

Mono County Sheriff's Department

Mono County SO Custody Manual

MISSION

(Agency Mission statement)

Mono County Sheriff's Department

Mono County SO Custody Manual

PHILOSOPHY AND GOALS

(Agency Philosophy and Goals statement)

Mono County Sheriff's Department

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PHILOSOPHY AND GOALS

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CODE OF ETHICS

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

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

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

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

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

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

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Chapter 1 - Role and Authority

Organizational Structure and Responsibility

100.1 PURPOSE AND SCOPE

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

100.2 DIVISIONAL RESPONSIBILITY

The Jail Commander is responsible for administering and managing the Office. There are three divisions in the Office:

- Administration Division
- Custody Division
- Food Services Division

100.2.1 ADMINISTRATION DIVISION

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

100.2.2 CUSTODY DIVISION

The Custody Division is commanded by the Jail Lieutenant , whose primary responsibility is to function as the Jail Commander to provide general management direction and control for the jail. The Custody Division consists of Custody Operations, which includes Investigations, Medical/ Mental Health Services, Programs and Transportation.

100.2.3 FOOD SERVICES DIVISION

The Food Services Division is commanded by the Jail Commander or his / her designee, whose primary responsibility is to provide general management direction and control for, Facility Infrastructure and Maintenance, Laundry Services, Fleet Services and Procurement/Warehouse Services. The Food Services Division is supervised by the Food _____ who shall report directly to the Jail Commander.

100.3 CHAIN OF COMMAND

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

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

Authority and Legal Assistance

101.1 PURPOSE AND SCOPE

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

101.2 POLICY

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

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 Mono County Sheriff's Department 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 Office:

- (a) Analyze and alert the jail executive and the jail management team to jail-related case law.
- (b) Serve as a legal consultant in the construction and review of new jail 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 this department and the Sheriff.

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Authority and Legal Assistance

101.4.1 LEGAL LIAISON

The Sheriff will designate one or more staff to act as a liaison between the Office and the County Counsel's office. The legal liaison officer will provide an orientation of the facility and detention facility policies to representatives of the County Counsel's office as needed.

The liaison will arrange for regularly scheduled meetings in order to provide an ongoing status report of facility issues to the legal counsel. The appointed liaison will maintain an open relationship with legal counsel in order to move quickly on emerging facility issues that could have significant legal implications for the Office.

Annual Review and Performance-Based Goals and Objectives

102.1 MANAGEMENT REVIEW PROCESS

The management team may employ several methods to assess performance, including the following:

- (a) **Performance analysis** - Performance analysis attempts to discover discrepancies between the expected and actual levels of performance. This analysis should focus on whether the practices in this facility are meeting the mission of the Office and whether department policies and procedures are in alignment with statutes, regulations and court orders.
- (b) **One-to-one interviews** - Scheduled interviews with custody staff held in private to encourage candid responses to help identify issues or conditions that should be targeted for review or correction.
- (c) **Questionnaires** - Questionnaires should be used as a group method to solicit suggestions and information about what operations are in need of adjustment or where program resources should be directed.
- (d) **Staff debriefing** - Staff should be periodically debriefed, especially after an emergency operation or incident, to identify aspects of facility operations that may need to be addressed by the Jail Commander and supervisors.
- (e) **Inspection findings** - The Office is subject to a variety of administrative inspections (standard-setting authorities, command staff, grand jury, jail advocates). These annual inspections should be used to identify ongoing issues in the operation of this facility.

102.2 MANAGEMENT REVIEW RESULTS

To the extent practicable the individuals responsible for the development of a management review should follow the guidelines established in the Administrative Communications Policy and Annual Facility Inspection Policy to document and support the findings. A complete report of the review results should be submitted to the appropriate level in the chain of command for final approval.

The results of management reviews should be used in the ongoing process of continuous improvement. They should be used to direct changes in the operation of this facility or to identify successful operations that might be replicated in other areas of the facility. They should not, however, include specific identifying information of incidents or involved individuals.

The results of management reviews also may be used in full or in part to respond to inquiries from interested groups, such as the local legislative body, courts, grand jury or others, to provide information on issues concerning the operation of this facility, including action planning whenever appropriate.

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Annual Review and Performance-Based Goals and Objectives

102.3 PURPOSE AND SCOPE

The Mono County Sheriff's Department 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.

102.4 POLICY

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

102.5 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.
 - 4. Bookings/releases.
 - 5. Percentage of male inmates.
 - 6. Percentage of female inmates
 - 7. Felony inmates in custody.
 - 8. Misdemeanor inmates in custody.
 - 9. Pretrial population.
 - 10. Sentenced population.

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Annual Review and Performance-Based Goals and Objectives

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

102.6 CRITERIA TO MEASURE PERFORMANCE

The following items will be used to measure and evaluate the level of success in achieving the department'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 department 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

103.1 PURPOSE AND SCOPE

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

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

103.2 POLICY

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

103.2.1 DISCLAIMER

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

103.3 RESPONSIBILITIES

The Sheriff shall be considered the ultimate authority for the provisions of this manual and shall continue to issue Interim Directives, which shall modify the provisions to which they pertain. Interim Directives 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 Mono County Sheriff's Department (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.

