748.8 TRANSPORTATION
Inmates 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 inmates 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 inmate'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

750.1 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.

750.1.1 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.

**Psychological autopsy** - A written reconstruction of an inmate’s life with an emphasis on factors that may have contributed to his/her death. This is sometimes referred to as a psychological reconstruction and is usually conducted by a psychologist or other qualified mental health care professional.

750.2 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)).

750.3 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 Jail Commander or the authorized designee at the time of death.

The Responsible Physician should also be notified and should coordinate with the Jail 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.
750.4 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. Written documentation should include, but is not limited to, the time of death, the preceding circumstances surrounding the death, nature of the death, treatment rendered and who was notified of the death and by whom.

The Responsible Physician should initiate a death report and document it in accordance with the Continuous Quality Improvement Policy.

750.5 CLOSING THE MEDICAL RECORD
The Responsible Physician 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 Physician.

(b) Send the copy to the facility for inclusion into the inmate file and retain in accordance with established records retention schedules.

750.6 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 Physician containing:

(a) The inmate’s known mental health history.

(b) The most recent known mental health treatment.

(c) All known circumstances surrounding the suicide.

A psychological autopsy should be conducted by a qualified mental health care professional if the cause of death is determined to be a suicide.

The initial CMR should be conducted by the Responsible Physician and, if available, a mental health care professional. The CMR should be finalized within 30 days by the Responsible Physician. The findings should be shared with the treating staff.

750.7 DEATH REVIEW
All deaths should be reviewed within 30 days. The review shall consist of an administrative review, a CMR and a psychological autopsy 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

752.1 PURPOSE AND SCOPE
Lake County Health Services holds a contract with Wellpath which provides healthcare for correctional facilities. Wellpath establishes 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.

752.1.1 DEFINITIONS
Definitions related to this policy include:

Nursing assessment protocols - Written instructions or guidelines that specify the steps to be taken in evaluating an inmate's health status and providing medical treatment. Protocols may include first-aid procedures for the identification and care of ailments that ordinarily would be treated with over-the-counter (OTC) medication or through self-care. These protocols also may address more serious symptoms, such as chest pain, shortness of breath or intoxication. The protocols provide a sequence of steps to evaluate and stabilize an inmate until a qualified health care professional is contacted and orders for further care are received.

752.2 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 Physician.

752.3 PROTOCOL DEVELOPMENT AND AUTHORIZATION
The facility's Responsible Physician 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 Physician.

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 Physician shall review the nursing assessment annually, revising as necessary and dating and signing approved protocols (15 CCR 1204).

752.4 TRAINING
Nurses will be trained and approved in the nursing assessment protocols prior to their use. The training shall be documented and should include:

(a) Evidence that new nurses have been trained.
(b) Demonstration of knowledge and skills.
Nursing Assessment Protocols

(c) Evidence of annual review of skills.

(d) Evidence of retraining when protocols are introduced or revised.

752.5 AUTHORIZED USE OF PROTOCOLS

Nursing staff may use a nursing assessment protocol only after they have been trained and authorized by the Responsible Physician. Nursing assessment protocols shall only be used after a nurse fully evaluates the inmate's complaint and the inmate's condition meets the appropriate criteria.

Inmates may only be treated using a nursing protocol for the same condition on two consecutive visits. If the inmate requests service for the same condition a third time, the inmate should be referred to a physician's assistant, nurse practitioner, registered nurse or physician.

The assessment protocols only include the use of OTC medication. When OTCs are administered per the protocol, they do not require the signature of a physician. However, the order and the administration of the medication shall be documented on the medication administration record.

A registered nurse (RN) is considered the minimum certification level required to independently initiate medical treatment. The RN must be present to physically assess the inmate; an assessment cannot be done via telephone or electronically.

Licensed vocational nurses (LVNs) are generally prohibited from independently initiating any standardized protocol. Under very specific circumstances (e.g., early detoxification, a history of a seizure disorder), it may be acceptable for an LVN to initiate a standing order following a telephone consultation with a physician, physician's assistant, psychiatrist, dentist or other person who meets the minimum certification level to initiate such orders. Under these circumstances, it is essential that the inmate be personally evaluated within 24 hours by a physician's assistant, nurse practitioner, registered nurse or physician.

Nursing assessment protocols shall not include the administration of any prescription medication, with the exception of protocols addressing an emergency or a life-threatening situation. Treatment with prescription medication may only be initiated upon a written or verbal order from a physician, physician's assistant, psychiatrist, dentist or other person who is licensed to dispense medication in the state, either independently or under the supervision of a physician.
Infirmary Care

754.1 PURPOSE AND SCOPE
Lake County Health Services holds a contract with the Wellpath which provides healthcare for correctional facilities. Wellpath 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 the purpose of providing medical care in close proximity to health care professionals.

754.1.1 DEFINITIONS
Definitions related to this policy include:

Infirmary - An area specifically designed and operated for providing medical care to inmates who need skilled nursing care for a period of 24 hours or more. It is expressly intended for inmates who do not need hospitalization or placement in a licensed nursing facility, but whose care cannot be managed safely in an outpatient setting. It is not the area itself but the scope of care provided that makes the bed an infirmary bed.

Infirmary care - Care provided to patients with an illness or diagnosis that requires daily monitoring, medication and/or therapy, or assistance with daily activities at a level requiring skilled nursing intervention.

Within sight or sound of a qualified health care professional - The patient can gain the professional's attention through visual or auditory signals.

754.2 POLICY
It is the policy of this office that infirmary care is provided when appropriate to meet the serious medical needs of inmates. The Responsible Physician shall be responsible for developing and maintaining an infirmary manual, that shall be available in the infirmary. The infirmary manual shall include, but is not limited to:

• Nursing care procedures.
• A definition of the scope of infirmary care services available.
• Provisions for a physician to be on-call or available 24 hours a day.
• Guidelines regarding the availability of health care personnel, who shall be on-duty 24 hours a day when inmates are present and shall have access to a physician or registered nurse.
• Provisions ensuring that all inmates are within sight or sound of a staff member.
• Provisions for an infirmary record that is separate from the complete medical record of the inmate.
• Requirements for compliance with applicable state statues and local licensing.
Infirmary Care

Admission to and discharge from the infirmary 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.

754.3 DOCUMENTATION REQUIREMENTS FOR INFIRMARY PATIENTS
A complete inpatient health record shall be kept for each inmate housed in the infirmary 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.

754.4 INFIRMARY REQUIREMENTS
The Lake County Hill Road Facility currently does not have an infirmary; however, if an inmate is in need of care that cannot be met at the jail and is deemed necessary by medical than the inmate will be sent to a facility that can meet there medical need.
Medical Equipment and Supply Control

756.1 PURPOSE AND SCOPE
Wellpath 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.

756.2 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.

756.3 STAFF RESPONSIBILITIES
It is the responsibility of the Jail 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 Physician 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 Jail Commander with a complete report.
Continuation of Care

758.1  PURPOSE AND SCOPE
Wellpath establishes and maintains a proactive health system in the facility that fosters a continuity of health care on- and off-site, in accordance with community standards of care. The sole objective is to maintain or improve the health of the inmates. This policy is intended to ensure that patients receive health services in keeping with current community standards as ordered by clinicians.

758.2  POLICY
It is the policy of this office that all inmates shall have access to the continuation of care for a health issue, provided the treatment plan meets community standards. The inmate'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).

758.3  CONTINUATION OF CARE
The Jail Commander is responsible for coordinating with the Responsible Physician to ensure that all inmates receive appropriate health care, including, but not limited to:

(a) Newly booked inmates 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 inmate is currently receiving.
   1. Any prior jail 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) 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.
   4. Custody staff is informed of the treatment plan when necessary to ensure coordination and cooperation in the ongoing care of the inmate.
Continuation of Care

(d) Reasonable effort should be made to obtain information and records relating to previous health care professionals, with the consent of the inmate, if the inmate is currently under medical care.

(e) Upon transfer to another facility, a medical discharge summary of the inmate's current condition, medications and treatment plan will be forwarded in a sealed envelope (to maintain confidentiality) to the receiving facility.

(f) Response to requests for health information from medical facilities and health care professionals, with the inmate's written consent.

(g) When inmates are sent out of the facility for emergency or specialty medical treatment, written information regarding the inmate's reason for transfer, pertinent medical problems and list of current medications should be sent with the inmate 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 health information. Upon the inmate'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.

(h) Upon release from the facility, inmates 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

760.1 PURPOSE AND SCOPE
Wellpath establishes 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.

760.2 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 Physician. The data evaluated should result in more effective access to services, an improved quality of care and a better utilization of resources.

760.3 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 Physician 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 Physician and Jail 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
Continuous Quality Improvement

- Risk minimization tactics
- Data describing the types, quality and quantity of care provided
- Accreditation compliance

760.4 CQI COMMITTEE MEETINGS
The jail CQI committee should meet quarterly under the direction of both the committee chair and the Responsible Physician. The CQI meetings may be conducted at the same time as quarterly administrative meetings, but CQI minutes must be produced and maintained separately from any other minutes.

The CQI minutes are not subject to disclosure outside of the CQI program, including requests from local, regional and national entities. Other interested parties with a need to know are only entitled to the disclosure of information that includes:

(a) Problems that may have been identified.
(b) Solutions that have been agreed upon.
(c) Persons responsible for implementing the corrective action.
(d) The time frame for implementing the corrective actions.
Informed Consent and Right to Refuse Medical Care

762.1 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.

762.1.1 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.

762.2 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, life-threatening conditions and a court order (15 CCR 1214).

762.3 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.
Informed Consent and Right to Refuse Medical Care

762.4 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 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.

762.4.1 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 Custodian of Records 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)).
762.4.2 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.

762.5 RECORDS
The Jail 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.
Management of Health Records

764.1 PURPOSE AND SCOPE
Wellpath establishes a uniform manner of maintaining the active health records of inmates 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.

764.1.1 DEFINITIONS
Definitions related to this policy include:

Protected health information - Information that relates to the inmate's past, present or future physical or mental health or condition, the provision of medical care to the inmate, or the past, present or future payment for the provision of health care to the inmate (45 CFR 160.103).

764.2 POLICY
It is the policy of this office to maintain the confidentiality of inmates' protected health information. Inmate 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 inmate health records. Inmate workers shall not have any access to inmate health records.

764.3 INITIATING A HEALTH RECORD
Following the initial medical screening process, the qualified health care professional shall initiate a health record for each inmate. The Responsible Physician shall be responsible for developing and implementing procedures for standardized record formatting (15 CCR 1205 et seq.).

764.4 CONFIDENTIALITY OF INMATE HEALTH RECORDS
Information regarding an inmate's health status is confidential. Active health records shall be maintained separately from custody records. Access to an inmate'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(d)).

The inmate's protected health information may be disclosed, with the inmate'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(b) et seq.).

The inmate's protected health information may be disclosed by the qualified health care professional without the inmate's authorization under certain circumstances and when approved by the Responsible Physician or the authorized designee. Those circumstances include:
Management of Health Records

(a) To known qualified health care professionals who are members of the health care team responsible for the inmate's care.

(b) To custody staff regarding inmates as reasonably necessary to protect the safety, security and good order of the facility. Examples may include information that the inmate may be:
   1. Suicidal.
   2. 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 inmate is part of a communicable disease investigation.

(d) Pursuant to a court order or valid subpoena duces tecum, accompanied by satisfactory assurance that the inmate 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 inmate has died as a result of criminal conduct.

The inmate'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 inmate is a victim of a crime. When reasonably possible, the approval of the Jail Commander should be obtained prior to disclosure.

Attorneys requesting health record information regarding an inmate 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 inmate's custody status and whether the inmate is receiving medical care. Family members requesting additional information must provide a proper authorization for release and/or disclosure of medical information form.

The Jail 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
Management of Health Records

will propose related policies and procedures and other activities designed to facilitate proper documentation of health care and access to records.

764.4.1 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).

764.5 HEALTH RECORD CONTENTS

(a) To standardize record keeping and to identify responsibilities, the following should apply to inmate health records (15 CCR 1205):

1. 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.

2. The qualified health care professional or the authorized designee should be responsible for ensuring incoming written findings and recommendations are returned with the inmate from any off-site visit, and filed in the inmate’s medical record.

(b) Inmate health records shall minimally contain, but are not limited to:

1. Identifying information (e.g., inmate name, identification number, date of birth, sex) on each sheet in the file.

2. A completed inmate 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.

6. 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.
**Management of Health Records**

9. X-ray and laboratory reports and diagnostic studies.

10. A record of the date, time and place of each clinical encounter with inmates.

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.

### 764.6 ACTIVE INMATE HEALTH RECORDS

Active inmate 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 Jail Commander or the authorized designee, under exigent circumstances, to protect the safety, security and good order of the facility.

All entries in the inmate health record will have the place, date, time, signature and title of each individual providing care and should be legible.

Documentation in the inmate health record is done in the subjective, objective, assessment and plan (SOAP) format. An inmate health record is initiated at the first health encounter following the initial medical screening.

If an inmate 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 inmate health records shall be returned to the file prior to the end of each watch.

### 764.7 INACTIVE MEDICAL RECORDS

When an inmate is released from custody, medical records personnel should remove the inmate's health record from the active file.

The health record should be reviewed for completeness. Any loose documents should be filed according to the established health record format.

The health record should be securely stored in the area designated for inactive inmate health records, in accordance with established records retention schedules but no less than 10 years.
Management of Health Records

from the date of the last clinical encounter. Adult records and juvenile records may have different jurisdictional retention requirements.

Inactive inmate medical records may be stored off-site. Health record information from inactive files may be transmitted to specific and designated physicians or medical facilities upon the written request or authorization of the inmate.

764.8 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.

764.9 HIPAA COMPLIANCE
The Jail 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 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.
Inmate Health Care Communication

766.1 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.

766.2 POLICY
Lake County Health Services holds a contract with Wellpath which provides health care for correctional facilities. Wellpath will determine if an inmate has significant developmental disabilities, and needs to be segregated to protect himself or herself, and others.

Procedure

(a) Inmates with previous medical or psychiatric history or whose behavior/condition indicates a need for psychiatric or medical evaluation will be seen by Wellpath.

(b) An evaluation will be completed and treatment and recommendation for housing will be made or transfer to an appropriate care facility will be initiated as indicated per MD order, Wellpath, PA/NP protocols and or Wellpath RN Standardized Procedures.

(c) Referrals to Wellpath staff may be made at any time during intake or the incarceration period by custody or Wellpath staff.

(d) The Sheriff's Office staff will consult with Wellpath staff regarding the condition, capacity, potential reactions and special needs of medical developmentally disabled, and or psychiatric inmate or patient prior to:
   1. Housing assignment
   2. Program assignment
   3. Disciplinary measures
   4. Transfer in or out of the facility

(e) Wellpath staff will be notified of pending transfers out of the facility.

(f) Wellpath staff will provide information to Sheriff's Office personnel regarding special medical or psychiatric considerations of the inmate prior to transfer out of the facility.

(g) The Wellpath Program manager or designee will notify the Alta California Regional Center within 24 hours of the presence of an inmate believed to have developmental disabilities.

(h) Wellpath will consult with the Duty Sergeant regarding appropriate housing.

(i) The following will accompany any inmate cleared for transfer out of the Lake County Hill Road Correctional Facility.
   1. Copy of pertinent medical record or medical transfer summary form.
   2. Sufficient medication for the duration of the transport.
3. Prosthetics and/or dressings that may be required.
4. Instructions to transporting personnel regarding medication, diet, or other special treatment

(j) Wellpath staff will provide the transportation unit with the medical information for the transportation unit with the medical information for the transportation deputy's form, and any sealed medical record to be transferred with the inmate

766.2.1 MENTAL HEALTH UNIT OPERATIONS
The Lake County Hill Road Correctional Facility will provide for separate physical and visual housing of mentally disordered inmates from the general population inmates. The Mental Health Unit will be operated in accordance with the information and procedures outlined in this chapter.

(a) General
1. Male and female inmates may be housed in the Mental Health Unit
2. Male and female inmates will not be housed in the same cell
3. Male and female inmates may not mix under any circumstances
4. Mental Health's IBC and Classification Plan will be strictly adhered to when determining who may mix with whom in all areas of the unit.
5. Scheduling of day room and yard time will be the responsibility of the Control Room Correctional Aide and the Housing Unit deputy
6. Inmates housed in the Mental Health Unit will not be allowed access to razors, but will be provided with access to hair removal cream.

(b) Classifying Inmates out of the Mental Health Unit
1. A Wellpath Mental Health Staff Member will prepare a Classification/Housing Input form recommending that the inmate is cleared for housing other than in the Mental Health Unit, and forward it to the Chief Classification Officer.
2. The Chief Classification Officer will rehouse the inmate immediately after the clearance is received, no later than forty-eight (48) hours. If the Chief Classification Officer is not on duty, the Shift Supervisor may rehouse the inmate.
3. The Chief Classification Officer may disapprove a clearance only in special circumstances. For example, if an inmate does not have a mental health problem, but is a self-mutilator, it may be felt that the inmate will have less access to those items with which he or she may harm himself or herself, if left in the Mental Health Unit.

(c) Internal Behavior Codes (IBC) will be used to assist the Correctional Staff in managing inmates with mental health problems.
1. IBC is a code used exclusively in the Mental Health Unit to determine the amount of out-of-cell activity an inmate will be able to have, and which inmates will be
Inmate Health Care Communication

able to mix in the day room area; as well as informing the Housing Unit deputy of the mental stability of the inmate.

2. An inmate's IBC will be determined by evaluation the following:
   (a) Mental status
   (b) Health status
   (c) Past behavior
   (d) Potential for violence
   (e) Security problems

3. IBC categories
   (a) 'A' rating
      1. High functioning, stable psychiatric inmates requiring very little to moderate close direct supervision.
      2. Mix well with others, are mostly cooperate and have few write ups for major rule violations.
      3. Can be defined as 'general population' inmates who maybe comply with directions from staff
      4. May be compliant with regard to taking prescription medications or may be stable inmates who refuse medications.
      5. Have good personal hygiene and shower at least every other day.
      6. May not comply with every module and/or facility rule, but will comply with direct orders from staff.
      7. Eligible to become Pod workers.
      8. Will be allowed as much out-of-cell activity as time allows.
      9. May be double celled and must readily accept a cell mate, as needed.
   (b) 'B' rating
      1. Exhibit signs or verbalize symptoms of psychiatric disorders, are unstable, possess a low level of social skills and may be easily over stimulated.
      2. Should be able to interact with a few inmates at a time.
      3. Require a moderate level of supervision.
      4. May not be compliant with medical orders.
      5. Will be allowed out of their cell a minimum of two hours each day if time allows
   (c) 'C' rating
Inmate Health Care Communication

1. Have obvious psychiatric symptoms, have some potential for violence toward others and have displayed non-violent symptoms which would indicate a need for considerable supervision and observation.