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103.3.1 COMMAND STAFF

The command staff should consist of the following:

- Sheriff
- Jail Commander

103.3.2 OTHER PERSONNEL

Line and supervisory staff have a unique view of how policies and procedures influence the operation of the facility and therefore are expected to bring to the attention of their supervisors issues that might be addressed in a new or revised policy.

All members suggesting revision of the contents of the Custody Manual should forward their suggestions in writing, through the chain of command, to the Jail Commander, who will consider the recommendation.

103.3.3 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).

103.4 DEFINITIONS

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

Office - The Mono County Sheriff's Department.

Custody Manual - The Office Custody Manual.

Employee - Any person employed by the Office.

Inmate - Incarcerated person.

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

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

- Full- and part-time employees.
- Sworn correctional deputy.
- Reserve correctional deputy.
- Non-sworn employees.
- Volunteers.

Correctional Deputy - All persons, regardless of rank, who are employees and who are selected and trained in accordance with state law as correctional deputy of the Mono County Sheriff's Department.

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

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

Rank - The job classification title held by a correctional deputy.

Shall or will - Indicates a mandatory action.

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

103.5 DISTRIBUTION OF MANUAL

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

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

103.6 MANUAL ACCEPTANCE

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

103.7 REVISIONS TO POLICIES

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

Each supervisor will ensure that members under his/her command are familiar with and understand all revisions.

Administrative Communications

104.1 PURPOSE AND SCOPE

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

104.2 PERSONNEL ORDERS

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

104.3 SURVEYS

All surveys made in the name of the Office shall be authorized in advance by the Sheriff or the Jail Commander.

104.4 COMPLETED STAFF WORK

All staff reports (i.e., reports assigned to a specific person for the purpose of responding to a problem or issue) shall incorporate the principle of completed staff work which requires the person to whom a task has been delegated to complete and document the delegated work to such an extent that the only thing left for the decision-maker to do is to approve or decline the recommendation. Staff reports that only point out weaknesses or merely suggest needed actions are not completed staff work and are not acceptable.

The writer of the staff report should document the efforts made to have the report reviewed by or acted upon by those individuals representing work units or other entities likely to be affected by any proposed changes.

104.5 POLICY

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

Interim Directives

105.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for issuing Interim Directives.

105.2 INTERIM DIRECTIVES PROTOCOL

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

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

105.3 RESPONSIBILITIES

105.3.1 AGENCYHEAD

The Sheriff, with the assistance of department staff, shall issue and be responsible for all Interim Directives, including their publication and dissemination throughout the Office.

105.3.2 MANAGERS AND SUPERVISORS

Managers and supervisors are responsible for ensuring that staff under their command receive training on all new Interim Directives.

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

105.4 POLICY

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

Specialized Assignments and Promotions

106.1 PURPOSE AND SCOPE

The purpose of this policy is to establish required and desirable qualifications for specialized assignment and promotion within the ranks of the Mono County Sheriff's Department.

106.2 GENERAL REQUIREMENTS

The following conditions should be used in evaluating employees for specialized assignment, promotion and transfer:

- (a) Presents a professional, neat appearance.
- (b) Maintains a physical condition which aids in job performance.
- (c) Meets the minimum positional requirements of the job description.
- (d) Demonstrates the following traits:
 - 1. Emotional stability and maturity
 - 2. Stress tolerance
 - 3. Sound judgment and decision-making
 - 4. Personal integrity and ethical conduct
 - 5. Leadership
 - 6. Initiative
 - 7. Adaptability and flexibility
 - 8. Ability to conform to organizational goals and objectives in a positive manner

106.2.1 DISQUALIFICATION

The Mono County Sheriff's Department 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 that was 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.

The Office shall either conduct criminal background records checks at least every five years on members or contractors who may have contact with inmates or have in place a system for otherwise capturing such information.

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Specialized Assignments and Promotions

Employees who may have contact with inmates shall disclose any conduct described above in written applications or interviews for promotion or specialized assignment.

106.3 CORRECTIONAL DEPUTY SPECIALIZED ASSIGNMENTS

Placement into or removal from the following assignments shall not be considered a promotion or a demotion:

- (a) Corrections special enforcement team member
 - 1. Correctional Emergency Response Team (CERT or SERT)
 - 2. Special Weapons and Tactics Team (SWAT)
 - 3. Negotiation Team (hostage or other)
 - 4. Search Team
 - 5. Canine Handler
 - 6. Jail Violence Reduction Team
- (b) Investigators
 - 1. Crime Scene Investigator or Detective
 - 2. Risk Management Investigator (accident investigator)
 - 3. Internal Affairs Investigator
 - 4. Background Investigator
- (c) Jail Intelligence
 - 1. Gang Intelligence
 - 2. General Intelligence
- (d) Classification Officers
- (e) Training Officer
 - 1. Training Manager
 - 2. Training Specialist
 - 3. Jail Training Officer
 - 4. Academy Coordinator/Tactical Officer
 - 5. Defensive Tactics Instructor
 - 6. Rangemaster/Firearms/Control Devices Instructor
- (f) Court Officer
- (g) Administrative Services

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Specialized Assignments and Promotions