2. Are able to care for themselves and maintain acceptable personal hygiene.

3. Will be allowed out of their cells for one hour each day.

4. May mix two at a time in the day room when recommended by the Housing Unit deputy and Wellpath Mental Health Staff.

(d) 'D' rating

1. Have obvious psychiatric symptoms, have a high risk potential for violence toward others and have displayed violent symptoms which would indicate a need for maximum supervision and observation.

2. Typically refuse to take psychotropic medications.

3. Are unable to care for themselves or maintain acceptable personal hygiene.

4. Shall be supervised by no fewer than two deputies any time they are out of their cells.

5. Will be allowed out of their cells for one hour each day.

6. Shall be placed in restraints any time they are moved out of their cell, including during their day room time.

4. Miscellaneous Information

(a) The Internal Behavior Code (IBC) will assist the Housing Unit deputy in determining the following:

(b) The number of inmates allowed out of their rooms at any one time, according to the IBC codes, will be as follows:

(c) At no time will the IBC prevail over the Classification plan, unless the IBC requires higher security handling.
(d) Any mentally disordered inmate who is classified as Administrative Segregation due to documented violence or hostility will automatically be designated as a 'D' and will not be considered for an IBC review until his or her classification is changed.

(e) Some IBCs are compatible within the following limits:
   (a) 'A' and 'B' code inmates may mix in the common areas of the unit; and may eat together in common areas.
   (b) 'C' code inmates may mix together (no more than two at a time) when approved by staff.
   (c) 'D' code inmates may not mix with any other inmate in any area of the unit.

(f) Wellpath Mental Health Staff will evaluate inmates for possible involuntary treatment (5150, 72 hour hold) when necessary, according to the criteria determining 5150 status as outlined in Division 5 of the Welfare and Institutions Code, and in compliance with the Lake County Department of Mental Health Policy.

(g) Wellpath Mental Health Staff will evaluate and designate the IBC status for each inmate no later than the following day after placement in the Mental Health Unit (excluding weekends and holidays).

(h) After interviewing an inmate, the Wellpath member will determine the IBC for that inmate based on:
   (a) The staff member's evaluation of the interview
   (b) The inmate's current level of functioning in the Mental Health Unit
   (c) Any pertinent information available from mental health records
   (d) Prior contacts with the Housing Unit deputies and Classification Staff, and their evaluation of the inmate's risk factor as documented on the Classification/Housing input form.

(i) The IBC may be updated at any time by the Wellpath Mental Health Staff based on:
   (a) Observations of the inmate's behavior,
   (b) Mental health interviews
   (c) Classification or Housing input reports
   (d) Inmate's participation in programs

(j) When a Wellpath member updates an inmate's IBC, he or she will inform the Housing Unit deputy immediately

(k) The Housing Unit deputy will ensure that the inmate's board card and classification record in In-Custody are updated with the new IBC.
Inmate Health Care Communication

(l) Upon completion of the Mental Health Staff's evaluation of the inmate, the Wellpath staff will enter the code in the inmate's classification record in Medical Records. The Housing Unit deputy will update the IBC status on the inmate's board card.

(m) The Housing deputy will enter the IBC status in the In-Custody system as soon as the Wellpath staff has advised the deputy of the determination.

(n) Inmates classified to the Mental Health Unit will remain in lock down status until evaluated by Wellpath Mental Health Staff and IBC status has been determined. Inmates who are pending evaluation by Wellpath Mental Health Staff will still receive their out-of-cell time as specified for an Administrative Segregation inmate.

766.2.2 SPECIAL MENTAL HEALTH DISORDER

Policy

When a female is arrested on charges of murder or attempted murder of their infants, additional measures will be taken in medical screening to ensure assessment of postpartum psychosis and possible referral for further mental health evaluations.

Procedure

When a female is arrested and brought to the Hill Road Correctional Facility for booking on charges of either attempted murder or murder of her infant, and the Medical Screening portion of the booking process is complete, it is imperative that it is indicated on the Medical Screening Report what her charges are. A telephone contact will also be made by the Duty Sergeant and/or the booking deputy to the Medical Staff to ensure that a Mental Health Evaluation is done.

766.3 MANAGING SPECIAL NEEDS INMATES

Upon an inmate's arrival at the facility, the qualified health care professional, in conjunction with the custody staff, should determine if the inmate has any special needs.

(a) If staff determines that an inmate has special needs, a communication form or other appropriate documentation relating to special needs should be completed and sent to classification personnel, the Shift Supervisor and the housing deputy. This is to ensure that the inmate is assigned to a housing unit that is equipped to meet his/her special needs.

(b) The qualified health care professional should arrange for the appropriate follow-up evaluation.

(c) The health care of special needs inmates should be continuous and ongoing. At minimum, the inmate should be seen by the Responsible Physician or a qualified health care professional at least once every 90 days to evaluate his/her continued designation as a special needs inmate.
(d) Inmates who have been determined by qualified health care professionals to require a special needs classification should be seen at least once monthly by a qualified health care professional.

(e) Prior to transfer to another facility, a medical transfer summary should be completed detailing any special requirements that should be considered while the inmate is in transit and upon his/her arrival at the destination. Discharge planning should be included, as appropriate.

(f) A treatment plan should be developed for each inmate and should include, at a minimum:

1. The frequency of follow-up for medical evaluation and anticipated adjustments of the 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 using prescribed medications.

(g) When clinically indicated, the qualified health care professionals and the custody personnel should consult regarding the condition and capabilities of inmates with known medical and/or psychiatric illnesses or developmental disabilities prior to any of the following:

1. Housing assignment
2. Program or job assignment
3. Admissions to, and transfers from or between institutions
4. Disciplinary measures for mentally ill patients

(h) Qualified health care professionals and custody personnel should communicate about inmates who require special accommodation. These include, but are not limited to, inmates who are:

1. Chronically ill
2. Undergoing dialysis
3. In an adult facility, as an adolescent
4. Infected with a communicable disease
5. Physically disabled
6. Pregnant
7. Frail or elderly
8. Terminally ill
9. Mentally ill or suicidal
10. Developmentally disabled
Inmate Health Care Communication

766.4 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.

766.5 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

768.1 PURPOSE AND SCOPE
Wellpath maintains credibility between the inmates and the facility health care providers by establishing clear guidelines restricting health services staff from participating in the collection of forensic evidence for disciplinary or legal proceedings.

768.1.1 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.

768.2 POLICY
Qualified health care professionals of this facility are generally prohibited from participating in the collection of forensic evidence or performing psychological evaluations for disciplinary or legal proceedings.

Qualified health care professionals of this facility 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, without inmate consent
(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

770.1 PURPOSE AND SCOPE
Wellpath ensures 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.

770.1.1 DEFINITIONS
Definitions related to this policy include:

Infection control practices - Are defined by the American Dental Association (ADA) and the Centers for Disease Control and Prevention (CDC) as including sterilizing instruments, disinfecting equipment and properly disposing of hazardous waste.

Oral care - Includes instruction in oral hygiene, examinations and treatment of dental problems. Instruction in oral hygiene minimally includes information on plaque control and the proper brushing of teeth.

Oral examination - Includes taking or reviewing the patient's oral history, an extra-oral head and neck examination, charting of teeth, and examination of the hard and soft tissue of the oral cavity with a mouth mirror, explorer and adequate illumination.

Oral screening - Includes visual observation of the teeth and gums, and notation of any obvious or gross abnormalities requiring immediate referral to a dentist.

Oral treatment - Includes the full range of services that in the supervising dentist's judgment are necessary for proper mastication and for maintaining the inmate’s health status.

770.2 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).

770.3 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.

(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.

770.4 DENTAL CARE OPTIONS
Inmates should be offered a dental screening by a qualified health care professional or a dentist within 14 days of incarceration, unless such a screening was completed within the past six months. This dental screening should include an evaluation of the current dental status and instruction on oral hygiene and preventive oral education.

Inmates should be offered a dental examination, supported by diagnostic X-rays if necessary, by a dentist within 12 months of incarceration.

Inmates who are scheduled to be incarcerated for less than 12 months should have access to the treatment of dental pain, fillings, extractions of non-restorable teeth, cleaning and treatment of symptomatic areas and repair of partials and dentures.
Pharmaceutical Operations

772.1 PURPOSE AND SCOPE
Wellpath establishes the procedures and protocols under which the facility must manage a pharmaceutical operation in order to comply with federal, state and local laws governing prescribing and administering medication.

772.1.1 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
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 jail, the monitoring of inmate drug therapy, and the provision of inmate/patient drug information.

### 772.2 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).

### 772.3 PHARMACEUTICAL OPERATIONS

(a) The Responsible Physician, 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 cost-efficient drug therapy.

2. The list should be periodically updated.

(b) The Responsible Physician, in conjunction with the pharmacist, shall ensure appropriate medication storage, handling and inventory control.

(c) The Responsible Physician shall inspect the pharmaceutical operation quarterly and regularly review charts on medication utilization.

(d) The Responsible Physician 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 Supervisor. 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.

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.
3. 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:

1. 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.
3. 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.
4. 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.
Pharmaceutical Operations

(h) All medication preparation, storage and administration areas shall be clean, organized, illuminated, ventilated and maintained at an appropriate temperature range. Any 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 Physician and the Jail Commander.

772.4 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.

772.5 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. Health-trained custody staff members may administer medication on the order of the Responsible Physician or a qualified health care professional (15 CCR 1216(b)).

(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 or health-trained custody staff member 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 or health-trained custody staff member should observe the inmate taking the medication to prevent "cheeking" or "palming".

3. The qualified health care professional or health-trained custody staff member 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 or health-trained custody staff member shall record each medication administered by initialing the appropriate date and time. The qualified health care professional or health-trained custody staff member 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.

1. 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 or health-trained custody staff member 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 or health-trained custody staff member 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.
4. Make a reasonable effort to convince the inmate to voluntarily continue with the medication as prescribed.
5. Report continued refusals to the Responsible Physician 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.

772.6 SELF-ADMINISTRATION OF MEDICATION
Upon approval of the Responsible Physician 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 on-site 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 or health-trained custody staff member should issue the inmate his/her medication as follows:

1. The qualified health care professional or health-trained custody staff member 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.

2. 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.
Pharmaceutical Operations

(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' self-administered 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 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.

772.7 NON-PRESCRIPTION MEDICATION
Any over-the-counter non-prescription medication available to inmates for purchase in the facility commissary shall be approved by the Jail Commander and the Responsible Physician and reviewed annually (15 CCR 1216(c)).

The Jail Commander and the Responsible Physician 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.

772.8 TRAINING
All health-trained custody staff members authorized to deliver, administer and provide medication assistance shall be trained prior to engaging in any tasks related to delivery or administration of medication.
Release Planning

774.1 PURPOSE AND SCOPE
Wellpath recognizes that inmates 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 inmate's health care after he/she is released from custody.

774.1.1 DEFINITION
Definitions related to this policy include:

Release planning - The process of providing sufficient resources for the continuity of health care to an inmate before his/her release to the community.

774.2 POLICY
The qualified health care professional should work with correctional staff to ensure that inmates 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 inmate to seek health care services once released.

The Jail 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 inmate that emphasize the importance of appropriate follow-up care.

(d) Specific appointments and medications that are arranged for the inmate at the time of release.

774.3 PREPARATION FOR RELEASE
Upon notification of the imminent release of an inmate 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 inmate's immediate medical needs, and arrangements should be made for community follow-up where needed, including sufficient medication.

(b) With the inmate's written consent, the qualified health care professional should:
   1. Share necessary information with health care services.
   2. Arrange for follow-up appointments.
Release Planning

3. Arrange for the transfer of health summaries and relevant parts of the health record to community health care services or others who are assisting in planning for or providing services upon the inmate’s release.

(c) Contact with community health care services shall be documented via an administrative note in the inmate's health record.

(d) Inmates with serious mental health issues, including those receiving psychotropic medication, shall be informed about community options for continuing treatment and provided with follow-up appointments, when reasonably possible.

(e) Medication will be provided as appropriate.

774.4 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 inmate’s health file and retained in accordance with established records retention schedules.
Privacy of Care

776.1 PURPOSE AND SCOPE
Wellpath 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 that encourages inmates use and trust of the facility’s health care system.

776.1.1 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.

776.2 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.

776.3 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.

Inmates shall have a same-sex escort for encounters with an opposite-sex qualified health care professional or health-trained staff member, as appropriate.

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.

776.4 REPORTING INAPPROPRIATE ACCESS OF MEDICAL INFORMATION
The Jail Commander and Responsible Physician shall establish a process for staff, inmates or any other persons to report the improper access or use of medical records.

776.5 TRAINING
All corrections personnel, interpreters and qualified health care professionals who are assigned to a position that enables them to observe or hear qualified health care professional/inmate encounters shall receive appropriate training on the importance of maintaining confidentiality when dealing with inmate health care. The Training Manager shall be responsible for scheduling such training and for maintaining training records that show the employee attended, in accordance with established records retention schedules.
Chapter 8 - Environmental Health
Sanitation Inspections

800.1 PURPOSE AND SCOPE
The Lake 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 Jail Commander 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 Jail 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 Jail Commander will designate a staff
Sanitation Inspections

A person to receive these work orders and take appropriate action to ensure the repairs are 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 Jail 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 Jail 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.
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.
Hazardous Waste and Sewage Disposal

802.1 PURPOSE AND SCOPE
The purpose of this policy is to establish a system for disposing of hazardous waste. The Sheriff's Office recognizes that the effectiveness of a disposal system depends not only on the written policies, procedures and precautions, but on adequate supervision and the responsible behavior of the staff and inmates. It is the responsibility of everyone in the facility to follow hazardous waste disposal instructions, utilizing prescribed precautions and using safety equipment properly.

802.1.1 DEFINITION
Definitions related to this policy include:

Hazardous waste - Material that poses a threat or risk to public health or safety or is harmful to the environment (e.g., batteries, paints, solvents, engine oils and fluids, cleaning products).

802.2 POLICY
It is the policy of this office that any sewage and hazardous waste generated at the facility shall be handled, stored and disposed of safely and in accordance with all applicable federal and state regulations and in consultation with the local public health entity. The Jail Commander or the authorized designee shall be responsible for:

• Contracting with a hazardous waste disposal service.
• Developing and implementing a storage and disposal plan that has been reviewed and approved by a regulatory agency.
• Including hazardous waste issues on internal health and sanitation inspection checklists.
• Including hazardous waste issues in the inmate handbook and ensuring that inmates receive instruction on proper handling and disposal during inmate orientation.
• Developing and implementing procedures for the safe handling and storage of hazardous materials until such time as the contractor removes the items from the facility.
• Ensuring the staff is trained in the proper identification of hazardous waste and the appropriate handling, storage and disposal of such items.

802.3 DISPOSAL PROCEDURE
802.3.1 SEWAGE DISPOSAL
All sewage and liquid waste matter must be disposed of into a public system of sewerage or, if public sewerage is not available, into a private system of sewage disposal in accordance with the requirements of the local public health entity.
The institution's use of the private system must be discontinued and the private system must be properly abandoned when public sewerage becomes available.

**802.3.2 HAZARDOUS WASTE**
Hazardous waste generated in the facility shall be properly disposed of in designated containers and stored until removed by the contractor. Staff shall use universal standard precautions when in contact with hazardous materials, at a minimum, unless directed otherwise.

**802.4 SAFETY EQUIPMENT**
The Jail Commander and the county emergency manager shall ensure that appropriate safety equipment is available. All supervisors shall be knowledgeable in how to access the safety equipment at all times. The county may coordinate with local fire departments or contracted vendors to obtain the necessary safety equipment.

**802.5 TRAINING**
The Training Manager shall be responsible for ensuring that all facility personnel receive appropriate training in the use of appropriate safety equipment and the identification, handling and disposal of hazardous waste. Training records shall be maintained, including the course roster, curriculum, instructor name and credentials, and testing instruments.

**802.6 SUPERVISOR RESPONSIBILITY**
Supervisors are responsible for monitoring any hazardous waste containment issue, ensuring that employees have the appropriate safety equipment, that any exposed persons receive immediate medical treatment, and that the appropriate measures are taken to lessen the exposure of others. Supervisors shall ensure that incident reports are completed and forwarded to the Jail Commander in the event of an exposure to staff, inmates or visitors.
Housekeeping and Maintenance

804.1 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.

804.2 POLICY
The Jail 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.

804.3 SANITATION SCHEDULE
A twice-daily, 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 facility (housing, food preparation, laundry, loading dock/trash storage, barber shop, warehouse, common areas). The following is a recommended breakdown of what should be addressed during each of the scheduled cleanings:

(a) General
Housekeeping and Maintenance

1. Inmates assigned to janitorial work details in the housing unit will be under the direct supervision of the on-duty officer assigned to the housing unit/pod.

2. Inmates assigned to the kitchen will be under the direct supervision of the on-duty cook.

3. Inmates assigned to the laundry and housekeeping will be under the direct supervision of the Inmate Services Officer.

(b) Storage of Cleaning Supplies

1. All cleaning supplies will be stored in the appropriate janitorial closets. These closets are to be kept clean and orderly at all times.

2. All janitorial closets will be kept locked, except when supplies are being distributed.

3. All flammable or toxic cleaning materials will be strictly supervised by facility staff.

4. Facility staff will ensure all cleaning supplies are returned to janitorial closets after cleaning duties are completed. An inspection will be made of each janitorial closet at the end of each period of use to ensure that no tools/instruments or equipment are missing.

(c) Twice-daily cleaning:

1. Housing Unit Officers will open the janitors’ closets within the housing areas and provide the Pod workers with the necessary cleaning supplies. (It is absolutely imperative that the janitors’ closets be kept locked when not in use).

2. Pod workers will clean the housing areas thoroughly, and when the cleaning duties have been completed, they will return the supplies to the janitor’s closet. The Housing Unit Officer and floor officers will lock the janitors’ closets.

3. The Housing Unit Officer will examine all equipment to ensure that it has not been tampered with, to avoid injury to staff and/or inmates.

4. The Housing Unit Officer will inventory the supplies and cleaning instruments/equipment upon issuance and return. The inventory will be documented on the cleaning supply log.

5. Unit/Pod workers can be replaced at any time at the discretion of the corrections staff.

(d) Daily cleaning:

1. Sweep and then wet mop the entire jail floor

2. Clean all cell Pods/Housing Units
Housekeeping and Maintenance

3. Empty all trash receptacles
4. Clean all toilets and sinks
5. Clean all showers

(e) **Weekly cleaning:**
1. Dust 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

(f) **Monthly cleaning:**
1. Walls
2. Ceilings
3. Bunk pans

804.4 **TRAINING**
The housing unit supervisor should develop a self-inspection checklist that includes the cleaning and maintenance items that will be checked on a daily, weekly and monthly basis throughout the facility.

The self-inspection checklist will closely correspond to the established cleaning and maintenance schedule.

The Jail Commander or the authorized designee shall review and update the self-inspection checklist at least annually.

(a) **Cell/Dorm Inspections:**
1. The Hill Road Correctional Facility will have a daily cell/dorm inspection program, and a copy of each cell/dorm inspection log will be forwarded to the shift supervisor.
   (a) Housing Units A-G will be inspected daily.
   (b) Dorms H and I will be inspected daily.

(b) **Weekly Facility Inspections:**
(a) The facility inspection will be conducted randomly every week.
(b) Whenever possible, the Inspection Team will consist of the following personnel:
   (a) Facility Commander
Housekeeping and Maintenance

(b) Duty Sergeant

(c) Inmate Services Officer

(d) Housing Officer

(e) Facility Maintenance Worker

(c) The Inspection Team will evaluate the overall cleanliness of the entire facility. The team will note any maintenance problems.

(d) The inspection results will be noted on a Weekly Facility Inspection Log by the Duty Sergeant. The Sergeant will give a copy of the inspection results to:

(a) Facility Commander

(b) Inmate Services Officer

(c) Housing Officer

(d) Kitchen Supervisor

(e) and one copy will be posted on each bulletin board in the dorms

(e) The Inspection Team will discuss the results of the inspection directly after the inspection.

(f) If the Inspection Team does not find any improvement in the dorms from the previous week's inspection, or below an acceptable standard, they make take away the inmates' time out.

(g) If the individual dorms have any discrepancies, the Inspection Team will note the discrepancies on the log.

(h) It shall be the responsibility of all shifts to:

(a) Form work parties to correct discrepancies.

(b) Ensure that the inmates are given the necessary cleaning supplies.

(c) Instruct the inmates on work details.

(d) Inspect problem areas to ensure improvement.

(e) Notify the Inmate Services Officer of any supplies that are needed to do the job.

(i) It will be the Inmate Services Officer's responsibility to:

(a) Ensure that all maintenance problems are addressed and corrected by maintenance.

(b) Order any cleaning supplies and equipment necessary.

(c) Mattress Inspection and Replacement:
Housekeeping and Maintenance

1. Each inmate will be provided the opportunity to spray and wipe down the mattress on his or her assigned bunk upon entry into a housing unit/pod.

2. During weekly laundry exchange, all mattresses will be inspected for deterioration or damage. Mattresses found to be in need of repair will be replaced immediately, either during laundry exchange or at any other time they are discovered to be in need of repair.

3. **Replacement criteria** - A mattress will be considered unsuitable for use if it has a hole or tear which would allow the stitching to be exposed or which would allow items of contraband to be concealed within the mattress.

4. Mattresses in need of repair will be sent to the laundry for repair or replacement.

5. If a mattress appears beyond repair, place it in maintenance. Advise the shift Sergeant, who will inspect the mattress for repair or disposal.

6. Inmates are not to fold mattresses at any time. When a mattress is found folded during a cell check or inspection, have the inmate place it flat or take care of it on your own. Inmates shall not place any items under their mattresses. In the event the inmate needs elevation for a medical problem, extra blankets can be placed under the mattress. Inmates need a Medical Treatment Order (MTO) from the medical staff prior to receiving extra blankets.

(d) **Reporting Maintenance Problems**

1. Facility staff will complete a maintenance request via E-mail directly to maintenance staff for all maintenance problems, listing problem area and date discovered.

2. When an emergency maintenance problem is discovered by staff, the shift supervisor will be notified and on-call personnel will be called to make the appropriate repairs.

3. Emergency maintenance problems include, but are not limited to:

   (a) Plumbing or lighting problems that facility staff cannot correct.

   (b) Any maintenance problem that endangers the safety of staff, inmates, or the public that facility staff cannot correct.

**804.5 INSPECTION CHECKLIST**

The Jail 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 Jail Commander or the authorized designee for annual review, filing and retention as required by the established records retention schedule.
Physical Plant Compliance with Codes

806.1 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.

806.2 POLICY
It is the policy of the Sheriff's 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.

806.3 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.

806.4 RESPONSIBILITIES
All safety equipment (emergency lighting, generators, and an uninterruptible power source shall be tested at least quarterly. Power generators should be inspected weekly and load-tested quarterly or according to the manufacturer's instructions. All completed self-inspection forms shall be kept on file for review by the appropriate Sheriff's 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:

(a) Booking
(b) Food services
(c) Inmate housing
(d) Laundry
(e) Loading dock/trash storage
(a) Warehouse
(b) Water systems and plumbing
(c) Emergency generators
(d) Fire safety equipment
Physical Plant Compliance with Codes

(e) The entire physical structure of the facility, including, roof, walls, exterior doors, mechanical systems and lighting

806.5 PROCEDURE
Floor drains must be flushed weekly and all traps must contain water to prevent the escape of sewer gas. Grids and grates must be present.
Water Supply

808.1 PURPOSE AND SCOPE
The Lake 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.

808.2 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.).

808.3 PROCEDURE
The Lake County Sheriff's Office Hill Road Correctional Facility is served by the Municipal Water Supply.

808.4 EMERGENCY PLAN
The Jail Commander and the Office health authority shall develop a plan for the supply of potable water for drinking and cooking in the event that a man-made or natural disaster interrupts the regular water supply. The plan shall address methods for providing clean potable water for a minimum of three days, and should have contingency plans for emergencies lasting longer than three days. The plan should also include contingencies for the use of non-potable water to flush toilets and remove effluent from the facility.
Vermin and Pest Control

810.1 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.

810.2 POLICY
It is the policy of this office that vermin and pests be controlled within the facility (15 CCR 1280). The Jail Commander or the authorized designee shall be responsible for developing and implementing this policy, in cooperation with the Responsible Physician 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).

810.3 PEST CONTROL SERVICES
The Jail 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.

810.3.1 CORRECTIONS PROCEDURE
(a) When an inmate is booked into the facility, and there is blood or vermin on his or her clothing, the clothing shall be washed prior to being stored in the property bags.

1. The blood or vermin-infested clothing will be placed in a clear bag. The bag will then be tagged with the name and booking number of the inmate and sent to the laundry room. After being washed, the clothing will be placed in a plastic bag and marked with the inmate’s name and booking number. The bag will then be placed in the inmate’s property bag in the clothing/property room.

810.4 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

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.

**810.5 LABELING AND SECURE STORAGE OF COMPOUNDS**
Containers of pest exterminating compounds shall be conspicuously labeled for identification of contents. The containers shall be securely stored separately from food and kitchenware, and shall not be accessible by inmates.
Inmate Safety

812.1 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.

812.2 POLICY
The Lake 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.

812.3 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 use of force 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 use of force incidents will be investigated and reported in accordance with the Use of Force Policy.

812.4 INVESTIGATION REPORTS
The Shift Supervisor shall ensure that reports relating to an inmate’s injury are completed and should include the following:

(a) Incident reports
(b) Pictures
(c) Investigative reports
(d) Health record entries
(e) Any other relevant documents
812.5 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:

(a) The area where the deficiencies have been identified.
(b) Strategies to abate the deficiency.
(c) Resources needed to correct a deficiency.
(d) The person or persons responsible for taking corrective action and the target
    completion date.

The Sheriff shall consult with the Sheriff's Office risk manager to coordinate corrective action or
to seek managerial/administrative guidance for implementing corrective action.
Inmate Hygiene

814.1 PURPOSE AND SCOPE
This policy outlines the procedures that will be taken to ensure the personal hygiene of every inmate in the Lake County Sheriff's Office jail is maintained. The Lake County Sheriff's Office recognizes the importance of each inmate maintaining acceptable personal hygiene practices by providing adequate bathing facilities, hair care services and the issuance and exchange of clothing, bedding, linens, towels and other necessary personal hygiene items.

814.2 POLICY
It is the policy of the Lake 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(b)(3)). Compliance with laws and regulations relating to good inmate 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 inmates, but for the safety of the correctional staff, volunteers, contractors and visitors.

814.3 STORAGE SPACE
There should be adequate and appropriate storage space for inmates' bedding, linen or clothing. The inventory of clothing, bedding, linen and towels should exceed the maximum inmate 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 Jail Commander should be notified if additional storage space is needed.

814.3.1 BEDDING ISSUE
Upon entering a living area of the Lake County Sheriff's Office jail, every inmate 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.).
   1. 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 inmate is released or upon reissue.
   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).

(c) Two sheets or one sheet and a clean mattress cover.
Inmate Hygiene

(d) One clean washcloth, hand towel, and bath towel.
(e) One pillow and pillowcase.

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 Jail 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.

814.3.2 CLOTHING ISSUE
An inmate 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 inmates shall include but is not limited to the following (15 CCR 1260):

- Clean socks
- Clean outer garments
- Clean undergarments
  - Males - shorts and undershirt
  - Females - bra and two pairs of panties
- Footwear

An inmate who is issued a change of clothing upon admission to the facility may have his/her personal clothing returned after laundering, at the discretion of the Jail Commander.

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 inmate’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.

Each inmate 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 (15 CCR 1261).

The Jail 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.
Inmate Hygiene

The Jail Commander or the authorized designee shall ensure that the facility maintains a sufficient inventory of extra clothing to ensure each inmate shall have neat and clean clothing appropriate to the season.

An inmate’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 inmate personal property shall be properly identified, inventoried, and secured. Inmates shall sign and receive a copy of the inventory record.

814.3.3 CLOTHING ISSUE PROCEDURE

Initial Clothing Issue

(a) A standard issue of clothing and linen will be issued to the inmate upon completion of the booking process and when it is deemed that the inmate will be housed within the facility. Clothing should be inspected for damage before giving it to the inmate.

1. For all male inmates will consist of:
   (a) One pair of shoes.
   (b) One pair of socks.
   (c) One pair of boxer shorts.
   (d) One tee shirt.
   (e) One pullover uniform shirt.
   (f) One pair slip-on uniform pants.

2. For all female inmates will consist of:
   (a) One pair of shoes.
   (b) One pair of socks.
   (c) Two pair of underpants.
   (d) One pair of boxer shorts.
   (e) One brassiere (non-under wire).
   (f) One tee shirt.
   (g) One pullover uniform shirt.
   (h) One slip-on uniform pants.

Initial Linen Issue

(a) All clothing and linen items will be inspected for damage and repaired or replaced as needed. All items in need of repair will be forwarded to the Laundry Room where they will be stored until repairs can be made.
Inmate Hygiene

1. Initial linen issue for all inmates will consist of:
   (a) One bed sheet
   (b) One mattress cover
   (c) Two blankets (Depends if it is a winter or a summer issue)
   (d) One towel

Clothing/Linen Exchange

(a) To provide a systematic clothing and linen exchange program to ensure inmate hygiene and clean living conditions. All inmates will be provided with exchange of clean clothing/linen items in accordance with an established schedule. Under no circumstances will any clothing or linen item (s) be exchanged between inmates or issued to another inmate without first being laundered.

1. Male inmates are provided with one set of socks, one pair of boxer shorts, a tee shirt and a towel on a weekly basis.

2. Female inmates are provided with one set of socks, a brassiere (non under wire), a pair of boxer shorts a tee shirt, a towel and two pairs of underpants on a weekly basis.

(b) Inmates may get their thermal underwear washed on linen exchange days specified for each housing unit. Thermals are to be marked with the inmates name and booking number in block lettering only.

(c) Blankets may be exchanged on the first Sunday of every month or every three months minimum. A request slip must be submitted for tracking purposes.

1. Exchange Schedule:
   (a) A-E Pods: Wednesdays: Boxers, socks, tee shirts, and towels
   (b) A-E Pods: Sundays: All clothing and linens excluding blankets
   (c) F and G Pods: Tuesdays: Boxers, socks, tee shirts, and towels
   (d) F and G Pods: Saturdays: All clothing and linens excluding blankets
   (e) H and I Pods: Linen and laundry exchange daily as needed in male and female dorms; Linen exchange will not be abused in these Pods. Dorm officers will stand by while each inmate exchanges one set of clothing for another. Each inmate is allowed one set of clothing to wear.

2. The laundry room will remain locked and inmates will not have ongoing access to it without permission from the dorm officer.

EXCHANGE PROCEDURE

(a) Laundry Report/ Stocking of the Delivery Carts:
1. The laundry inmate workers will stock the linen carts with the property quantity and type of clothing required for each housing unit.

2. Via the intercom, the Tower/Control Aides will advise the inmates to prepare for clothing/linen exchange.

3. Clothing/Linen exchanges will be conducted in the day rooms of each Housing Unit/ Pod.

4. The Tower/Control Aide will direct (a) inmate, from his or her cell/bunk, to report to the main floor where the Housing Unit Officer will issue the appropriate clothing and linen to him or her.

5. The Housing Unit Officer will direct the inmate to return to his or her cell/bunk and lock down. The Housing Unit Officer will repeat this procedure until all inmates have received their clothing/linen.

6. The inmates will remain by their cells/bunks until all other inmates have received their clothing/linen and the soiled items have been collected.

7. All soiled clothing/linen will be placed into the delivery cart and kept in the 'sally port' area until the clothing/linen exchange is complete. The cart will then be transported to the facility laundry for cleaning.

8. For blood and vermin infested clothing refer to Policy 810.

9. Inmates housed in Pod B will receive clothing/linen exchange through the tray slot.

(b) All clothing/linen will be exchanged on a one for one basis. NO EXCEPTIONS

COLOR CODING FOR INMATE CLOTHING

(a) Pod A Orange Stripes
(b) Pod B Red Stripes
(c) Pod C Black Stripes
(d) Pod D Black Stripes
(e) Pod E Black Stripes
(f) Pod F General Population - Black Stripes, Administrative and Disciplinary Segregation - Green Stripes
(g) Pod G Protective Custody - Orange Stripes, Mental Health - Red Stripes on Pullover top, Green Stripes on pull on pants
(h) Pod H Laundry workers are to be dressed in blue jeans and a blue shirt while working. All inmates are to be dressed in blue while in the dorm. Shirts will be tucked in anytime inmates are out of their dorm.
(i) Pod I Kitchen workers are to be dressed in white while in the kitchen. All inmates are to be dressed in blue while in the dorm. Shirts will be tucked in anytime inmates are out of their dorm.

814.4 LAUNDRY SERVICES
Laundry services shall be managed so that daily clothing, linen and bedding needs are met.

814.5 INMATE ACCOUNTABILITY
To ensure inmate accountability, inmates are required to exchange item for item when clean clothing, bedding and linen exchange occurs.

Prior to being placed in a housing unit, inmates shall be provided with an inmate handbook listing this requirement.

814.6 PERSONAL HYGIENE OF INMATES
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 inmates in compliance with the requirements established by state laws as part of a healthy living environment.

Each inmate held more than 24 hours, who is unable to supply him/herself with the following personal care items because of either indigency or the absence of an inmate canteen, shall be issued the following items (15 CCR 1265):

- Toothbrush
- Dentifrice
- Soap
- Comb
- Shaving implements
- Females - sanitary napkins, panty liners, and tampons as requested

Inmates shall not be required to share any personal care items listed in items "a" through "d."

The Jail 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 inmate’s sex. Additional hygiene items shall be provided to inmates upon request, as needed.

Inmates 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)).
Inmate Hygiene

Inmates, except those who may not shave for reasons of identification in court, shall be allowed to shave daily (15 CCR 1267(b)). The Jail Commander or the authorized designee may suspend this requirement for any inmate who is considered a danger to him/herself or others.

814.6.1 HAIR CARE SPACE
Due to sanitation concerns, the hair care services should be located in a room that is used only for that purpose. The floors, walls, cabinets, counter tops and ceilings should be smooth, non-absorbent and easily cleanable. Each barbering room should have all the equipment necessary for maintaining sanitary procedures for hair care.

After each haircut, all tools that came into contact with the inmate shall be thoroughly cleaned and sanitized according to established guidelines and regulations.

Regulations with detailed hair care cleaning and sanitation requirements shall be posted in a conspicuous place for use by all inmates.

Inmates shall not provide hair care service to any inmate when the skin of the face, neck or scalp is inflamed, or when there is scaling, pus or other evidence of skin eruptions, unless it is performed in accordance with the specific written authorization of the medical director. Any person infested with head lice shall not be given hair care service until cleared by the medical staff.

The hair care services area shall be maintained and kept clean according to the requirements of the state or local board of barbering and cosmetology and the health department standards.

814.7 BARBER AND COSMETOLOGY SERVICES
The Jail Commander or the authorized designee shall be responsible for developing and maintaining a schedule for hair care services provided to the inmate population and will have written policies and procedures for accessing these services (see the Grooming Policy). The Jail Commander shall ensure that the rules are included in the inmate handbook.

814.7.1 SCHEDULE FOR HAIR CARE SERVICES
Inmates 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, inmates will be given an inmate handbook, which details how to request hair care services.

814.8 AVAILABILITY OF PLUMBING FIXTURES
Inmates 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 inmates in housing units is:

- One sink/washbasin for every 10 inmates (24 CCR 1231.3.2(2)).
- One toilet to every 10 inmates (urinals may be substituted for up to one-third of the toilets in facilities for male inmates) (24 CCR 1231.3.1).
814.8.1 SHOWERS - POSSIBLE EXEMPTIONS
Every effort will be made to meet the Title 15 minimum standard on inmate showers, however, inmates housed in safety cells, on suicide watch, or who have special medical conditions which make it unsafe to shower, may be exempted from the daily shower.

814.9 INMATE SHOWERS
Inmates will be allowed to shower upon assignment to a housing unit and at least every other day thereafter, or more often if possible (15 CCR 1266). There should be one shower for every 20 inmates unless federal, state, or local building or health codes differ. Showering facilities for inmates 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 inmates and staff, and shall be recorded and maintained (24 CCR 1231.3.4).

Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates (28 CFR 115.42).

814.10 DELOUSING MATERIALS
Delousing materials and procedures shall be approved through consultation with the Responsible Physician or qualified health care professionals.

814.11 RESPONSIBILITIES
The Jail Commander shall ensure the basic necessities related to personal care are provided to each inmate upon entry into the general population. Appropriate additional personal care items may be available for purchase from the inmate commissary.

814.12 ADDITIONAL PRIVACY REQUIREMENTS
Inmates 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 inmate 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 inmates to promote good health, to reduce tension in the jail and ultimately support the safety and security of the jail. This policy provides guidelines on the preparation of food services items and dietary considerations for inmates housed in the facility.