1. Records
2. Administrative Officer/Aide
3. Jail Compliance Officer/Team
4. Inmate Programs Specialist
5. Grievance Officer
6. Inmate Disciplinary Hearing Officer
7. Public Information Officer (PIO)
8. Accreditation/audit/inspection manager

106.3.1 DESIRABLE QUALIFICATIONS

Qualifications that will be considered for a specialized assignment include:

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

106.4 SPECIALIZED ASSIGNMENT SELECTION PROCESS

The following criteria apply to specialized assignments:

- (a) Administrative evaluation, as determined by the Sheriff, will be conducted. This should include a review of supervisor recommendations and the employee's performance evaluation history. Each supervisor who has supervised or otherwise been involved with the candidate will submit these recommendations.
- (b) The supervisor recommendations will be submitted to the Jail Commander for whom the candidate will work. The Jail Commander will schedule interviews with each candidate.
- (c) Based on supervisor recommendations and those of the Jail Commander after the interview, the Jail Commander will submit his/her recommendation to the Sheriff.
- (d) Appointments will be made by the Sheriff.

The policy and procedures for all positions may be waived for temporary assignments or emergency situations. This policy may also be waived to allow selected candidates to attend requisite training programs.

106.5 SECTION TITLE

Annual Facility Inspection

106.1 PURPOSE AND SCOPE

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

106.1.1 POLICY

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

106.2 UNDERSHERIFF RESPONSIBILITY

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

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

106.3 INSPECTION AREAS

The annual inspection should include the following areas in the assessment process:

- (a) **Pre-assessment briefing** - The pre-assessment briefing should begin with a meeting of the Jail Commander, key program staff and service providers. The individual conducting the assessment will need to advise key personnel of the areas they will be inspecting so the appropriate materials will be brought up to date and made available to the assessment team.
- (b) **Policy review** - A review of all jail policies and procedures should be conducted to ensure that those policies are up to date and accurately reflect the requirements and activities related to the jail operation.
- (c) **Record review** - A review of the records that support jail activities, medical records and the facility's financial records should be conducted to ensure that contractual benchmarks are being met and that any discrepancies are documented and reported as part of the assessment report in an effort to mitigate harm from improper access to or release of records.

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- (d) **Benchmark review** - A review of the Office stated goals and objectives should be discussed with the Jail Commander, program managers and other key providers of programs. This will provide the opportunity to identify any areas that require correction, additional resources or that reflect a successful performance that should be acknowledged and possibly replicated.
- (e) **On-site inspections** - The assessment team should conduct on-site inspections of the facility to verify that activities in the facility are in alignment with goals and objectives and compliant with policies and procedures. Any discrepancies, as well as exceptional efforts on the part of management and staff, should be reported as a part of the jail assessment. An inspection checklist should be used to guide the inspection process and to ensure consistency. It is important that the jail assessments be viewed as a credible measurement instrument as many issues identified in the assessment may require significant funding.
- (f) **Develop an action plan** - After the fact-finding described in the previous sections has been accomplished, notes, records and recommendations should be analyzed and an action plan developed to initiate any needed correction. Documenting successful practices is important to determine if they can be replicated in other areas.
- (g) **Reporting** - The results of the inspection should be compiled into a report and should include recommendations and action plans necessary to ensure continuous improvement in the operation and management of the jail system. The completed report and any analysis and documentation required to justify costs, policy revisions or any other administrative requirements should be submitted to the Sheriff.
- (h) **Monitor progress** - The Jail Commander should ensure that approved recommendations are being instituted by the responsible program providers.

106.4 FOCAL POINTS FOR INSPECTIONS

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

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

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

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- Standard bedding and linen use
- Mattresses

Standards of Conduct

107.1 PURPOSE AND SCOPE

This policy establishes standards of conduct that are consistent with the values and mission of the Mono County Sheriff's Department and are expected of all department members. The standards contained in this policy are not intended to be an exhaustive list of requirements and prohibitions, but they do identify many of the important matters concerning conduct. In addition to the provisions of this policy, members are subject to all other provisions contained in this manual, as well as any additional guidance on conduct that may be disseminated by this department or a member's supervisors.

Discriminatory Harassment

108.1 PURPOSE AND SCOPE

The purpose of this policy is to prevent department 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.

108.2 POLICY

The Mono County Sheriff's Department 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.

108.3 DEFINITIONS

Definitions related to this policy include:

108.3.1 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 department equipment and/or systems to transmit or receive offensive material, statements, or pictures. Such conduct is contrary to department policy and to a work environment that is free of discrimination.

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108.3.2 RETALIATION

Retaliation is treating a person differently or engaging in acts of reprisal or intimidation against the person because the person has engaged in protected activity, filed a charge of discrimination, participated in an investigation, or opposed a discriminatory practice. Retaliation will not be tolerated.

108.3.3 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.

108.3.4 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 California Civil Rights Council guidelines.
- (b) Bona fide requests or demands by a supervisor that a member improve the member's work quality or output, that the member report to the job site on time, that the member comply with county or department rules or regulations, or any other appropriate work-related communication between supervisor and member.

108.4 RESPONSIBILITIES

This policy applies to all department members, who shall follow the intent of these guidelines in a manner that reflects department policy, professional 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 the member's 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 Director of Human Services, or the County Administrator.