900.2 POLICY
It is the policy of this office that food services shall provide inmates 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 inmate workers.
- Developing a menu plan that meets all nutrition and portion requirements and can be produced within the available budget.
- Other duties and activities as determined by the Jail Commander.

900.4 MENU PLANNING
All menus shall be planned, dated and available for review at least one month in advance of their use (15 CCR 1242). 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.

Any changes to the meal schedule, menu or practices should be carefully evaluated by the food services manager in consultation with the Jail Commander, dietician, medical staff and other
Food Services

professionals, and shall be recorded. All substitutions will be of equal or better nutritional value. 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 below 41 degrees. All freezers, other than during the defrosting cycle, must maintain a temperature of 0 degrees or lower.

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 inmates 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.

Women 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 inmates in compliance with the parameters of the Religious Programs Policy and the Religious Land Use and Institutionalized Persons Act (RLUIPA).
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 inmates 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
Inmate meals that are served in a dining room or day room should be provided in space that allows groups of inmates to dine together, with a minimum of 15 square feet of space per inmate. 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 inmates receive meals that meet nutritional guidelines.

Inmates 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 to include 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.

Inmates 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 inmates on medical diets in less than the 14-hour period if prescribed by the Responsible Physician or registered dietitian. Inmates 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 inmates to get dressed and be ready for meals. Inmates should be assembled and a head count taken, to verify all inmates 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 inmate movement and meals. Meals shall be served under the direct supervision of staff.
Staff should direct an orderly filing of inmates to the dining room or assigned seating in the day room. Staff should identify inmates who have prescribed therapeutic or authorized religious diets so those inmates 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 inmates to relinquish food during mealtime.

The dining room shall have an area designated for inmates 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, inmates 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 inmates. In the event of an emergency that precludes the preparation of at least one hot meal per day, the Jail 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 Jail 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 inmate food supply drops below that which is needed to provide meals for two days, the Jail 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

902.1 PURPOSE AND SCOPE
The purpose of this policy is to reduce the risk of potential injury to staff, and inmate workers in the food services areas by developing and implementing a comprehensive training program in the use of equipment and safety procedures.

902.2 POLICY
The Lake 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)).

902.3 TRAINING
The food services manager, under the direction of the Jail 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 services manager, at the direction of the Jail 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.
902.4 TESTING
A test should be developed to determine and document that the food services worker understands the proper procedures demonstrated during training. Food services workers are required to pass the test in order to work in the food services area. Upon achievement of a passing score, the food services worker shall acknowledge receipt of the training in writing. The signed document shall be forwarded to the Training Manager and retained in the worker's training file. Contracted service providers should be required to provide documentation and certification of their employees. Only trained personnel are authorized to use food services equipment.

902.5 BRIEFING TRAINING
The food services manager should consider daily briefing training as a method of staff development. Regular and repetitive trainings of short duration (8 to 10 minutes) at the beginning of each shift are an effective and cost efficient way to maintain the competency of staff. A lesson plan and record of attendance should be incorporated into the briefing training. Records of all training, including training for contract workers, should be forwarded to the Training Manager and maintained in the worker's training files in accordance with established records retention schedules.
Dietary Guidelines

904.1 PURPOSE AND SCOPE
The purpose of this policy is to ensure that the nutritional needs of the inmates are met and that overall health is promoted through the use of balanced nutritious diets.

904.2 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).

904.3 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 2011 DRI, 2008 CFG, and the 2015-2020 DGA guidelines (15 CCR 1241). Any deviation from these guidelines shall be reviewed by the Sheriff and/or the Jail 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 dietician, and that any changes meet the DRI, CFG, 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.

904.4 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 et seq.) :

(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 250 mg. of calcium. Juveniles 15-17 years of age or women 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:
Dietary Guidelines

1. One serving of a fresh fruit or vegetable
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 inmate.
Food Services Worker's Health, Safety and Supervision

906.1 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 food services staff and inmate workers.

906.2 POLICY
The Lake 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)).

906.3 FOOD SERVICES MANAGER RESPONSIBILITIES
The food 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 food services staff is available to supervise inmate food services workers. The food services manager should coordinate with the corrections supervisor 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 services manager or the authorized designee shall post daily, weekly and monthly cleaning schedules for the equipment and food preparation area.

906.3.1 FOOD HANDLER PERSONAL HYGIENE REQUIREMENTS
The Food Services Manager will ensure that ALL food handlers working in the food services area will:

(a) Employ hygienic food handling techniques, i.e. using appropriate preparation and meal service devices as designated (tongs, gloves, ladles, etc.)

(b) Handlers will shower and shampoo their hair daily.

(c) Wear clean, washable uniforms.

(d) Wash hands
   1. Upon reporting for duty
   2. After using the toilet facilities
   3. After handling garbage
   4. After any potential unsanitary practice, i.e. smoking
Food Services Worker's Health, Safety and Supervision

(e) Maintain hands clean with short, clean fingernails.
(f) Wear hairnets that will be issued daily from the Food Service Office
(g) Be clean-shaven with no facial hair, or wear beard covers (males)

The Food Service Manager and his or her designee will make daily health and safety inspections of all food handlers at the beginning of each shift to ensure:

(a) The absence of apparent illness and/or infection
(b) The adherence to dress code and sanitation codes and practices.

906.4 MEDICAL SCREENING
The food services manager shall work cooperatively with the Responsible Physician 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.
(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.
Food Services Worker's Health, Safety and Supervision

(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 transmissible 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.

906.4.1 INMATE WORKERS HEALTH, HYGIENE & SAFETY POLICY

The Food Service unit of the Lake County Hill Road Correctional Facility will comply with all applicable Federal, State and local health laws and regulations in order to provide for adequate health and safety protection for all inmates, staff and visitors.

(a) Health Compliance

1. All inmate workers will receive medical clearance prior to job assignments in the kitchen and must have periodic exams thereafter.

2. The medical examination will be performed by contracted medical staff to ensure that all inmate workers working in the food services are free from, by not limited to: diarrhea, skin infections and any other illnesses transmissible through food.

3. The supervising manager Food Service Manager or cook will monitor inmate workers to ensure good health and cleanliness.

4. If the Food Service Manager or cook observes or has knowledge of a health problem, with an inmate worker, the worker will need to be cleared by medical staff before continuing work in food services.

5. If the Food Services Manager or cook observe a hygiene problem with an inmate kitchen worker, a Correction Officer will be notified immediately.

6. If the Housing Unit Officer is unable to resolve the problem, the Shift Supervisor will be contacted immediately.

7. All such incidents will be logged.
906.5 TRAINING REQUIREMENTS FOR FOOD SERVICES WORKERS
The food 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. Food services workers should receive periodic supplemental training as determined by the food services manager (15 CCR 1243(g)).

The training curriculum for inmate food services workers should include, at minimum, the following topics:

- 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

906.6 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 Jail 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.

906.6.1 INMATE FOOD SERVICE WORKER RULES
Inmates will follow all rules as designated in the Lake County Sheriff's Office Custody Information Booklet

(a) Inmates Will follow all food code regulations as explained to them by the Food Service Staff. Inmates MUST adhere to the following rules:

(b) Inmates will not bring anything into the kitchen unless it is authorized by kitchen or facility staff.

(c) Inmates will keep their break room clean at all times.

(d) Inmates will perform extra duties as required.

(e) Inmates will shower daily

(f) Inmates will come to work in clean clothing

(g) Inmates will be polite and respectful to all staff

(h) Inmates will follow the cook's verbal and written directions to prepare meals

(i) Inmates will follow safety guidelines while using any and all kitchen equipment.

Failure to follow the rules may result in removal from the kitchen and/or a write-up.

906.7 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. Food Service staff should supervise the transport and delivery of food to the respective serving areas. Food Service staff should ensure the food is protected during transportation, delivered to the right location efficiently and under the right temperatures.

Food 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 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 reported to the food services manager as soon as practicable.
Food Preparation Areas

**908.1 PURPOSE AND SCOPE**
This policy is intended to ensure the proper design and maintenance of the food preparation area.

**908.2 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.

**908.2.1 FOOD SERVICE EQUIPMENT SAFETY**

(a) Food Service Equipment Safety Inspections

1. All food service areas and equipment will be inspected daily by food service personnel, to ensure that the functions are carried out under acceptable sanitary and safe conditions in compliance with established health and safety codes.

   (a) Refrigeration and water temperatures will be checked daily

   (b) Inspections and findings or temperature on refrigerators and freezers will be recorded daily by food services personnel

2. Food services personnel will ensure that all work areas will be kept clean, sanitary, and free of health and safety hazards.

3. Cutlery control will be maintained as per policy and procedures.

   (a) The kitchen knives will be locked in the Kitchen Office at the beginning and the end of each shift.

   (b) The supervising cook will inventory all kitchen knives at the beginning and end of each shift.

   (c) A log entry will be made showing the date, time and results of each inventory.

   (d) A missing knife will be searched for immediately by the kitchen staff and inmate kitchen workers

   (e) A log will show the knife as missing and signed

   (f) The supervising cook will notify the shift supervisor

   (g) The supervising cook will write an incident report, if the missing knife is not found.

4. All manufacturers' handbooks for each piece of equipment in the food services area will be made available to all personnel during kitchen working hours and will be kept in the Food Services Office.
5. In the event of any equipment breakdown, maintenance will be notified immediately and a work order completed.

6. The food services division will be monitored by Lake County Environmental Health Services on an annual basis.

908.3 COMPLIANCE WITH CODES
The Jail Commander 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).

908.4 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).

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)).
Food Preparation Areas

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.

908.5 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 food 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 food 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).

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

910.1 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.

910.2 POLICY
The Lake 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)).

910.3 FOOD SERVICES MANAGER RESPONSIBILITIES
The food 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 food 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.

910.4 PROCEDURE
The food 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.
4. Authorized religious diet meals served.
5. Authorized disciplinary isolation diet meals served.
Food Budgeting and Accounting

(d) Ensuring that food is purchased from an approved wholesale/institutional vendor to ensure food safety.

(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:

1. 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.
10. 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
Food Budgeting and Accounting

equipment for the required period of time, as mandated by the governing body of the facility.

910.5 MONTHLY REPORTING

The food 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.

A monthly report summarizing all data should be provided to the Jail Commander.

All meal records shall be retained in accordance with office retention schedules and state statutory regulations.
Inspection of Food Products

912.1 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 jail system.

912.2 POLICY
The Lake 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.

912.2.1 FOOD INSPECTION PROCEDURES
The food 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 foodstuffs to the jail kitchens and to the inmates occurs promptly to reduce the risk of any food-borne illness or contamination.

The food services manager shall establish inspection procedures in accordance with established standards and statutes. Such procedures shall include, but are not limited to:

(a) A system of periodic audits and inspections of the facility, either by custody staff or by a third-party vendor.

(b) 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.

(c) Processes of evaluating the effectiveness of training, and validating cleanliness through testing (e.g., swabs, bio luminescence and visual, taste and odor evaluations), shall be created and implemented. Records of all such activities shall be documented.

(d) Documentation of any recommendations for continuous quality improvement and their implementation; the intent is to eliminate deficiencies. Documentation should include a post-deployment verification of the correction.

(e) The food 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.
4. There are clear, 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.

6. 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

914.1 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.

914.2 POLICY
It is the policy of the Lake 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)).

914.3 CLEANING AND INSPECTIONS BY STAFF
The food 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 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 Jail Commander or the authorized designee, the food services manager shall take prompt action to correct any identified problems.

914.3.1 SAFETY INSPECTION CHECKLIST
The following items should be part of the weekly inspection:

- Lighting is adequate and functioning properly.
- Ample working space is available.
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.
914.4 CONTRACTING FOR INSPECTION

The food services manager is responsible for ensuring that the food services operation works in accordance with all state and local laws and regulations.

The Jail Commander shall contract with an independent, outside source for periodic inspection of the food services facilities and equipment, to ensure that established state and local health and safety codes have been met.

Documentation of the inspections, findings, deficiencies, recommended corrective actions and verification that the corrective standards were implemented will be maintained by the facility in accordance with established records retention schedules.

A contract for services from an independent and qualified inspector should include, but is not limited to, the following components:

(a) The inspector should conduct a pre-inspection briefing with the Jail Commander and other appropriate personnel, including the food services manager, to identify the applicable government health and safety codes and the areas to be inspected. The inspector should provide the necessary equipment to conduct the inspection.

(b) The inspector should audit the policies and procedures of the food services operation.

(c) During the course of the inspection, the inspector should study and report on whether the following meet acceptable standards:

1. Walls, ceilings and floors are in good condition, smooth and easily cleanable.
2. The kitchen layout is properly designed to avoid cross-contamination.
3. The kitchen is properly lighted and ventilated.
4. The temperature controlled storage areas are in good operating condition and proper temperatures are being maintained.
5. Dry foods are properly stored off the floor, away from the walls and ceilings.
6. There is no sign of vermin infestation.
7. All equipment is in good and sanitary condition and is certified by one of the American National Standards Institute certification agencies e.g., Underwriters Laboratories, or Extract, Transform and Load, and the National Science Foundation product certification marks.
8. The dishwashing equipment is clean, in good operating condition and maintains proper washing and rinsing temperatures.
9. There is no evidence of cross-contamination between the potable and contaminated water systems.
10. The ware washing area is clean and supplied with proper chemicals and Material Safety Data Sheets.
Food Services Facilities Inspection

11. The food is properly stored, labeled and rotated according to first-in first-out procedures.

12. The food services staff and inmate workers are wearing clean uniforms and practice proper personal hygiene.

13. All food services workers are trained for proper food handling and there is a person in charge who is responsible for the food safety of the facility.

14. There are ample hand-washing stations supplied with warm water under pressure, soap, a method to dry hands, a waste container and employee hand-washing signs.

Any deficiencies should be noted by the inspector in his/her inspection report, and recommendations made for corrective action.

At the exit interview, the inspector should cite any violations according to the government health and safety codes.

The inspector should conduct a follow-up inspection to verify the deficiencies have been corrected as recommended.

The food services manager should provide the Jail Commander with a plan to implement the recommended corrections in a timely manner and schedule a post-correction inspection with the original independent inspector.
Food Storage

916.1 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.

916.2 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)).

916.3 PROCEDURES
The food 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, food services staff 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 food 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.

916.4 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 45 and 80 degrees. Temperatures shall be monitored and recorded once each day on a checklist.
**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.

916.4.1 MAINTENANCE OF DRY FOOD STORAGE AREAS
Inmate workers or staff should clean the storage areas at least once 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. Food services staff should inspect the storage areas to ensure they are clean and orderly. Staff will document the inspection and record the daily temperature on the storage area checklist (15 CCR 1243(m)).

916.5 REFRIGERATED AND FROZEN STORAGE
Unless health codes dictate otherwise, refrigerators must be kept between 32 and 41 degrees. Deep chill refrigerators will be set between 28 and 32 degrees for cook-chill products, dairy and meat items, to extend shelf life. Freezers shall be maintained at 32 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.

916.5.1 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. Food 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)).

916.5.2 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.

916.6 WASTE MANAGEMENT
The food services manager shall develop and maintain a waste management plan that ensures the garbage is removed daily (15 CCR 1243(l)). This plan also should include methods to minimize the waste of edible food and to dispose of non-edible or waste food material without utilizing a landfill.
Prescribed Therapeutic Diets

918.1 PURPOSE AND SCOPE
The purpose of this policy is to ensure that inmates 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.

918.2 POLICY
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 Jail Commander shall comply with any therapeutic diet prescribed for an inmate.

(d) The Jail Commander and the Responsible Physician shall ensure that the therapeutic diet manual, which includes sample menus of therapeutic diets, shall be available in both the health services and food services work areas for reference and information. A registered dietitian shall review, and the Responsible Physician shall approve, the therapeutic 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 inmate developing an adverse medical condition or nutritional effect as the result of a diet that is inconsistent with the inmate’s current medical needs. A diet request form should be made available to inmates.

Pregnant or lactating women shall be provided a balanced, nutritious diet approved for pregnant women by a physician (15 CCR 1248).

918.3 STAFF COMMUNICATION/COORDINATION
It is the responsibility of the health authority to compile a daily log of all inmates who are prescribed therapeutic diets. The log should contain the following information:

(a) Inmate’s name

(b) Inmate’s identification number

(c) Housing location or dining location where the meals will be delivered

(d) Therapeutic diet type

(e) Special remarks or instructions

Any time inmates are moved, correctional staff must notify the food services personnel immediately.
Prescribed Therapeutic Diets

SPECIAL DIETS

(a) Medical Diet
   1. A copy of the Special Diet Manual will be available in the Medical Office and in
      the Food Services Office for reference and information.
   2. The specific reason for dietary modifications is defined in the Special Diet
      Manual.
   3. Special diets will be kept as simple as possible and will conform as closely as
      possible to the foods outlined in the menu.
   4. Medical diets will be ordered for a specific number of days, not to exceed thirty
      (30). Diet orders will be written by the Medical Staff for each thirty-day (30)
      period.

(b) Medical Diet Request
   1. The Medical Staff will submit a written diet prescription to the Food Services
      Supervisor.
   2. The Food Services Supervisor will maintain a file of all special diet prescriptions.
   3. The Food Services Supervisor will instruct Food Service personnel of the
      appropriate foods to include for a specific diet. The instructions will be recorded
      on the Special Diet Log.
   4. Special Diets requiring specific nutrient calculations or drastic restrictions will be
      written up and signed by the Health Authority.
   5. The Housing Unit Officer will check the meal log to ensure that the inmate
      receives the special diet.

918.4 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 inmate 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) Inmate's name
(b) Inmate's identification number
(c) Housing location or dining location where the meals will be delivered
Prescribed Therapeutic Diets

(d) Inmate’s therapeutic diet type

(e) A list of items provided for the meal

The custody staff responsible for meal distribution shall ensure that any inmate who has been prescribed a therapeutic meal by the Responsible Physician or the authorized designee receives the prescribed therapeutic meal. Inmates who receive a therapeutic meal should sign for receipt of the meal.

Therapeutic meal receipts should be retained in the inmate'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.

Inmates who are receiving therapeutic diets must receive clearance from the Responsible Physician before he/she may receive a religious or disciplinary diet.

If prescribed by the Responsible Physician, supplemental food shall be served to inmates more frequently than the regularly scheduled meals. An inmate who misses a regularly scheduled meal shall receive his/her prescribed meal.