Any member who believes, in good faith, that the member has been discriminated against, harassed, or subjected to retaliation, or who has observed harassment, discrimination, or

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retaliation, is 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.

108.4.1 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 Director of Human Services, the County Administrator, or the California Civil Rights Department for further information, direction, or clarification (Government Code § 12950).

108.4.2 SUPERVISOR RESPONSIBILITIES

The responsibilities of supervisors and managers 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 the Director of Human Services in writing of the circumstances surrounding any reported allegations or observed acts of discrimination, harassment, or retaliation no later than the next business day.

108.4.3 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 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.

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108.5 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.

108.5.1 SUPERVISOR RESOLUTION

Members who believe they are experiencing discrimination, harassment, or retaliation should be encouraged to inform the individual that the behavior is unwelcome, offensive, unprofessional, or inappropriate. However, if the member feels uncomfortable or threatened or has difficulty expressing the member's 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.

108.5.2 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 an 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, the Director of Human Services, or the County Administrator.

108.5.3 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.

108.6 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:

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- (a) Approved by the Sheriff, the County Administrator, or the Director of Human Services, depending on the ranks of the involved parties.
- (b) Maintained in accordance with the established records retention schedule.

108.6.1 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.

108.7 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 the member has been advised of this policy, is aware of and understands its contents, and agrees to abide by its provisions during the member's 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.

108.7.1 STATE-REQUIRED TRAINING

The Training Manager should ensure that employees receive the required state training and education regarding sexual harassment, prevention of abusive conduct, and harassment based on gender identity, gender expression, and sexual orientation as follows (Government Code § 12950.1; 2 CCR 11024):

- (a) Supervisory employees shall receive two hours of classroom or other effective interactive training and education within six months of assuming a supervisory position.
- (b) All other employees shall receive one hour of classroom or other effective interactive training and education within six months of their employment or sooner for seasonal or temporary employees as described in Government Code § 12950.1.
- (c) All employees shall receive refresher training every two years thereafter.

If the required training is to be provided by the Civil Rights Department online training courses, the Training Manager should ensure that employees are provided the following website address to the training course: <https://calcivilrights.ca.gov/> (Government Code § 12950; 2 CCR 11023).

108.7.2 TRAINING RECORDS

The Training Manager shall be responsible for maintaining records of all discriminatory harassment training provided to members. Records shall be retained in accordance with established records retention schedules and for a minimum of two years (2 CCR 11024).

108.8 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).

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108.9 WORKING CONDITIONS

The Administration Undersheriff or the authorized designee should be responsible for reviewing facility design and working conditions for discriminatory practices. This person should collaborate with other county employees who are similarly tasked (2 CCR 11034).

Grievances

109.1 POLICY

Refer to Mono County Code sections 2.68.306 through 2.68.310.

Personnel Complaints

110.1 PURPOSE AND SCOPE

This policy provides guidelines for the reporting, investigation, and disposition of complaints regarding the conduct of members of the Mono County Sheriff's Department. This policy shall not apply to any questioning, counseling, instruction, informal verbal admonishment, or other routine or unplanned contact of a member in the normal course of duty, by a supervisor or any other member, nor shall this policy apply to a criminal investigation.

110.2 POLICY

The Mono County Sheriff's Department takes seriously all complaints regarding the service provided by the Office and the conduct of its members.

The Office will accept and address all complaints of misconduct in accordance with this policy and applicable federal, state, and local laws, municipal and county rules, and the requirements of any collective bargaining agreements.

It is also the policy of this department to ensure that the community can report misconduct without concern for reprisal or retaliation.

110.3 PERSONNEL COMPLAINTS

Personnel complaints include any allegation of misconduct or improper job performance that, if true, would constitute a violation of department policy or federal, state, or local law, policy, or rule. Personnel complaints may be generated internally or by the public.

Inquiries about conduct or performance that, if true, would not violate department policy or federal, state, or local law, policy, or rule may be handled informally by a supervisor and shall not be considered a personnel complaint. Such inquiries generally include clarification regarding policy, procedures, or the response to specific incidents by the Office.

110.3.1 COMPLAINT CLASSIFICATIONS

Personnel complaints shall be classified in one of the following categories:

Informal - A matter in which the Supervisor is satisfied that appropriate action has been taken by a supervisor of rank greater than the accused member.

Formal - A matter in which a supervisor determines that further action is warranted. Such complaints may be investigated by a supervisor of rank greater than the accused member or referred to the Internal Affairs Unit, depending on the seriousness and complexity of the investigation.

Incomplete - A matter in which the complaining party either refuses to cooperate or becomes unavailable after diligent follow-up investigation. At the discretion of the assigned supervisor or the Internal Affairs Unit, such matters may be further investigated depending on the seriousness of the complaint and the availability of sufficient information.

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110.3.2 SOURCES OF COMPLAINTS

The following applies to the source of complaints:

- (a) Individuals from the public may make complaints in any form, including in writing, by email, in person, or by telephone.
- (b) Any department member becoming aware of alleged misconduct shall immediately notify a supervisor.
- (c) Supervisors shall initiate a complaint based upon observed misconduct or receipt from any source alleging misconduct that, if true, could result in disciplinary action.
- (d) Anonymous and third-party complaints should be accepted and investigated to the extent that sufficient information is provided.
- (e) Tort claims and lawsuits may generate a personnel complaint.