918.4.1 RELIGIOUS DIETS
The Lake County Sheriff’s Office Hill Road Correctional Facility is a no pork facility. The facility offers, upon an approved request, a lacto-ovo vegetarian diet for the religious diet. This diet meets both the nutritional and most religious dietary requirements of inmates requesting special diets. The facility is unable to offer all types of religious diets as in doing so it would create a substantial burden. Offering the lacto-ovo vegetarian diet is the least restrictive means to complying with inmates religious rights.

RELIGIOUS DIET REQUESTS
An inmate will submit a completed Religious Diet Request Form to the officer on duty. The officer will forward the completed Religious Diet Request Form to the designated Chaplin or other religious official. The Chaplin or other religious official will then review the request and approve or deny the request, based on his or her interview with the inmate. The Chaplain or other religious official will forward approved religious diet requests to the Food Services Supervisor. The Food Services Supervisor will instruct Food Services personnel as to the inmate’s special diet. The instructions will be recorded and a log will be created to include the inmate’s name, booking number and housing within the facility.

918.5 THERAPEUTIC AND RELIGIOUS MEAL RECORDS
Inmates receiving prescribed therapeutic diet meals and/or authorized religious diet meals must sign a document indicating the following:

- Inmate’s name
- Inmate’s identification number
Prescribed Therapeutic Diets

- Housing location or dining location where the meals will be delivered
- Inmate’s therapeutic diet type
- A list of items provided for the meal

All information regarding a therapeutic diet is part of an inmate’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

920.1 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.

920.2 PROCEDURE
The food services manager shall prepare the disciplinary separation diet after receiving directions from the Jail 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)).

920.3 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 ½ oz. whole wheat flour
(i) ¼ tsp. salt
(j) 4 tsp. raw onion, chopped
(k) 1 egg
(l) 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.
Disciplinary Separation Diet

920.4 POLICY
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 Services Officer, who manages a range of programs and services.

1000.2 POLICY
The Lake 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 SERVICES OFFICER RESPONSIBILITIES
The Inmate Services Officer is selected by the Jail Commander and is 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 Jail Commander (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 Jail Commander.

(i) Ensure inmates are not denied access to educational and vocational programs based solely on their indigent status.
Inmate Programs and Services

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 Services Officer will develop individualized programs and services for inmates who are housed in high-security or administrative segregation.

1000.5 INMATE VOTING

GENERAL INFORMATION: Inmates who are eligible to vote in local, State and Federal elections shall vote by an Absentee Ballot, via the U.S. Postal Service. Inmates who are serving time on felony convictions and/or on parole for felony conviction are excluded from voting.

PROCEDURE:

(a) REGISTERING TO VOTE
   (a) In order to be eligible to vote in an upcoming election, an inmate must register no later than 29 days prior to that election.
   (b) Inmates may register to vote by requesting a Voters Registration Form from the:

       Inmate Programs Officer

       Upon completion of the form, it is to be mailed by the inmate to:

       Lake County Elections Office
       255 North Forbes Street
       Lakeport, CA 95453

(a) ABSENTEE BALLOT
   (a) The inmate shall write the Registrar of Voters, in the county in which he/she is registered, to request an absentee ballot. The inmate must provide the following information:

   1. Printed name as registered
   2. Written signature as registered
   3. Current address as registered
   4. Address to which the absentee ballots are to be sent.

   (a) All requests for absentee ballots must be received by the Registrar of Voters no later than seven (7) days prior to the election.

1000.6 COUNTY PAROLE PROGRAM

GENERAL INFORMATION:
Inmate Programs and Services

1. **Personnel:** As provided by law, the Board shall consist of the Sheriff of Lake County or his/her designee, the Probation Officer of Lake County or his/her designee, and one non-public official selected by the Presiding Judge of the Superior Court of Lake County.

   a. The Board, at its discretion, may appoint a Parole Officer, either from within or outside its membership, who shall perform such duties and exercise such powers with reference to the processing of parole applications and the supervision and assistance of parolees as shall be fixed from time to time by the Board. The Parole Officer, at the discretion of the Board, may be designated as Secretary of the Board.

2. **Meetings:** Regular meetings of the Board shall be held once each month, every third Thursday of each month.

   a. Attendance at any regular or special meeting of at least two members of the Board, or properly accredited members as provided in Section 3085 of the California Penal Code of the State of California, shall be necessary to constitute a quorum for the transaction of any business or exercise of any powers of the Board.

   b. At each meeting of the Board the Secretary (Parole Deputy) shall present to the Board for its consideration all applications for parole that have been submitted to him and have not yet been finally acted upon by the Board.

   c. **Meetings** of the Board shall be private and no persons, other than the members of the Board (or their duly designated Officers) and the Parole Deputy shall attend without the consent of the Board except, applicants may be permitted to appear before the Parole Board at the hearing of their application and to speak in their own behalf.

   d. The Secretary shall keep full, true, and correct minutes of each meeting of the Board wherein there shall be recorded all matters considered and dispositions thereof. The minutes of each meeting shall be submitted to the Board for adaptation at the next regular meeting.

4. **Eligibility and Application for Parole:** Any prisoner who has completed one half of his total sentence is eligible for parole and may immediately make application as designated by the Board. No application shall be accepted unless the designated form is properly and accurately completed by the applicant.
a. Any Deputy Sheriff, upon receipt of any application for parole shall forthwith refer the same to the Parole Deputy, for investigation and report to the Board. The report and recommendations of the custody staff, the Parole Deputy and any other written communications and reports from any person shall be appended to the application as part thereof.

b. The Parole Deputy shall submit to the Board the report and recommendations as soon as practicable following receipt of the application, and in no event beyond the date of the regular meeting next following such receipt, except with the prior consent of the Board. (The report should include a summary of the reports) concerning the current offenses, prior criminal record, and any other background and personal data concerning the applicant, together with all other pertinent material bearing on the application.

c. The Board may itself conduct such further investigation as it may determine in its discretion and may continue from time to time the hearing on any application. The County Parole Deputy shall cause to be filed and maintained with the records of the Board all parole applications, with enclosures, together with the reports and recommendations herein above specified and shall endorse on the respective applications the record of any action taken by the Board with respect hereto and the date or dates of such action.

5. Policies Governing Granting or Denial of Parole: The granting of parole is not considered as a right, but as an act of leniency. In this regard the Board adopts the following policies:

a. The Board may parole any prisoner within its jurisdiction, as provided by law, for a term not to exceed two years upon such conditions as the Board may deem fit and proper for his/her rehabilitation. Unless otherwise specified in any particular order granting parole, the following conditions, hereinafter called “Standard Conditions”, shall be applicable to all paroles granted. The parolee, during the period of his/her parole, shall:

Report in writing or in person once each month or more to such person as designated by the Board and provide such information as may be required.

Refrain from leaving the County of Lake without first having obtained the permission of the Parole Deputy or Board.
Inmate Programs and Services

Not remain away from regular residence for more than 48 hours without first having secured permission from the Parole Deputy.

Comply with all municipal, county, state, and federal laws.

Submit his/her person, property, and vehicle to search and seizure at any time of the day or night by any Law Enforcement Officer, with or without a warrant. Be subject to random urine testing by the Parole Deputy.

Not associate with persons who use, handle or have in their possession alcoholic beverages, narcotics, and/or dangerous drugs of any kind, unless such narcotics are prescribed by a lawfully licensed physician.

Not associate with persons who use, handle, or have in their possession alcoholic beverages, narcotics, and or dangerous drugs of any kind nor be in any place where illicit narcotics and/or dangerous drugs are present or being used, during time of parole. This applies to bars or gambling houses whether lawful or unlawful games.

Seek and pursue gainful employment or be a full-time student (12 units or more). In addition to, or in lieu of all or some of the foregoing Standard Conditions, the Parole Deputy, subject to the approval of the Board, or the Board, may, in her/his or its discretion, provide Special Conditions of any parole for rehabilitation of a prisoner.

b. Except as hereinafter provided in Rule 5c, no application for parole will be granted if the applicant:

(a) Is serving a sentence of 60 days or less.
(b) Has previously suffered a revocation of county parole for violation of the terms thereof.
(c) Has not, at the time of his application for parole, served at least one-half of the original sentence, including good time and work time accrued up to day of county parole, i.e. 360 day sentence at one-half (180 day) minus 60 good and work credits accrued would mean eligibility for county parole after serving 120 days.
(d) Does not have a record of good conduct while in current confinement, as certified to by the Officer in Charge of his place of confinement.
(e) Has been committed on consecutive sentences, and has not served his entire term or terms (less “good time” and “work time” credits) on all but the last sentence, and, has
not served at least one-half of his last sentence, disregarding “good time” and “work time” credits applicable to said sentence.

(f) Has failed to furnish satisfactory evidence to the Board that immediate employment or education will be available to her/him by some known, responsible and reputable person, school, firm, or corporation, or that she/he has been engaged in and will resume self-employment in some reputable business or profession.

(g) Does not convince the Board that, if paroled, she/he will live and remain at liberty as a good and law abiding citizen, and that her/his release is not incompatible with the welfare of society or the ends of justice.

c. The Board may parole any prisoner within its lawful jurisdiction at any time if it satisfactorily appears that unusual or emergency conditions or circumstances exist which warrant special consideration by the Board, notwithstanding that such prisoner may be ineligible for parole under provisions of Rule 5b, above. In granting an emergency application, the Board at its discretion, may grant a “temporary” or “conditional” parole to a designated place, or for a particular purpose, for a specified time, and provide for the automatic return to confinement of the prisoner at a fixed or ascertainable date, irrespective of (the absence of) any violation, to complete the unserved portion of his sentence.

d. The Board may grant a parole to become effective at some later date upon the happening of some future contingency.

e. No prisoner shall be released on parole unless and until she/he shall have signed an agreement accepting the terms and conditions of his parole and promising to abide thereby.

6. **Revocation of Parole:** If it shall appear to the Board that any paroled prisoner under its jurisdiction shall, during the period of his parole, have violated any of the conditions of his parole, the Board, at its discretion, May without notice, order the parole revoked and the prisoner returned to the place of confinement from which she/he was paroled, to be confined therein for the unserved portion of his sentence. Such order and warrant shall be executed, and shall specify the particular violations committed.

Such prisoner may, within 48 hours after her/his return to custody, notify the Parole Officer in writing that she/he denies any parole violation, and in such event he shall be permitted to present evidence in support of her/his position at the next regular meeting (or any special meeting called
Inmate Programs and Services

for that purpose) of the Board at which time a full hearing on the question of violation shall be accorded to such prisoner.

If, after such hearing and reconsideration, the Board shall determine that the prisoner's parole was not in fact violated, it shall rescind the order revoking parole, and shall reinstate the prisoner's parole. Regardless of any other terms or conditions outlined in this paragraph, any person in custody for violation of parole, or having been sentenced on a new charge, must appear before the Board at the first meeting of the Board scheduled to be held at the facility where the prisoner is confined.

The “reasonable” rules and regulations established by the County Board of Parole Commissioners for the conduct of such prisoners as provided in Section 4019 of the California Penal Code for the granting of “good-time” credits, are hereby deemed and declared to be all rules and regulations regularly adopted by the officer in Charge of the Place of confinement of any prisoner, which are in force and effect at such place of confinement during the imprisonment of such prisoner.

1000.7 DISCLAIMER

Inmate programs are provided at the sole discretion of the Lake 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.
County Parole Program

1001.1  POLICY
1. Personnel: As provided by law, the Board shall consist of the Sheriff of Lake County or his/her designee, the Probation Officer of Lake County or his/her designee, and one non-public official selected by the Presiding Judge of the Superior Court of Lake County.

   a. The Board, at its discretion, may appoint a Parole Officer, either from within or outside its membership, who shall perform such duties and exercise such powers with reference to the processing of parole applications and the supervision and assistance of parolees as shall be fixed from time to time by the Board. The Parole Officer, at the discretion of the Board, may be designated as Secretary of the Board.

2. Meetings: Regular meetings of the Board shall be held once each month, every third Thursday of each month.

   a. Attendance at any regular or special meeting of at least two members of the Board, or properly accredited members as provided in Section 3085 of the California Penal Code of the State of California, shall be necessary to constitute a quorum for the transaction of any business or exercise of any powers of the Board.

   b. At each meeting of the Board the Secretary (Correctional Parole Officer) shall present to the Board for its consideration all applications for parole that have been submitted to him and have not yet been finally acted upon by the Board.

   c. Meetings of the Board shall be private and no persons, other than the members of the Board (or their duly designated Officers) and the Parole Officer shall attend without the consent of the Board except, applicants may be permitted to appear before the Parole Board at the hearing of their application and to speak in their own behalf.

   d. The Secretary shall keep full, true, and correct minutes of each meeting of the Board wherein there shall be recorded all matters considered and dispositions thereof. The minutes of each meeting shall be submitted to the Board for adaptation at the next regular meeting.

4. Eligibility and Application for Parole: Any prisoner who has completed one half of his total sentence is eligible for parole and may immediately make application as designated by the Board.
No application shall be accepted unless the designated form is properly and accurately completed by the applicant.

a. Any Correctional Officer, upon receipt of any application for parole shall forthwith refer the same to the Parole Officer, for investigation and report to the Board. The report and recommendations of the custody staff, the Parole Officer and any other written communications and reports from any person shall be appended to the application as part thereof.

b. The Parole Officer shall submit to the Board the report and recommendations as soon as practicable following receipt of the application, and in no event beyond the date of the regular meeting next following such receipt, except with the prior consent of the Board. (The report should include a summary of the reports) concerning the current offenses, prior criminal record, and any other background and personal data concerning the applicant, together with all other pertinent material bearing on the application.

c. The Board may itself conduct such further investigation as it may determine in its discretion and may continue from time to time the hearing on any application. The County Parole Officer shall cause to be filed and maintained with the records of the Board all parole applications, with enclosures, together with the reports and recommendations herein above specified and shall endorse on the respective applications the record of any action taken by the Board with respect hereto and the date or dates of such action.

5. Policies Governing Granting or Denial of Parole: The granting of parole is not considered as a right, but as an act of leniency. In this regard the Board adopts the following policies:

a. The Board may parole any prisoner within its jurisdiction, as provided by law, for a term not to exceed two years upon such conditions as the Board may deem fit and proper for his/her rehabilitation. Unless otherwise specified in any particular order granting parole, the following conditions, hereinafter called “Standard Conditions”, shall be applicable to all paroles granted. The parolee, during the period of his/her parole, shall:

1. Report in writing or in person once each month or more to such person as designated by the Board and provide such information as may be required.
2. Refrain from leaving the County of Lake without first having obtained the permission of the Parole Officer or Board.
3. Not remain away from regular residence for more than 48 hours without first having secured permission from the Parole Officer.

4. Comply with all municipal, county, state, and federal laws.

5. Submit his/her person, property, and vehicle to search and seizure at any time of the day or night by any Law Enforcement Officer, with or without a warrant. Be subject to random urine testing by the Parole Officer.

6. Not associate with persons who use, handle or have in their possession alcoholic beverages, narcotics, and/or dangerous drugs of any kind, unless such narcotics are prescribed by a lawfully licensed physician.

7. Not associate with persons who use, handle, or have in their possession alcoholic beverages, narcotics, and or dangerous drugs of any kind nor be in any place where illicit narcotics and/or dangerous drugs are present or being used, during time of parole. This applies to bars or gambling houses whether lawful or unlawful games.

8. Seek and pursue gainful employment or be a full-time student (12 units or more). In addition to, or in lieu of all or some of the foregoing Standard Conditions, the Parole Officer, subject to the approval of the Board, or the Board, may, in his or its discretion, provide Special Conditions of any parole for rehabilitation of a prisoner.

b. Except as hereinafter provided in Rule 5c, no application for parole will be granted if the applicant:

1. Is serving a sentence of 60 days or less.

2. Has previously suffered a revocation of county parole for violation of the terms thereof.

3. Has not, at the time of his application for parole, served at least one-half of the original sentence, including good time and work time accrued up to day of county parole, i.e. 360 day sentence at one-half (180 day) minus 60 good and work credits accrued would mean eligibility for county parole after serving 120 days.

4. Does not have a record of good conduct while in current confinement, as certified to by the Officer in Charge of his place of confinement.

5. Has been committed on consecutive sentences, and has not served his entire term or terms (less “good time” and “work time” credits) on all but the last sentence, and, has not served at least one-half of his last sentence, disregarding “good time” and “work time” credits applicable to said sentence.

6. Has failed to furnish satisfactory evidence to the Board that immediate employment or education will be available to him by some known, responsible and reputable person,
school, firm, or corporation, or that he has been engaged in and will resume self-
employment in some reputable business or profession.

7. Does not convince the Board that, if paroled, he will live and remain at liberty as a
good and law abiding citizen, and that his release is not incompatible with the welfare of
society or the ends of justice.

c. The Board may parole any prisoner within its lawful jurisdiction at any time if it satisfactorily
appears that unusual or emergency conditions or circumstances exist which warrant special
consideration by the Board, notwithstanding that such prisoner may be ineligible for parole
under provisions of Rule 5b, above. In granting an emergency application, the Board at its
discretion, may grant a “temporary” or “conditional” parole to a designated place, or for a
particular purpose, for a specified time, and provide for the automatic return to confinement of
the prisoner at a fixed or ascertainable date, irrespective of (the absence of) any violation, to
complete the unserved portion of his sentence.

d. The Board may grant a parole to become effective at some later date upon the happening
of some future contingency.

e. No prisoner shall be released on parole unless and until he shall have signed an agreement
accepting the terms and conditions of his parole and promising to abide thereby.

6. Revocation of Parole: If it shall appear to the Board that any paroled prisoner under its
jurisdiction shall, during the period of his parole, have violated any of the conditions of his parole,
the Board, at its discretion, May without notice, order the parole revoked and the prisoner returned
to the place of

confi ne ment from which he was paroled, to be confined therein for the unserved portion of his
sentence. Such order and warrant shall be executed, and shall specify the particular violations
committed.

Such prisoner may, within 48 hours after his return to custody, notify the Parole Officer in writing
that he denies any parole violation, and in such event he shall be permitted to present evidence in
support of his position at the next regular meeting (or any special meeting called for that purpose)
of the Board at which time a full hearing on the question of violation shall be accorded to such
prisoner.

If, after such hearing and reconsideration, the Board shall determine that the prisoner’s parole was
not in fact violated, it shall rescind the order revoking parole,, and shall reinstate the prisoner’s
parole. Regardless of any other terms or conditions outlined in this paragraph, any person in
custody for violation of parole, or having been sentenced on a new charge, must appear before
the Board at the first meeting of the Board scheduled to be held at the facility where the prisoner is confined.

The “reasonable” rules and regulations established by the County Board of Parole Commissioners for the conduct of such prisoners as provided in Section 4019 of the California Penal Code for the granting of “good-time” credits, are hereby deemed and declared to be all rules and regulations regularly adopted by the officer in Charge of the Place of confinement of any prisoner, which are in force and effect at such place of confinement during the imprisonment of such prisoner.
Inmate Welfare Fund

1002.1 PURPOSE AND SCOPE
The Office is authorized to maintain a fund derived from proceeds from the commissary, telephones and other inmate-related commerce activities, to be used primarily to provide welfare and education programs for the benefit of the inmate population. This policy establishes guidelines for maintaining and administering the Inmate Welfare Fund.

1002.2 INMATE WELFARE FUND
The Inmate Services Officer, in cooperation with the Finance Department, 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).

1002.3 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

1002.4 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
Inmate Welfare Fund

3. Library books
4. Vending machines
(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
(l) Inmate activity programs, including:
   1. Equipment for television viewing
   2. 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
   10. Entertainment equipment, cable or satellite subscription services and other related supplies
   11. Materials for faith-based programs

1002.4.1 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:
Inmate Welfare Fund

(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

(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

1002.4.2 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).

1002.5 POLICY
It is the policy of this office to maintain and administer an Inmate Welfare Fund that supports inmate programs.
Inmate Accounts

1004.1 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.

1004.2 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 Jail Commander.

1004.3 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.

1004.3.1 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 acknowledgment agreeing to the amount.

PROCEDURE
(a) All money is to be counted in the presence of the inmate and placed in a money envelope by the Booking Officer. The Booking Officer Will fill out the following information on the money envelope:

1. Inmate name
2. Booking number
3. Date
4. Cash received (list the amounts)
5. Signature of the Booking Officer
6. Staff members are required to sign all forms legibly. If you cannot sign your signature legibly, please print your name below your signature with your J#.

7. There must be a second signature by another witnessing officer.

(b) The money seized and placed in the money envelope will immediately be secured in the safe located in the booking area. **AT NOT TIME WILL ANY MONEY ENVELOPE BE LEFT UNATTENDED IN BOOKING OR ON A SERGEANT’S DESK.**

(c) The Booking Officer will enter the amount of money taken, in the RIMS Property screen.

1004.3.2 DEPOSITS THROUGH THE MAIL

All funds received by mail will be deposited to an inmate’s account shall be delivered to the cashier after signed acknowledgment by the inmate.

Only money orders and cashier’s checks that are received through the mail are acceptable for deposit into inmate accounts. All personal checks, payroll checks and other unapproved monies will be returned to the sender.

**Receipting/Routing of Money Orders and Certified Checks**

(a) All money orders or cashier’s checks received for inmates at the Hill Road Correctional Facility must be receipted for auditing purposes. Money orders and cashier’s checks are received through the mail for inmates in custody at the facility. These money orders or cashier’s checks are to be put on the books for the inmate so he or she can purchase commissary items. Night shift officers are responsible for opening and checking the mail addressed to inmates. Any cash or personal checks will be returned to the sender.

(b) All inmate mail is opened in the Male Dorm, by the assigned Male Dorm Officer. A receipt must be issued for any money order or cashier’s check received in the mail. The receipt for the money order or cashier’s check must be placed in the money envelope. A receipt book containing numbered receipts is located in the male dorm and another at the reception desk. The receipt books contain four-part receipts. The officer will complete the following portions of the receipt:

1. Date - current date
2. Received from - this is the name of the person sending the money order or cashier’s check. First initial and full Last Name is sufficient
3. No address is necessary
4. The dollar amount of the money order or cashier's check.
5. The 'for' line will contain the name of the inmate: last name, first name, booking number and housing unit.
6. Department is ‘2301’.
Inmate Accounts

7. ‘By’ is the name (and J#) of the officer filling out the receipt for the money order or cashier’s check.

8. The Receipt book number is placed at the top right hand corner under the "tear here" line of the money envelope.

(c) Distribution of Receipts

1. ‘White’ goes to the person placing the money on the books, or to the inmate if received in the mail.

2. ‘Yellow’ will be paper clipped to the money order or cashier's check, and placed in the money envelope.

3. ‘Pink’ goes to the inmate.

4. ‘Golden' will stay in the receipt book for tracking purposes.

(d) If a receipt is incorrectly filled out, it cannot be destroyed. Write "VOID" across the receipt and leave ALL FOUR copies in the receipt book.

(e) The receipt book will be returned to its designated area. The money orders and yellow receipts will be placed in the booking safe after being signed by the inmate and entered in the accounting screen of the In-Custody system. The mail, with the original copy for the inmate will be distributed in the usual manner with the remainder of the mail at mail call.

(f) Money orders and cashier's checks, made payable to the inmate, are also accepted if brought to the Facility Reception Desk.

1. Money orders and cashier's checks will be accepted Monday - Friday 8:00 a.m. - 3:30 p.m.

2. During visiting hours

(g) Under no circumstances are money orders or cashier's checks to be left unattended.

1004.3.3 VISITOR DEPOSITS

Only approved visitors may deposit funds into an inmate's account. An officer or the facility receptionist may only accept cashier's checks or money orders for deposit to an inmate's account.

The officer or receptionist will 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 officer or receptionist.

1004.4 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 complete an Inmate Request Form. It must contain the amount to be released, and two whom it is to be released That person must furnish a valid driver's license or state-issued identification card
to the officer. The officer will then forward the cash withdrawal transaction document to the proper housing area for the inmate's signature and approval.

After identity has been verified, a check will be written and the amount will be deducted from the inmate's account.

**1004.5 SECURE BANKING OF INMATE FUNDS**
All monies collected by custody personnel shall be secured in the safe immediately after documenting and entering it on the inmate's account.
Counseling Services

1006.1 PURPOSE AND SCOPE
The purpose of this policy is to establish a process for providing counseling and crisis intervention services to inmates.

1006.2 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).

(c) Deputies assigned to the facility who have specific training and expertise in this area.

The Jail Commander shall coordinate with the Responsible Physician to develop and confidentially maintain records of counseling and crisis intervention services provided to inmates and to ensure that those records are retained in accordance with established records retention schedules.

The Jail 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 facility employee 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. Inmates who are victims of a sexual abuse or harassment incident will be informed of the availability and continuity of counseling (28 CFR 115.82; 28 CFR 115.83).

1006.3 NON-CRISIS COUNSELING
The Office shall, when reasonably practicable, make counseling services available to assist inmates who are being released into the community.
Inmate Exercise and Recreation

1010.1 PURPOSE AND SCOPE
The purpose of this policy is to establish guidelines and procedures ensuring that the Lake County Sheriff's Office facility will have sufficiently scheduled exercise and recreation periods and sufficient space for these activities, as required by law.

1010.1.1 DEFINITIONS
Definitions related to this policy include:

**Exercise** - The physical exertion of large muscle groups.

**Recreation** - Activities that may include table games, watching television or socializing with other individuals.

1010.2 RESPONSIBILITIES
The Jail Commander or the authorized designee shall be responsible for ensuring there is sufficient secure space allocated for physical exercise and recreation, and that a schedule is developed to ensure accessibility to both activities for all inmates. At least three hours per week of exercise opportunities shall be provided (15 CCR 1065).

1010.3 ACCESS TO EXERCISE
Inmates shall have access to exercise opportunities, including access to physical exercise outside the cell and adjacent day room areas, and the opportunity to exercise outdoors when weather permits.

The Day Shift Correctional Aide will use the approved daily log sheet to document when inmates of like classification status are scheduled to exercise each day, record the exercise of an inmate or that an inmate has declined outside exercise.

Inmates will be offered a minimum of three hours a week over a seven day period to exercise.

1010.4 ACCESS TO RECREATION
Each inmate shall have access to the minimum state-required recreational (leisure-time) activities outside the cell and adjacent dayroom areas (15 CCR 1065). The length of time will be determined by the inmate’s classification status, security concerns, and operational schedules that preclude recreation 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 inmates for this purpose.

Televisions, table games, and other items may also be made available to enhance recreation time. Consideration will be given to the passive or active recreational needs of older inmates and inmates with disabilities.
Inmate Exercise and Recreation

1010.4.1 USE OF THE INMATE WELFARE FUND
Monies derived from the Inmate Welfare Fund may be used to purchase and maintain recreational equipment and supplies.

1010.5 SECURITY AND SUPERVISION
The staff supervising the inmates during exercise and recreation time shall document when each housing unit and/or ad seg inmate has the opportunity to exercise or recreate.

The supervising staff may terminate the exercise or recreation period and escort back to the housing unit any inmate who acts in an aggressive or disorderly manner after being ordered to stop by the staff. Whenever an exercise or recreation 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.

1010.6 EXERCISE SPACE
Exercise areas, as specified by federal, state, and/or local laws or requirements, should be sufficient to allow each inmate the required minimum of 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.

Inmates on segregation status shall have access to the same recreational facilities as other inmates unless security or safety considerations dictate otherwise. When inmates on segregation status are excluded from use of regular recreation facilities, the alternative area for exercise used shall be documented.

1010.7 INABILITY TO MEET REQUIREMENTS
In the event that the inmate population exceeds the ability of the facility to meet the exercise and recreation 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.

1010.8 POLICY
It is the policy of this office to provide inmates with access to exercise opportunities, exercise equipment, and recreation activities in accordance with state laws or requirements.
Inmate Educational, Vocational and Rehabilitation Programs

1012.1 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.

1012.2 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).

1012.3 INMATE SERVICES OFFICER
The Sheriff or the authorized designee shall appoint an Inmate Services Officer, 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.
(g) Forecasting the annual cost of the program and coordinating with the budget office to secure funding.

1012.4 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:
  o Cooking and food services
  o Landscaping, horticulture
• Other courses as deemed appropriate by the Inmate Services Officer

1012.5 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.

1012.6 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.

1012.7 INMATE REQUESTS
Inmates should be given a form to request participation in the inmate education program. Inmate requests will be forwarded to the Inmate Services Officer, who will have the facility classification staff screen and approve the request.

The Inmate Services Officer will notify the inmate whether he/she has been approved for an education program. If approved, the Inmate Services Officer 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.
Inmate Educational, Vocational and Rehabilitation Programs

Inmates may also contact the Inmate Services Officer at any time via an Inmate Request Form 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.

1012.8 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 Jail 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

1012.9 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 Jail Commander.

1012.10 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 Jail 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.

1012.11 NEW CONSTRUCTION OR RENOVATION
Whenever construction of new facilities is considered, the Jail 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 Jail Commander may seek technical assistance from consultants to school districts that provide education programs in correctional settings. There are also networks of educators who
Inmate Educational, Vocational and Rehabilitation Programs

can provide valuable consulting services in order to keep pace with rapidly evolving program and legislative issues that are related to education.
Commissary Services

1014.1 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.

1014.2 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 Jail Commander (Penal Code § 4025).

1014.3 COMMISARY MANAGER RESPONSIBILITIES
The Jail Commander shall be responsible for designating a qualified person to act as the Commissary Manager. The Commissary Manager shall be responsible for the accounting and general operation of the commissary, which shall include but is not limited to:

- Maintaining current rules, regulations, and policies of the commissary and ensuring compliance by commissary staff.
- Managing inventory and processing orders in a timely manner.
- Performing weekly audits of high-security items.
- Ensuring that sufficient space is provided either on or off facility property for the storage and processing of commissary orders.
- Ensuring commissary facilities are sanitary and secure.
- Conducting a quarterly inventory of all supplies and immediately reporting any discrepancies to the Jail Commander.
- Ensuring that all inmates who are approved to purchase commissary items are provided with a printed list of items that are available at local stores if the facility does not operate a commissary.
- To the extent reasonably practicable, ensuring the prices for items offered in the commissary correspond to local retail store prices.

Any commissary inventory or sales issues related to religious diets shall be addressed in the Religious Programs Policy.

1014.4 COMMISARY 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.

All inmates shall be afforded the opportunity to review an accounting of their money held in their account, including deposits, debits, and commissary goods purchased and received. Any discrepancy of the inmate’s funds shall be immediately reported to the Commissary Manager. If the
Commissary Services

Commissary Manager and the involved inmate cannot settle the discrepancy, the Jail Commander shall be notified and the Jail Commander will resolve the discrepancy.

1014.5 INMATE WELFARE PACKS
The Jail 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)).

1014.6 ANNUAL AUDIT OF THE COMMISSARY
The Commissary Manager should ensure that an annual audit of the commissary operation is conducted. The written report prepared by the auditor should be reviewed for accuracy by the Commissary Manager and provided to the Jail 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

1016.1 PURPOSE AND SCOPE
The purpose of this policy is to establish guidelines for the funding of library services and for providing inmates access to leisure and legal reading materials.

1016.2 LIBRARY FUNDING AND MAINTENANCE
The Jail Commander may use monies from the Inmate Welfare Fund to offset the cost of salaries and the services and supplies necessary to operate the library. The librarian may enlist the assistance of the local public library and other community organizations in order to maintain and update the library. Donated books and materials should be screened by the librarian for allowable content and safety prior to being distributed to inmates.

The Office may reject library materials that may compromise the safety, security, and discipline in the operation of this facility (see the Inmate 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. The inmate services staff is responsible for the distribution of reading material.

1016.3 LEISURE LIBRARY MATERIALS
Each inmate 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 inmate. Inmates who destroy or misuse books and library materials will be subject to disciplinary action and may be required to pay for the material. If staff believes the destruction was intentional, the matter may be referred for criminal prosecution.

1016.4 ACCESS TO LEGAL PUBLICATIONS/LAW LIBRARY
All inmates shall have reasonable access to the legal system, which may include access to legal reference materials. Pro per inmates 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 judicial forms for criminal cases, civil cases, and general litigation.

Inmates desiring access to the library or legal publications shall submit a completed legal information request to the housing deputy. Only one request per inmate per week is allowed unless the inmate is a court ordered pro per. Inmates 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.

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 inmate to have access to the library or to legal research services if they are available and do not conflict with scheduling and security concerns. Records of access to legal references and whether the requests were fulfilled or denied should be documented each day and maintained in the inmate’s file in accordance with established records retention schedules.

Pro per inmates may keep minimal supplies for their case in their cells (e.g., paper, letters, reference materials), provided it does not create a fire hazard.

1016.5 ALTERNATE MEANS OF ACCESS TO LEGAL PUBLICATIONS
Nothing in this policy shall confer a right to access to a law library and, unless it is specified by a court order, the Sheriff may provide access to the legal system by a variety of means that may include public or private legal research services (e.g., legal paging system).

1016.6 POLICY
It is the policy of this facility to operate a library service that provides leisure and legal reading materials to inmates.
Inmate Mail

1018.1 PURPOSE AND SCOPE
The purpose of this policy is to provide guidelines for the receipt, rejection, inspection and sending of inmate mail.

1018.2 POLICY
This office will provide ample opportunity for inmates to send and receive mail, subject to restriction only when there is a legitimate government interest.

1018.3 MAIL GENERALLY
Inmates may, at their own expense, send and receive mail without restrictions on quantity, provided it does not jeopardized the safety of staff, visitors, or other inmates, or pose an unreasonable disruption to the orderly operation of the facility.

However, inmates are only allowed to store a limited amount of mail in their cells as determined by the Jail Commander. Excess mail will be stored with the inmate's personal property and returned at his/her release.

1018.4 CONFIDENTIAL CORRESPONDENCE
Inmates may correspond confidentially with courts, legal counsel, the Sheriff or Jail Commander, elected officials, the Department of Corrections, the State Board of State and Community Corrections, members of the Grand Jury, 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 out going confidential correspondence for contraband before it is sealed, provided the inspection is completed in the presence of the inmate. 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)).

1018.4.1 PROCESSING CONFIDENTIAL CORRESPONDENCE
When processing any confidential correspondence you must fill out an Inmate Mail Notification Form. The inmate will sign and date the form before opening the confidential correspondence. If the inmate refuses to sign, write refused on the inmate’s signature line. This form will be placed into the inmate's booking file. Legal mail must be logged in the In-Custody system. If legal mail is opened by mistake, an Inmate Mail Notification Form will be attached stating it was opened in error.
1018.4.2 PROCESSING OUTGOING CONFIDENTIAL CORRESPONDENCE
When processing outgoing confidential correspondence the inmate must fill out an inmate request form. The inmate will list the name and address of the receiving party on the request form. Once the unit officer inspects the letter in front of the inmate for contraband per 15 CCR 1063(c) and matches the address to the address listed on the request, the inmate will seal the envelope. The officer will write his/her 300-number on the seal. The unit officer will write his/her name and 300-number with the date and time in the appropriate blocks on the request and give the pink copy to the inmate.

The unit officer will log the confidential correspondence in the In-Custody system under the inmate’s mail log. The unit officer will complete the request by writing “logged” with the date and time that was entered in the inmate’s mail log. The unit officer will return the yellow copy of the inmate request to the inmate and file the white copy in the inmate’s file.

1018.5 SUSPENSION/RESTRICTION OF MAIL PRIVILEGES
Mail privileges may be suspended or restricted upon approval of the Jail Commander whenever staff becomes aware of mail sent by an inmate that involves (15 CCR 1083(h)):

(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.

The District Attorney or County Counsel should be consulted in cases where criminal charges are considered against an inmate or there is an apparent liability risk to the Office that relates to suspension or restriction of mail privileges.

1018.6 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 any emergency situation.

Assigned deputies should open and inspect all incoming and outgoing general mail of current inmates. The incoming correspondence may be read as frequently as deemed necessary to maintain security or monitor a particular problem. Mail for inmates no longer in custody should not be opened.

Outgoing general mail may not be sealed by the inmate 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 inmate is on a restricted mail list.
(c) The mail is between inmates.
(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 inmate 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 inmate’s property to be given to the inmate upon release.

Inmates are allowed to correspond with other inmates in this jail, 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.

Inmates 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 inmate’s file in accordance with established records retention schedules.

Money orders contained in incoming inmate mail shall be removed and credited to the inmate’s account. Cash, checks or any other financial instruments contained in incoming inmate mail shall be returned to the sender.

1018.6.1 DESIGNATION OF STAFF AUTHORIZED TO READ MAIL
Only staff members designated by the Jail 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).

1018.6.2 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 inmates 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 the 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 inmate.
Inmate Mail

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 inmates.

1018.6.3 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 inmate 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) Notification to the inmate and sender (unless such notification jeopardizes any investigation or the security of the facility).

1018.7 BOOKS, MAGAZINES, NEWSPAPERS AND PERIODICALS
Unless otherwise in conflict with this policy and prohibited by the Jail Commander, inmates 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 inmate. A local daily newspaper in general circulation, including a non-English publication shall be made available to interested inmates (15 CCR 1066(b)).

1018.8 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.
Inmate Mail

- Material that could lead to sexual aggression or an offensive environment for inmates.
- 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 Jail 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.