110.4 AVAILABILITY AND ACCEPTANCE OF COMPLAINTS

110.4.1 COMPLAINT FORMS

Personnel complaint forms will be maintained in a clearly visible location in the public area of the department facility and be accessible through the department website. Forms may also be available at other county facilities.

Personnel complaint forms in languages other than English may also be provided, as determined necessary or practicable.

110.4.2 ACCEPTANCE

All complaints will be courteously accepted by any department member and promptly given to the appropriate supervisor. Although written complaints are preferred, a complaint may also be filed orally, either in person or by telephone. Such complaints will be directed to a supervisor. If a supervisor is not immediately available to take an oral complaint, the receiving member shall obtain contact information sufficient for the supervisor to contact the complainant. The supervisor, upon contact with the complainant, shall complete and submit a complaint form as appropriate.

Although not required, complainants should be encouraged to file complaints in person so that proper identification, signatures, photographs, or physical evidence may be obtained as necessary.

A complainant shall be provided with a copy of the complaining party's statement at the time it is filed with the Office (Penal Code § 832.7).

110.4.3 AVAILABILITY OF WRITTEN PROCEDURES

The Office shall make available to the public a written description of the investigation procedures for complaints (Penal Code § 832.5).

110.4.4 HATE COMPLAINTS AGAINST PEACE OFFICERS

Internal complaints or complaints from the public shall be accepted and investigated in accordance with this policy where it is alleged that a correctional deputy has in the previous seven years, and

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since age 18, engaged in membership in a hate group, participated in a hate group activity, or advocated any public expression of hate (Penal Code § 13682).

110.5 DOCUMENTATION

Supervisors shall ensure that all formal and informal complaints are documented on a complaint form. The supervisor shall ensure that the nature of the complaint is defined as clearly as possible.

All complaints and inquiries should also be documented in a log that records and tracks complaints. The log shall include the nature of the complaint and the actions taken to address the complaint. On an annual basis, the Jail Commander should audit the log and send an audit report to the Sheriff or the authorized designee.

110.6 ADMINISTRATIVE INVESTIGATIONS

Allegations of misconduct will be administratively investigated as follows.

110.6.1 SUPERVISOR RESPONSIBILITIES

In general, the primary responsibility for the investigation of a personnel complaint shall rest with the member's immediate supervisor, unless the supervisor is the complainant, or the supervisor is the ultimate decision-maker regarding disciplinary action or has any personal involvement regarding the alleged misconduct. The Sheriff or the authorized designee may direct that another supervisor investigate any complaint.

A supervisor who becomes aware of alleged misconduct shall take reasonable steps to prevent aggravation of the situation.

The responsibilities of supervisors include but are not limited to:

- (a) Ensuring that upon receiving or initiating any formal complaint, a complaint form is completed.
 1. The original complaint form will be directed to the Supervisor of the accused member, via the chain of command, who will take appropriate action and/or determine who will have responsibility for the investigation.
 2. In circumstances where the integrity of the investigation could be jeopardized by reducing the complaint to writing or where the confidentiality of a complainant is at issue, a supervisor shall orally report the matter to the member's Jail Commander or the Sheriff, who will initiate appropriate action.
- (b) Responding to all complainants in a courteous and professional manner.
- (c) Resolving those personnel complaints that can be resolved immediately.
 1. Follow-up contact with the complainant should be made within 24 hours of the Office receiving the complaint.
 2. If the matter is resolved and no further action is required, the supervisor will note the resolution on a complaint form and forward the form to the Supervisor.

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- (d) Ensuring that upon receipt of a complaint involving allegations of a potentially serious nature, the Supervisor and the Sheriff are notified via the chain of command as soon as practicable.
- (e) Promptly contacting the Department of Human Resources and the Supervisor for direction regarding the supervisor's role in addressing a complaint that relates to sexual, racial, ethnic, or other forms of prohibited harassment or discrimination.
- (f) Forwarding unresolved personnel complaints to the Supervisor, who will determine whether to contact the complainant or assign the complaint for investigation.
- (g) Informing the complainant of the investigator's name and the complaint number within three days after assignment.
- (h) Investigating a complaint as follows:
 - 1. Making reasonable efforts to obtain names, addresses, and telephone numbers of witnesses.
 - 2. When appropriate, ensuring immediate medical attention is provided and photographs of alleged injuries and accessible uninjured areas are taken.
- (i) Ensuring that the procedural rights of the accused member are followed (Government Code § 3303 et seq.).
- (j) Ensuring interviews of the complainant are generally conducted during reasonable hours.

110.6.2 ADMINISTRATIVE INVESTIGATION PROCEDURES

Whether conducted by a supervisor or a member of the Internal Affairs Unit, the following applies to members covered by the Public Safety Officers Procedural Bill of Rights Act (POBR) (Government Code § 3303):

- (a) Interviews of an accused member shall be conducted during reasonable hours and preferably when the member is on-duty. If the member is off-duty, the member shall be compensated.
- (b) Unless waived by the member, interviews of an accused member shall be at the Mono County Sheriff's Department or other reasonable and appropriate place.
- (c) No more than two interviewers should ask questions of an accused member.
- (d) Prior to any interview, a member shall be informed of the nature of the investigation, the name, rank, and command of the correctional deputy in charge of the investigation, the interviewing officers, and all other persons to be present during the interview.
- (e) All interviews should be for a reasonable period and the member's personal needs should be accommodated.
- (f) No member should be subjected to offensive or threatening language, nor shall any promises, rewards, or other inducements be used to obtain answers.
- (g) Any member refusing to answer questions directly related to the investigation may be ordered to answer questions administratively and may be subject to discipline for failing to do so.

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1. A member should be given an order to answer questions in an administrative investigation that might incriminate the member in a criminal matter only after the member has been given a *Lybarger* advisement. Administrative investigators should consider the impact that compelling a statement from the member may have on any related criminal investigation and should take reasonable steps to avoid creating any foreseeable conflicts between the two related investigations. This may include conferring with the person in charge of the criminal investigation (e.g., discussion of processes, timing, implications).
2. No information or evidence administratively coerced from a member may be provided to anyone involved in conducting the criminal investigation or to any prosecutor.
 - (h) The interviewer should record all interviews of members and witnesses. The member may also record the interview. If the member has been previously interviewed, a copy of that recorded interview shall be provided to the member prior to any subsequent interview.
 - (i) All members subjected to interviews that could result in discipline have the right to have an uninvolved representative present during the interview. However, in order to maintain the integrity of each individual's statement, involved members shall not consult or meet with a representative or attorney collectively or in groups prior to being interviewed.
 - (j) All members shall provide complete and truthful responses to questions posed during interviews.
 - (k) No member may be requested or compelled to submit to a polygraph examination, nor shall any refusal to submit to such examination be mentioned in any investigation (Government Code § 3307).

No investigation shall be undertaken against any correctional deputy solely because the correctional deputy has been placed on a prosecutor's *Brady* list or the name of the correctional deputy may otherwise be subject to disclosure pursuant to *Brady v. Maryland*. However, an investigation may be based on the underlying acts or omissions for which the correctional deputy has been placed on a *Brady* list or may otherwise be subject to disclosure pursuant to *Brady v. Maryland* (Government Code § 3305.5).

110.6.3 ADMINISTRATIVE INVESTIGATION FORMAT

Formal investigations of personnel complaints shall be thorough, complete, and essentially follow this format:

Introduction - Include the identity of the members, the identity of the assigned investigators, the initial date, and source of the complaint.

Synopsis - Provide a brief summary of the facts giving rise to the investigation.

Summary - List the allegations separately, including applicable policy sections, with a brief summary of the evidence relevant to each allegation. A separate recommended finding should be provided for each allegation.

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Evidence - Each allegation should be set forth with the details of the evidence applicable to each allegation provided, including comprehensive summaries of member and witness statements. Other evidence related to each allegation should also be detailed in this section.

Conclusion - A recommendation regarding further action or disposition should be provided.

Exhibits - A separate list of exhibits (e.g., recordings, photos, documents) should be attached to the report.

110.6.4 DISPOSITIONS

Each personnel complaint shall be classified with one of the following dispositions:

Unfounded - When the investigation discloses that the alleged acts did not occur or did not involve department members. Complaints that are determined to be frivolous will fall within the classification of unfounded (Penal Code § 832.8).

Exonerated - When the investigation discloses that the alleged act occurred but that the act was justified, lawful, and/or proper.

Not sustained - When the investigation discloses that there is insufficient evidence to sustain the complaint or fully exonerate the member.

Sustained - A final determination by an investigating agency, commission, board, hearing officer, or arbitrator, as applicable, following an investigation and opportunity for an administrative appeal pursuant to Government Code § 3304 and Government Code § 3304.5 that the actions of a correctional deputy were found to violate law or department policy (Penal Code § 832.8).

If an investigation discloses misconduct or improper job performance that was not alleged in the original complaint, the investigator shall take appropriate action with regard to any additional allegations.

110.6.5 COMPLETION OF INVESTIGATIONS

Every investigator or supervisor assigned to investigate a personnel complaint or other alleged misconduct shall proceed with due diligence in an effort to complete the investigation within one year from the date of discovery by an individual authorized to initiate an investigation (Government Code § 3304).

In the event that an investigation cannot be completed within one year of discovery, the assigned investigator or supervisor shall ensure that an extension or delay is warranted within the exceptions set forth in Government Code § 3304(d) or Government Code § 3508.1.

110.6.6 NOTICE TO COMPLAINANT OF INVESTIGATION STATUS

The member conducting the investigation should provide the complainant with periodic updates on the status of the investigation, as appropriate.

110.7 ADMINISTRATIVE SEARCHES

Assigned lockers, storage spaces, and other areas, including desks, offices, and vehicles, may be searched as part of an administrative investigation upon a reasonable suspicion of misconduct.

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Such areas may also be searched any time by a supervisor for non-investigative purposes, such as obtaining a needed report, radio, or other document or equipment.

Lockers and storage spaces may only be administratively searched in the member's presence, with the member's consent, with a valid search warrant, or where the member has been given reasonable notice that the search will take place (Government Code § 3309).