1018.9 FORWARDING OF MAIL
Any non-legal mail received for a former inmate should be returned to the sender with a notation that the inmate is not in custody. Obvious legal mail should be forwarded to the former inmate’s new address if it is reasonably known to the facility. Otherwise, legal mail should be returned to the sender.

1018.10 INDIGENT INMATE REQUESTS FOR WRITING MATERIALS
Indigent inmates shall receive writing materials on a weekly basis, as provided by an approved schedule established by the Jail Commander. Writing materials should include the following (15 CCR 1063):

(a) At least two pre-stamped envelopes for correspondence with family and friends
(b) At least two sheets of paper
(c) One pencil

Indigent inmates 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 inmate’s attorney and to the courts (15 CCR 1063(e)).

Requests shall be screened and granted based on need by the Inmate Services Officer. Inmates should not be permitted to maintain an excess supply of writing materials without the approval of a supervisor.
Inmate Telephone Access

1020.1 PURPOSE AND SCOPE
This policy establishes guidelines for permitting inmates to access and use telephones.

1020.2 POLICY
The Jail will provide access to telephones for use by inmates consistent with federal and state law. The Jail Commander or the authorized designee shall develop written procedures establishing the guidelines for access and usage (15 CCR 1067). All inmates will be provided a copy of the telephone usage rules as part of their inmate orientation during the booking process.

1020.3 PROCEDURE
Inmates 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 inmates. All calls, with the exception of calls to a verified attorney, are monitored and recorded.

Inmates 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 Jail Commander, all telephones will be turned off.

For security reasons, inmates who are awaiting transport to another facility or release to another agency are not permitted to use the telephones.

Telecommunications Device for the Deaf (TDD) or equally effective telecommunications devices will be made available to inmates who have a family member that is disabled, are deaf, hard of hearing or have speech impairments to allow these inmates to have equivalent telephone access as those inmates without these disabilities.

The minimum time allowed per call should be 10 minutes, except where there are substantial reasons to justify such limitations. Reasons for denial of telephone access shall be documented and a copy placed into the inmate’s file. The rules governing the use of the telephone will, in addition to being provided to inmates during orientation, be posted near the telephones.

The staff should monitor the use of public telephones to ensure inmates have reasonable and equitable access and that the rules of use are observed. Any inmate refusing to cooperate with the telephone rules may have his/her 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 Inmate Reception Policy.
Inmate Telephone Access

1020.4 USE OF TELEPHONES IN HIGH-SECURITY OR ADMINISTRATIVE SEGREGATION HOUSING
Inmates who are housed in high-security or administrative segregation may use the public telephones in the dayroom during the time allocated for that classification of inmate to utilize that space. If portable telephones are available in the facility, inmates who are housed in high-security or administrative segregation units may have reasonable access to the portable telephones.

1020.5 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 inmate, the supervisor may direct that an inmate 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 inmate 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 by any non-legal calls that are not court-ordered.

1020.6 ATTORNEY-CLIENT TELEPHONE CONSULTATION
At all times through the period of custody, whether the inmate has been charged, tried, convicted or is serving an executed sentence, reasonable and non-recorded telephone access to an attorney shall be provided to the inmate at no charge to either the attorney or to the inmate, in accordance with the Inmate Access to Courts and Counsel Policy.

Foreign nationals shall be provided access to the diplomatic representative of their country of citizenship. Staff shall assist them upon request. Domestic and international calling cards are available through the inmate commissary.

1020.7 TELEPHONE CONTRACTS AND CHARGES
The Jail Commander or the authorized designee is responsible for ensuring that all contracts involving telephone services for inmates comply with all applicable state and federal regulations, that rates and surcharges are commensurate with those charged to the general public for similar services, and that the broadest range of calling options is provided, in accordance with sound correctional management practices.
Inmate Visitation

1022.1 PURPOSE AND SCOPE
The purpose of this policy is to establish rules for visitation and to provide a process for inmate visits and visitors. Visitation is a privilege and is based on space availability, schedules and on-duty staffing.

1022.1.1 DEFINITIONS
Definitions related to this policy include:

In-person visit - An on-site visit that may include barriers. In-person visits include interactions in which an inmate has physical contact with a visitor, the inmate is able to see a visitor through a barrier, or the inmate is otherwise in a room with a visitor without physical contact. “In-person visit” does not include an interaction between an inmate and a visitor through the use of an on-site two-way audio/video terminal.

Video visitation - Interaction between an inmate 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.

1022.2 POLICY
It is the policy of the Lake County Sheriff's Office to allow inmate visitation, including video visitation when applicable, as required by law.

1022.3 PROCEDURES
The Sheriff's Office shall provide adequate facilities for visiting that include appropriate space for the screening and searching of inmates and visitors and storage of visitors’ personal belongings that are not allowed in the visiting area.

The Jail Commander shall develop written procedures for inmate 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 inmates and visitors with disabilities. Visitors with disabilities who request special accommodations shall be referred to a supervisor. Reasonable accommodations will be granted to inmates and disabled visitors to facilitate a visitation period.
Visitor logs and records shall be developed and maintained in accordance with established records retention schedules.

Court orders granting a special inmate visitation are subject to county legal review and interpretation.

1022.3.1 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 inmate.

 (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.

1022.3.2 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.

1022.4 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 inmate 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)).

1022.5 VISITING SCHEDULE
The Jail Commander shall designate a person to develop a schedule for inmate visitation that includes daytime, evening and weekend hours. Each inmate shall receive a copy of the visitation schedule in the inmate handbook at orientation. The visiting hours will also be posted in the public area of the facility.


1022.6 DENIAL OR TERMINATION OF VISITING PRIVILEGES

The Jail Commander 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, including but 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 inmate violates facility rules or posted visiting rules.
(d) The visitor fails to supervise and maintain control of any minors accompanying him/her into the facility.
(e) The visitor has been previously convicted of a felony and confined in any State prison in this State (Penal Code 4571).
(f) 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 inmate's file and another copy will be forwarded to the Jail Commander.

1022.7 GENERAL VISITATION RULES

All visitors and inmates will be required to observe the following general rules during visitation:

(a) There is a limit of two (2) visitors at a time for medium/maximum security inmates, and three (3) visitors at a time for minimum security inmates. This includes children four (4) years of age and older. Where a dispute over children visiting occurs between the inmate and the parent or legal guardian, the inmate 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 inmate may refuse to visit with a particular individual.

(c) Those inmates 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
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.

(i) Inmates 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.

1022.8 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 inmate

• 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.

1022.9 ATTORNEY VISITS

Inmates shall have access to any attorney retained by or on behalf of the inmate, or to an attorney the inmate 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 Inmate Access to Courts and Counsel Policy).

1022.10 JUVENILE INMATE VISITATION

Juveniles who are incarcerated or detained in the facility will be allowed initial visits at any time by the parents, guardians and/or attorneys. Subsequent visits shall be as unrestricted as reasonably practicable.
Inmate Work Program

1032.1 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.

1032.2 POLICY
The Lake County Sheriff's Office shall operate an Inmate Work Program within the secure perimeter of the facility, in accordance with all applicable federal, state or local work safety laws, rules and regulations, and to the extent that the operation of inmate work programs do not pose a risk to the safety of the staff, other inmates or the public. This policy establishes the requirements, selection process, supervision and training of inmates prior to and after entering the facility's Inmate Work Program.

1032.3 INMATE WORKER SELECTION
The Inmate Work Program Coordinator shall be responsible for the selection and assignment of inmates to the various work assignments. The Coordinator 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 are not eligible for work programs.
(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.

1032.4 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.
1032.5 PROHIBITION OF NON-PUBLIC 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.

1032.6 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.
(b) Safety equipment may include, but is not limited to, eye protection, gloves, hardhat or headwear and sunscreen for protection from sun exposure.
(c) Work periods shall not exceed 10 hours per day.
(d) Inmate workers should be provided with work breaks to allow them to take care of personal needs.
(e) Inmate workers shall have access to meals and a reasonable amount of time to consume those meals during their work period.
(f) The inmate workday approximates the workday in the community.
(g) Inmate performance is regularly evaluated and recorded.

Inmate workers shall be under the direct supervision of the LCSO staff at all times when they are on assignment through the Inmate Work Program.

Disciplinary action for inmate worker misconduct shall adhere to the Inmate Discipline Policy.

1032.6.1 INMATE WORKER REGULATIONS
(a) Inmate Workers will not possess any type of drug or alcohol.
(b) County employees are expressly forbidden to give, or permit consumption of any drug or alcohol.
(c) County employees shall not give tobacco to the inmate workers.
(d) Inmate Workers will not be given money.
(e) Inmate Workers shall not exchange, and/or sell, or trade work assignments with any other Inmate Worker.
(f) Inmate Workers will be monitored by a deputy. Inmate Workers will remain under the immediate supervision of a designated County employee.
(g) Contact between Inmate Worker and the inmate’s relatives, spouses, friends, general public etc. is forbidden.
Inmate Work Program

(h) Inmate Workers will not make any telephone calls while on work assignment.
(i) Inmate Workers will not perform any work of a personal nature for private citizens or businesses.
(j) All tools located in the locked cage next to the Warehouse shall be signed out to each inmate. The condition of the equipment issued and returned must be noted in the log.

1032.6.2 REQUESTS FOR INMATE WORKERS

(a) All requests for inmate workers will require an advance notice of one month.
(b) All work crews will be required to be supervised at all times by those who request inmate use.
(c) The advance notice will be waived in the case of a county emergency (i.e. flooding, earthquake etc.).
(d) All work crews will be required to be supervised by a trained county employee.
(e) The agency requesting inmates will indicate the work to be performed and will be under the direct supervision of the trained agency employee.
(f) All requesting agencies will be required to contact the program administrator to arrange a work crew.
(g) The program administrator will ensure all work hours are accounted for and billed to the appropriate agency via the finance manager.
(h) There will be a maximum of six inmates per supervisor per work detail. If the work detail requires more than six inmates, two supervisors will be required to supervise the inmates.

1032.7 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.

1032.8 INMATE WORKER INCENTIVES

The Jail 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.
(d) Awarding certificates of achievement for successful completion of vocational, educational and/or work programs.

(e) When allowed by law, ordinance and in consideration with local labor relations, given monetary compensation for work on government projects.
Religious Programs

1034.1 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).

1034.1.1 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.

1034.2 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.

1034.3 CHAPLAIN
The Sheriff shall appoint an individual to serve as the chaplain for the facility. The chaplain shall be responsible for assisting the Jail 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.
Religious Programs

(b) Maintaining a list of accepted religious practices that have been approved by the Jail 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 Jail Commander on issues related to religious observance.

1034.4 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 Jail 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 Jail 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 request.
Religious Programs

being made. The Sheriff or the authorized designee will review the denial and respond to the requesting inmate as soon as reasonably practicable.

The Jail 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.

1034.4.1 SUSPENSION OR REVOCATION OF ACCOMMODATIONS
In an emergency or extended disruption of normal facility operations, the Jail Commander may suspend any religious accommodation. The Jail 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.

1034.4.2 APPEALS OF SUSPENSION OR REVOCATION OF ACCOMMODATIONS
Inmates may appeal the Jail Commander’s denial, suspension or revocation of an accommodation through the inmate appeal process.

1034.5 DIETS AND MEAL SERVICE
The Jail 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.

1034.5.1 PROHIBITION ON USE OF ALCOHOL OR DRUGS FOR RELIGIOUS OBSERVANCE
Illegal substances are prohibited from use in religious services under RLUIPA. Otherwise legal substances, such as alcohol, may be permitted in religious rituals provided that:

- There is a recognized legitimate religious practice of which the consumption of a substance is an essential aspect of the religious practice.
- No reasonable alternative (such as non-alcoholic) means exists to exercise such an essential aspect of an inmate’s faith and this imposes a substantial burden on an inmate’s faith.
- The quantity of the substance consumed as part of the ritual will not intoxicate or impair the inmate.
- Adequate controls on the substance and limits upon the quantity are provided by the chaplain and approved by the Jail Commander.
- The activity will not otherwise disrupt facility safety or control interests.
Limited exceptions may be made in writing by the Jail Commander based upon the chaplain's recommendation that there is significant compelling reason to permit ceremonial consumption.

1034.6 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.

1034.7 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.

1034.8 UNAUTHORIZED PRACTICES OR MATERIAL
The following list, which is not intended to be exhaustive, includes materials or practices that shall not be authorized:

(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

1034.9 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).
Religious Programs

1034.10 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).

1034.11 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.

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.

1034.12 FAITH- AND MORALS-BASED COUNSELING
The Jail 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.

1034.13 SPACE AND EQUIPMENT FOR RELIGIOUS OBSERVANCES
The Jail 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.

1034.14 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 Jail Commander or the authorized designee, shall develop and maintain communication with faith communities. The chaplain shall review and coordinate with the Jail 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.

1034.15 TRAINING
The Office shall provide training to facility staff on the requirements of this policy.

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.

1034.16 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.
Chapter 11 - Facility Design
Space and Environmental Requirements

1100.1 PURPOSE AND SCOPE
This policy describes the desired space and environmental requirements for the physical plant.

1100.2 POLICY
It is the policy of this office to comply with federal and state laws, codes and correctional standards in matters relating to the jail space and environmental requirements. Any designs for renovations, modifications, additions or new construction within the facility should be in compliance with federal and state laws, codes and jail standards.

Planned designs for renovations, modifications, additions or new construction within the facility should facilitate continuous personal contact and interaction between the custody staff and inmates. This contact should be by direct physical observation of all cells, dayrooms and recreation areas. Electronic surveillance may be used to augment the observation of inmates but shall not be used as a substitute for personal contact and interaction.

All parts of the facility that are accessible to the public should be accessible to and usable by disabled persons.

1100.3 SPACE REQUIREMENTS
Except for emergency accommodations of a limited duration, all areas in the physical plant shall conform to building and design requirements contained in federal and state law, codes and minimum jail standards as required for their intended design and use. Areas that are repurposed for other than their original intended use shall likewise comply with all building design requirements for the new purpose.

1100.4 ALTERNATE APPROVED CAPACITY
If needed, the Jail Commander may base the approved capacity on an alternate method of calculation as provided in the jail standards. This alternate method allows capacity to be based on overall living space available to inmates, adjusted for the time inmates actually have access to any specific areas. If this method is selected, the Jail Commander, together with [City/County] officials, should develop a plan to bring the facility into agreement with the space-related standards within a five-year period.

1100.5 DETENTION HARDWARE
All locks, detention hardware, fixtures, furnishings and equipment shall have the proper security value for the areas in which they are used. The use of padlocks in place of security locks on cell or inmate housing unit doors is generally prohibited, as unauthorized locking mechanisms may pose a significant threat to the safety and security of the facility in the event of an emergency.
Space and Environmental Requirements

1100.6 ENVIRONMENTAL REQUIREMENTS
All occupied areas of the physical plant shall conform to the building and design requirements contained in federal and state law, codes and jail standards with respect to light, air and noise level.

1100.6.1 LIGHTING LEVELS
Lighting throughout the facility shall be sufficient for staff and inmates to perform necessary tasks. Night lighting levels should permit adequate illumination for supervision but should not unnecessarily interfere with the ability of inmates to sleep.

1100.6.2 NATURAL LIGHT
All inmate living areas should provide visual access to natural light, unless prohibited by security concerns.

1100.6.3 NOISE LEVEL
Noise levels at night should be sufficiently low to allow inmates to sleep. Nothing in this policy is intended to limit or impair in any way staff’s ability to monitor the jail in a manner that is consistent with safety and security and good correctional practices. Noise measurements in each housing unit shall be documented by a qualified independent source no less than once per annual inspection cycle and a report provided to the Jail Commander.

1100.6.4 VENTILATION
The ventilation system shall be sized and calibrated to supply fresh or circulated air in accordance with federal and state laws, codes and jail standards. Toilet rooms and cells with toilets shall be calibrated to have no less than four exchanges of air per hour, unless local codes require a different number of air exchanges.

Other than an emergency situation, inmates or jail staff shall not adjust or restrict the ventilation systems without the express permission of the supervisor. Any adjustments made to the ventilation system shall only be allowed for the duration of the emergency or until qualified maintenance personnel can adjust or repair the ventilation system.

Air quantities shall be documented at least annually by a qualified independent contractor, and a report provided to the Jail Commander.

1100.6.5 TEMPERATURE LEVELS
Temperature and humidity levels shall be mechanically maintained at a level established by facility maintenance personnel and deemed comfortable and cost efficient.

Staff shall immediately contact facility maintenance in the event that temperatures or humidity levels become uncomfortable.

1100.6.6 CELL FURNISHINGS
Each inmate housed in this facility shall be provided with the following items:

- A sleeping surface and mattress at least 12 inches off the floor
- A writing surface and seat
Space and Environmental Requirements

- An area for the storage of clothing and personal belongings

1100.7 DAYROOMS
Dayrooms shall be equipped with at least one shower for every 20 inmates or fraction thereof, and tables and sufficient seating for all inmates at capacity. Where inmates do not have continuous access to their cells, dayrooms shall also equipped with one toilet, an immediate source of fresh potable water and lavatory with hot and cold water for every 10 inmates or fraction thereof.

1100.8 JANITOR CLOSETS
Janitor closets shall be located near or inside each housing unit. Each janitor closet should contain a sink and the necessary cleaning implements. Access to the janitor closets shall be controlled and supervised by the staff. Only inmates with a minimum security classification status shall be allowed access to the janitor closets, and then only under the supervision of staff.

1100.9 EMERGENCY POWER
The facility shall be equipped with a sufficient emergency power source to operate communications, security and alarm systems in control centers, and emergency lighting in corridors, stairwells, all inmate housing areas, security control points and audio-visual monitoring systems.

1100.10 NEW CONSTRUCTION AND RENOVATION
In the case of partial renovation of an existing facility, it is intended that these standards should apply only to the part of the facility being renovated. The remainder of the facility would be subject to the existing standards.
Smoking and Tobacco Use

1102.1 PURPOSE AND SCOPE
This policy establishes limitations on the use of tobacco products by employees and others while on-duty or while in Lake County Sheriff’s Office facilities or vehicles.

1102.2 POLICY
The Lake County Sheriff's Office recognizes that tobacco use is a health risk and can be offensive to other employees and to the public. It is the policy of the Lake County Sheriff's Office to prohibit the use of tobacco by employees while on-duty or at any time the employee is acting in an official capacity for the Office.

1102.3 EMPLOYEE USE
Tobacco use by employees is prohibited any time employees are in public view representing the Office.

Smoking and the use of other tobacco products is not permitted inside any county facility, office or vehicle.

It shall be the responsibility of each employee to ensure that no person under his/her supervision smokes or uses any tobacco product inside county facilities and vehicles.