110.7.1 DISCLOSURE OF FINANCIAL INFORMATION

An employee may be compelled to disclose personal financial information under the following circumstances (Government Code § 3308):

- (a) Pursuant to a state law or proper legal process
- (b) Information exists that tends to indicate a conflict of interest with official duties
- (c) If the employee is assigned to or being considered for a special assignment with a potential for bribes or other improper inducements

110.8 ADMINISTRATIVE LEAVE

When a complaint of misconduct is of a serious nature, or when circumstances indicate that allowing the accused to continue to work would adversely affect the mission of the Office, the Sheriff or the authorized designee may temporarily assign an accused employee to administrative leave. Any employee placed on administrative leave:

- (a) May be required to relinquish any department badge, identification, assigned weapons, and any other department equipment.
- (b) Shall be required to continue to comply with all policies and lawful orders of a supervisor.
- (c) May be temporarily reassigned to a different shift, generally a normal business-hours shift, during the investigation. The employee may be required to remain available for contact at all times during such shift, and will report as ordered.

110.9 CRIMINAL INVESTIGATION

Where a member is accused of potential criminal conduct, a separate supervisor or investigator shall be assigned to investigate the criminal allegations apart from any administrative investigation. Any separate administrative investigation may parallel a criminal investigation.

The Sheriff shall be notified as soon as practicable when a member is accused of criminal conduct. The Sheriff may request a criminal investigation by an outside law enforcement agency.

A member accused of criminal conduct shall be advised of the member's constitutional rights (Government Code § 3303(h)). The member should not be administratively ordered to provide any information in the criminal investigation.

The Mono County Sheriff's Department may release information concerning the arrest or detention of any member, including a correctional deputy, that has not led to a conviction. No disciplinary action should be taken until an independent administrative investigation is conducted.

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110.10 POST-ADMINISTRATIVE INVESTIGATION PROCEDURES

Upon completion of a formal investigation, an investigation report should be forwarded to the Sheriff through the chain of command. Each level of command should review the report and include comments in writing before forwarding the report. The Sheriff may accept or modify any classification or recommendation for disciplinary action.

110.10.1 JAIL COMMANDER RESPONSIBILITIES

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

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

Prior to forwarding recommendations to the Sheriff, the Jail Commander may return the entire investigation to the assigned investigator or supervisor for further investigation or action.

When forwarding any written recommendation to the Sheriff, the Jail Commander shall include all relevant materials supporting the recommendation. Actual copies of a member's existing personnel file need not be provided and may be incorporated by reference.

110.10.2 SHERIFF RESPONSIBILITIES

Upon receipt of any written recommendation for disciplinary action, the Sheriff shall review the recommendation and all accompanying materials. The Sheriff may modify any recommendation and/or may return the file to the Jail Commander for further investigation or action.

Once the Sheriff is satisfied that no further investigation or action is required by staff, the Sheriff shall determine the amount of discipline, if any, that should be imposed. In the event disciplinary action is proposed, the Sheriff shall provide the member with a pre-disciplinary procedural due process hearing (*Skelly*) by providing written notice of the charges, proposed action, and reasons for the proposed action. Written notice shall be provided within one year from the date of discovery of the misconduct (Government Code § 3304(d)). The Sheriff shall also provide the member with:

- (a) Access to all of the materials considered by the Sheriff in recommending the proposed discipline.
- (b) An opportunity to respond orally or in writing to the Sheriff within five days of receiving the notice.
 1. Upon a showing of good cause by the member, the Sheriff may grant a reasonable extension of time for the member to respond.
 2. If the member elects to respond orally, the presentation may be recorded by the Office. Upon request, the member shall be provided with a copy of the recording.

Once the member has completed a response, or if the member has elected to waive any such response, the Sheriff shall consider all information received in regard to the recommended discipline. The Sheriff shall render a timely written decision to the member and specify the grounds

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and reasons for discipline and the effective date of the discipline. Once the Sheriff has issued a written decision, the discipline shall become effective.

110.10.3 NOTICE OF FINAL DISPOSITION TO THE COMPLAINANT

The Sheriff or the authorized designee shall ensure that the complainant is notified of the disposition (i.e., sustained, not sustained, exonerated, unfounded) of the complaint (Penal Code § 832.7(f)).

110.10.4 NOTICE REQUIREMENTS

The disposition of any civilian's complaint shall be released to the complaining party within 30 days of the final disposition. This release shall not include what discipline, if any was imposed (Penal Code § 832.7(f)).

110.11 PRE-DISCIPLINE EMPLOYEE RESPONSE

The pre-discipline process is intended to provide the accused employee with an opportunity to present a written or oral response to the Sheriff after having had an opportunity to review the supporting materials and prior to imposition of any recommended discipline. The employee shall consider the following:

- (a) The response is not intended to be an adversarial or formal hearing.
- (b) Although the employee may be represented by an uninvolved representative or legal counsel, the response is not designed to accommodate the presentation of testimony or witnesses.
- (c) The employee may suggest that further investigation could be conducted or the employee may offer any additional information or mitigating factors for the Sheriff to consider.
- (d) In the event that the Sheriff elects to conduct further investigation, the employee shall be provided with the results prior to the imposition of any discipline.
- (e) The employee may thereafter have the opportunity to further respond orally or in writing to the Sheriff on the limited issues of information raised in any subsequent materials.