1102.4 ADDITIONAL PROHIBITIONS
Smoking and use of other tobacco products is not permitted inside office facilities or any office vehicle, or any other county building (Labor Code § 6404.5).

No person shall smoke tobacco products within 20 feet of a main entrance, exit or operable window of any public building, including any office facility or a building on the campuses of the University of California, California State University and the California community colleges, whether present for training or any other purpose (Government Code § 7596 et seq.).
Control Center

1104.1 PURPOSE AND SCOPE
The purpose of this policy is to establish guidelines for a control center for monitoring and coordinating the facility's security, safety and communications.

1104.2 POLICY
It is the policy of this office to provide sufficient space for a 24-hour secure control center, which shall be staffed continuously for the purpose of monitoring and coordinating the facility's security, life safety and communications systems. It is the responsibility of the Jail Commander to ensure that current written orders for every Control post are available and that a process is in place to verify that deputies assigned to those posts acknowledge in writing by signature and date that they have read and understand the orders. The Jail Commander or the authorized designee shall review post orders annually and update them as needed.

1104.3 COMMUNICATIONS AND MONITORING CAPABILITIES
Control shall have multiple means of direct communication capabilities with all staff control stations in inmate housing areas, including telephone, intercom and radio.

The Control staff shall be responsible for monitoring fire, smoke and life safety alarms and shall have the means to summon assistance in the event of an emergency.

1104.4 POST ORDERS
Comprehensive post orders for every deputy position shall be developed. Copies of the orders should be maintained at each post. Clear procedures should be incorporated into post orders for all regular daily activities including, but not limited to, safety checks, head counts, meals, sick call, recreation, clothing exchange, mail distribution and response to emergencies, such as fires, natural disasters and criminal acts.

1104.5 TRAINING
The Training Manager shall ensure that all staff members assigned to posts are properly trained to perform all duties and responsibilities described in the post orders. This is particularly true in fire, life safety and the emergency response procedures that have been implemented by the Jail Commander. All training should be documented in each employee's training file and retained in accordance with established records retention schedules.

1104.6 SECURITY
Access into the Control should be through a sallyport entrance controlled by the staff inside the Control.

At no time should inmates be allowed to enter the Control.
Crowding

1106.1 PURPOSE AND SCOPE
One of the determining factors in maintaining a safe and secure jail is to limit the inmate population to the number of beds constructed in each inmate classification level. Occasionally, emergencies occur that will require the jail to exceed its approved bed capacity. This policy establishes the approved bed capacity of the facility, addresses temporary population excess and provides a plan for gathering statistics and projecting long-term space needs via a jail needs assessment.

1106.2 POLICY
It is the policy of the Lake County Sheriff's Office to manage the inmate population, to the extent as is reasonably possible to avoid exceeding the facility’s approved bed capacity. The approved bed capacity of this facility is 286. The Sheriff is responsible for ensuring that the number of inmates does not exceed the approved bed capacity.

The facility has a sufficient number of housing units in an appropriate configuration so that inmates can be separated according to the facility’s classification plan.

In the event of an emergency that causes the facility to be populated beyond the approved bed capacity, every reasonable effort should be made to reduce the inmate population to the approved bed capacity as soon as reasonably practicable. The Office will take affirmative action to address excess population. In the event that the inmate population remains over capacity or continues to increase, a crowding committee should be formed to examine any and all methods to ensure that the facility population is reduced and remains within the approved bed capacity.

1106.3 FACILITY NEEDS ASSESSMENT
In the event that the jail maintains an average 80 percent occupancy rate consistently for one year, the Office should initiate a jail needs assessment. The assessment initiates a systematic process that is designed to identify a variety of operational issues and program needs, and may indicate when expansion or replacement of the facility is warranted.

1106.4 INMATE POPULATION REPORTS
The Jail Commander or the authorized designee is responsible for ensuring that detailed daily logs of the facility’s inmate population and other demographic information are completed and maintained by the staff. These logs shall reflect the monthly, average daily population of sentenced and non-sentenced inmates by categories of male, female and juvenile as of midnight of each day. The number of inmates occupying holding cells shall also be counted at midnight each day. An inmate population report summarizing this information shall be created daily and distributed to the Sheriff and the Jail Commander. The Jail Commander shall provide the Board of State and Community Corrections with applicable inmate demographic information as described in the Jail Profile Survey (15 CCR 1040).
## INDEX / TOPICS

<table>
<thead>
<tr>
<th>Numbers and symbols</th>
<th>DAILYL TRAINEE PERFORMANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>35MM RUBBER BATON</td>
<td>EVALUATIONS</td>
</tr>
<tr>
<td>A</td>
<td>DATA CONFIDENTIALITY</td>
</tr>
<tr>
<td>ABORTIONS</td>
<td>DAY ROOMS</td>
</tr>
<tr>
<td>ACCESS CARDS</td>
<td>DISCRIMINATION</td>
</tr>
<tr>
<td>ADAPTIVE DEVICE</td>
<td></td>
</tr>
<tr>
<td>B</td>
<td></td>
</tr>
<tr>
<td>BACKGROUND CHECK</td>
<td>E</td>
</tr>
<tr>
<td>BEAN BAG SHOTGUN</td>
<td>ECD DEVICE</td>
</tr>
<tr>
<td>BED CAPACITY</td>
<td>ECTOPARASITE CONTROL</td>
</tr>
<tr>
<td>BRIEFING TRAINING</td>
<td>ELECTRO MUSCULAR DISRUPTION</td>
</tr>
<tr>
<td></td>
<td>TECHNOLOGY</td>
</tr>
<tr>
<td></td>
<td>EMRT.</td>
</tr>
<tr>
<td></td>
<td>EMERGENCY POWER</td>
</tr>
<tr>
<td></td>
<td>EMERGENCY POWER AND</td>
</tr>
<tr>
<td></td>
<td>COMMUNICATIONS</td>
</tr>
<tr>
<td></td>
<td>EMERGENCY STAFFING PLAN</td>
</tr>
<tr>
<td></td>
<td>EMERGENCY WATER</td>
</tr>
<tr>
<td></td>
<td>EMPLOYEE ORIENTATION, PARAMETERS</td>
</tr>
<tr>
<td></td>
<td>EVIDENCE</td>
</tr>
<tr>
<td></td>
<td>EXERCISE</td>
</tr>
<tr>
<td></td>
<td>Recreation.</td>
</tr>
<tr>
<td></td>
<td>EXTERIOR-USE TOOLS</td>
</tr>
<tr>
<td>C</td>
<td>F</td>
</tr>
<tr>
<td>CANINE-ASSISTED SEARCHES</td>
<td>FACILITY KEYS</td>
</tr>
<tr>
<td>CHEMICAL AGENT</td>
<td>FIREARM NON-QUALIFICATION</td>
</tr>
<tr>
<td>CLINICAL CARE REVIEW</td>
<td>FITNESS FOR DUTY</td>
</tr>
<tr>
<td>CLINICAL DECISIONS</td>
<td>FOOD SERVICE REQUIREMENTS</td>
</tr>
<tr>
<td>CLINICAL ENCOUNTERS</td>
<td>FOOD SERVICE TRAINING</td>
</tr>
<tr>
<td>CLINICAL MORTALITY REVIEW</td>
<td>FOOD SERVICES</td>
</tr>
<tr>
<td>CMR</td>
<td>FOOD SERVICES MANAGER</td>
</tr>
<tr>
<td>COMMUNITY RELATIONS</td>
<td>FOOD SERVICES MANAGER, RESPONSIBILITY</td>
</tr>
<tr>
<td></td>
<td>FOREIGN STORAGE</td>
</tr>
<tr>
<td></td>
<td>FOREIGN NATIONALS</td>
</tr>
<tr>
<td>D</td>
<td>G</td>
</tr>
<tr>
<td>CONTINUING PROFESSIONAL EDUCATION</td>
<td>GRIEVANCE</td>
</tr>
<tr>
<td>CONTINUOUS QUALITY IMPROVEMENT</td>
<td>GRIEVANCE AUDITS</td>
</tr>
<tr>
<td>CONTRABAND</td>
<td>GRIEVANCE PROCEDURE</td>
</tr>
<tr>
<td>CONTRABAND SEARCHES</td>
<td>GRIEVANCE RECORDS</td>
</tr>
<tr>
<td>CONTROL CENTER</td>
<td>GROOMING</td>
</tr>
<tr>
<td>COUNSELING</td>
<td></td>
</tr>
<tr>
<td>CRIMINAL EVIDENCE SEARCHES</td>
<td></td>
</tr>
<tr>
<td>CRIMINAL RECORDS</td>
<td></td>
</tr>
<tr>
<td>CRISIS INTERVENTION</td>
<td></td>
</tr>
</tbody>
</table>

Copyright Lexipol, LLC 2020/02/05, All Rights Reserved. Published with permission by Lake County Sheriff's Office
<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Habeas Corpus Forms</td>
<td>300</td>
</tr>
<tr>
<td>Handwritten Reports</td>
<td>40</td>
</tr>
<tr>
<td>Hazardous Waste Disposal</td>
<td>455</td>
</tr>
<tr>
<td>Housing Unit Searches</td>
<td>234</td>
</tr>
<tr>
<td>In-Custody Death Notification</td>
<td>410</td>
</tr>
<tr>
<td>In-Custody Deaths, Reporting</td>
<td>249</td>
</tr>
<tr>
<td>Informed Consent</td>
<td>422</td>
</tr>
<tr>
<td>Inmate Access to Courts and Counsel</td>
<td>299</td>
</tr>
<tr>
<td>Inmate Assistants</td>
<td>404</td>
</tr>
<tr>
<td>Inmate Control</td>
<td>26</td>
</tr>
<tr>
<td>Inmate Death</td>
<td>410</td>
</tr>
<tr>
<td>Inmate Death Review</td>
<td>411</td>
</tr>
<tr>
<td>Inmate Grievance Form</td>
<td>328</td>
</tr>
<tr>
<td>Inmate Grievances</td>
<td>330</td>
</tr>
<tr>
<td>Inmate Health Care Communication</td>
<td>430</td>
</tr>
<tr>
<td>Inmate Injuries</td>
<td>468</td>
</tr>
<tr>
<td>Inmate Mail</td>
<td></td>
</tr>
<tr>
<td>Forwarding</td>
<td>548</td>
</tr>
<tr>
<td>Inmate Population Report</td>
<td>571</td>
</tr>
<tr>
<td>Inmate Property Storage</td>
<td>172</td>
</tr>
<tr>
<td>Inmate Reception</td>
<td>164</td>
</tr>
<tr>
<td>Inmate Reception, Telephone Calls</td>
<td>175</td>
</tr>
<tr>
<td>Inmate Records</td>
<td>38</td>
</tr>
<tr>
<td>Inmate Rights</td>
<td>306</td>
</tr>
<tr>
<td>Inmate Safety Program</td>
<td>468</td>
</tr>
<tr>
<td>Inmate Showering</td>
<td>176</td>
</tr>
<tr>
<td>Inmate Suicide</td>
<td>411</td>
</tr>
<tr>
<td>Inmate Trust Fund</td>
<td>529</td>
</tr>
<tr>
<td>Inmate Voting</td>
<td>334</td>
</tr>
<tr>
<td>Inmate Welfare Fund</td>
<td>526</td>
</tr>
<tr>
<td>Inmate Work Program</td>
<td>555</td>
</tr>
<tr>
<td>Inspection of Food Products</td>
<td>498</td>
</tr>
<tr>
<td>Inspection, Sanitation</td>
<td>452</td>
</tr>
<tr>
<td>Inspections</td>
<td>48</td>
</tr>
<tr>
<td>Food Service Area</td>
<td>502</td>
</tr>
<tr>
<td>Intake Procedure</td>
<td>164</td>
</tr>
<tr>
<td>Janitor Closets</td>
<td></td>
</tr>
<tr>
<td>Closets</td>
<td>568</td>
</tr>
<tr>
<td>Key Control Records</td>
<td>45</td>
</tr>
<tr>
<td>Key Identification</td>
<td>43</td>
</tr>
<tr>
<td>Key Inventory</td>
<td>44</td>
</tr>
<tr>
<td>Kinetic Energy Projectiles</td>
<td>192</td>
</tr>
<tr>
<td>Legal Assistance</td>
<td>6</td>
</tr>
<tr>
<td>Legal Foundation</td>
<td>6</td>
</tr>
<tr>
<td>Mail, Inmate</td>
<td>544</td>
</tr>
<tr>
<td>Media Access</td>
<td>54</td>
</tr>
<tr>
<td>Medical Emergencies</td>
<td>347</td>
</tr>
<tr>
<td>Mental Health Services</td>
<td>367</td>
</tr>
<tr>
<td>Menu Cycle</td>
<td>485</td>
</tr>
<tr>
<td>Off-Site Medical Care</td>
<td>344</td>
</tr>
<tr>
<td>Orthoses</td>
<td>393</td>
</tr>
<tr>
<td>Pat-Down Searches</td>
<td>228</td>
</tr>
<tr>
<td>Per Projectile</td>
<td>192</td>
</tr>
<tr>
<td>Perimeter Security</td>
<td>50</td>
</tr>
<tr>
<td>Personal Protective Equipment</td>
<td>386</td>
</tr>
<tr>
<td>Physical Body Cavity Search</td>
<td>227</td>
</tr>
<tr>
<td>Physical Exams</td>
<td>70</td>
</tr>
<tr>
<td>Physical Plant Searches</td>
<td>234</td>
</tr>
<tr>
<td>Population Management System</td>
<td>159</td>
</tr>
<tr>
<td>Post-Mortem</td>
<td>410</td>
</tr>
<tr>
<td>Pregnant Inmates</td>
<td>351</td>
</tr>
<tr>
<td>Prisoner Restraint System</td>
<td>65</td>
</tr>
<tr>
<td>Pro Per Status</td>
<td></td>
</tr>
<tr>
<td>Materials and supplies</td>
<td>301</td>
</tr>
<tr>
<td>Prohibited Materials</td>
<td>59</td>
</tr>
<tr>
<td>Prostheses</td>
<td>393</td>
</tr>
<tr>
<td>Protection from Abuse</td>
<td>306</td>
</tr>
<tr>
<td>Psychological Autopsy</td>
<td>410</td>
</tr>
<tr>
<td>Psychological Exam</td>
<td>71</td>
</tr>
</tbody>
</table>

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***DRAFT*** - 573
<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>RECEIVING SCREENING</td>
<td>362</td>
<td>TRAINING RECORDS, CHEMICAL AGENT</td>
<td>93</td>
</tr>
<tr>
<td>RELIGIOUS DIETS</td>
<td>480</td>
<td>TRAINING RECORDS, HEALTH CARE</td>
<td></td>
</tr>
<tr>
<td>RELIGIOUS PRACTICE AND RITUALS</td>
<td>561</td>
<td>PROVIDER TRAINING</td>
<td>98</td>
</tr>
<tr>
<td>REMEDIAL TRAINING</td>
<td>91</td>
<td>TRAINING RECORDS, TRAINING PLAN</td>
<td>108</td>
</tr>
<tr>
<td>REPORT CHANGES</td>
<td></td>
<td>TRANSPORTATION LOGS</td>
<td>256</td>
</tr>
<tr>
<td>Report alterations</td>
<td>42</td>
<td></td>
<td></td>
</tr>
<tr>
<td>REPORT CORRECTIONS</td>
<td>42</td>
<td></td>
<td></td>
</tr>
<tr>
<td>REPORT PREPARATION</td>
<td>40</td>
<td></td>
<td></td>
</tr>
<tr>
<td>REQUIRED REPORTING</td>
<td>40</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RESEARCH INVOLVING INMATES</td>
<td>36</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RIGHT TO REFUSE</td>
<td>422</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RLUIPA</td>
<td>559</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SAFETY RESTRAINTS</td>
<td>65</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SEARCHES</td>
<td>227</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SEAT BELTS</td>
<td>65</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SECURE BANKING OF INMATE FUNDS</td>
<td>532</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SMOKING</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tobacco</td>
<td>569</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SPECIAL NEEDS INMATES</td>
<td>435</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SPECIAL VISITS</td>
<td>554</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SPECIALIZED RESPONSE UNITS</td>
<td>90</td>
<td></td>
<td></td>
</tr>
<tr>
<td>STAFFING ANALYSIS</td>
<td>73</td>
<td></td>
<td></td>
</tr>
<tr>
<td>STRIKING WEAPONS</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Impact weapons</td>
<td>191</td>
<td></td>
<td></td>
</tr>
<tr>
<td>STRIP SEARCH</td>
<td>227</td>
<td></td>
<td></td>
</tr>
<tr>
<td>STUDENT INTERN</td>
<td>403</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SUICIDE PREVENTION PROGRAM</td>
<td>368</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TASER</td>
<td>192</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TELEPHONE ACCESS</td>
<td>549</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TESTING, FOOD SERVICES</td>
<td>484</td>
<td></td>
<td></td>
</tr>
<tr>
<td>THERAPEUTIC DIETS</td>
<td>480</td>
<td></td>
<td></td>
</tr>
<tr>
<td>THREATS, MAIL</td>
<td>545</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOILETS AND WASHBASINS</td>
<td>494</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOLL ROAD</td>
<td>69</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOOL AND CULINARY EQUIPMENT CONTROL</td>
<td>27</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOURS</td>
<td>59</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TRAINING COMMITTEE</td>
<td>109</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TRAINING MANAGER</td>
<td>108</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TRAINING MANUAL</td>
<td>86</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TRAINING NEEDS ASSESSMENT</td>
<td>108</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TRAINING OFFICER</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Training officer program</td>
<td>86</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TRAINING PLAN</td>
<td>108</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TRAINING RECORDS, BRIEFING</td>
<td>107</td>
<td></td>
<td></td>
</tr>
<tr>
<td>USDA INSPECTIONS</td>
<td>498</td>
<td></td>
<td></td>
</tr>
<tr>
<td>USE OF FORCE</td>
<td>93</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VEHICLE INSPECTIONS</td>
<td>66</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VEHICLE SAFETY</td>
<td>65</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VEHICLE SAFETY INSPECTIONS</td>
<td>66</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VEHICLE SAFETY REPAIRS</td>
<td>66</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VERMIN AND PEST CONTROL</td>
<td>466</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VICTIM NOTIFICATION</td>
<td>60</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VISITATION</td>
<td>551</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VISITATION RULES, GENERAL</td>
<td>553</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VISITORS</td>
<td>50</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VOLUNTEER COORDINATOR</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WARNINGS</td>
<td>201</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WATER SUPPLY</td>
<td>465</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WEAPONS STORAGE</td>
<td>193</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>