110.12 RESIGNATIONS/RETIREMENTS PRIOR TO DISCIPLINE

In the event that a member tenders a written resignation or notice of retirement prior to the imposition of discipline, it shall be noted in the file. The tender of a resignation or retirement by itself shall not serve as grounds for the termination of any pending investigation or discipline (Penal Code § 13510.8).

110.13 POST-DISCIPLINE APPEAL RIGHTS

Non-probationary employees have the right to appeal a suspension without pay, punitive transfer, demotion, reduction in pay or step, or termination from employment. The employee has the right to appeal using the procedures established by any collective bargaining agreement, Memorandum of Understanding, and/or personnel rules.

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In the event of punitive action against an employee covered by the POBR, the appeal process shall be in compliance with Government Code § 3304 and Government Code § 3304.5.

During any administrative appeal, evidence that a correctional deputy has been placed on a *Brady* list or is otherwise subject to *Brady* restrictions may not be introduced unless the underlying allegations of misconduct have been independently established. Thereafter, such *Brady* evidence shall be limited to determining the appropriateness of the penalty (Government Code § 3305.5).

110.14 PROBATIONARY EMPLOYEES AND OTHER MEMBERS

At-will and probationary employees and those members other than non-probationary employees may be released from employment for non-disciplinary reasons (e.g., failure to meet standards) without adherence to any of the procedures set forth in this policy or any right to appeal. However, any probationary correctional deputy subjected to an investigation into allegations of misconduct shall be entitled to those procedural rights, as applicable, set forth in the POBR (Government Code § 3303; Government Code § 3304).

At-will, probationary employees and those other than non-probationary employees subjected to discipline or termination as a result of allegations of misconduct shall not be deemed to have acquired a property interest in their position, but shall be given the opportunity to appear before the Sheriff or the authorized designee for a non-evidentiary hearing for the sole purpose of attempting to clear their name or liberty interest. There shall be no further opportunity for appeal beyond the liberty interest hearing and the decision of the Sheriff shall be final.

110.15 RETENTION OF PERSONNEL INVESTIGATION FILES

All personnel complaints shall be maintained in accordance with the established records retention schedule and as described in the Personnel Records Policy.

110.16 REQUIRED REPORTING TO POST

The Sheriff or the authorized designee shall notify the Commission on Peace Officer Standards and Training (POST), on the appropriate POST form, within 10 days of certain correctional deputy personnel events, including but not limited to (Penal Code § 13510.9):

- (a) Termination or separation from employment or appointment. Separation from employment or appointment includes any involuntary termination, resignation, or retirement.
 1. A POST affidavit-of-separation form shall be executed and maintained by the department and submitted to POST as required by Penal Code § 13510.9 and 11 CCR 1003.
- (b) Events that could affect a correctional deputy's POST certification, such as:
 1. Complaints, charges, or allegations of misconduct.
 2. Findings of civilian review boards.
 3. Final dispositions of any investigations.

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4. Civil judgments or court findings based on conduct, or settlement of a civil claim against a correctional deputy or the Mono County Sheriff's Department based on allegations of conduct by a correctional deputy.

The Sheriff or the authorized designee shall be responsible for providing POST access to or duplication of investigation documentation (e.g., physical or documentary evidence, witness statements, analysis, conclusions) for up to two years after reporting the disposition of an investigation (Penal Code § 13510.9).

Post Orders

111.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for the development of post orders and the training of members assigned to each post.

111.2 POLICY

It is the policy of this department to develop comprehensive post orders for every position. Copies of the orders should be maintained at each post or available electronically. Members shall be familiar with the post orders before working a position.

111.3 DEVELOPMENT

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.

111.4 REVIEW AND UPDATE

Post orders shall be reviewed at least annually and updated whenever necessary by the Jail Commander or the authorized designee.

111.5 TRAINING

The Training Manager shall ensure that all staff members assigned to posts are properly trained to perform all of the 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. This may include the use of self-contained breathing apparatus (SCBA) if such equipment is available and/or required by the local fire authority. All training should be documented in each member's training file and retained in accordance with established records retention schedules.

Anti-Retaliation

112.1 PURPOSE AND SCOPE

Refer to Mono County Sheriff's Office Policy 1003.

Chapter 2 - Organization and Administration

Drug- and Alcohol-Free Workplace

200.1 PURPOSE AND SCOPE

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

200.2 GENERAL GUIDELINES

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

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

200.2.1 USE OF MEDICATIONS

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

200.2.2 MEDICAL CANNABIS

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

200.3 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 department premises or on department time (41 USC § 8103). The lawful possession or use of prescribed medications or over-the-counter remedies is excluded from this prohibition.

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

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

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200.4 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.

200.5 WORK RESTRICTIONS

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

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

200.6 SCREENING TESTS

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

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

200.6.1 SUPERVISOR RESPONSIBILITIES

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

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

200.6.2 DISCIPLINE

An employee may be subject to disciplinary action if the employee:

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- (a) Fails or refuses to submit to a screening test.
- (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 the employee took the controlled substance as directed, pursuant to a current and lawful prescription issued in the employee's name.

200.7 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).

200.8 CONFIDENTIALITY

The Office recognizes the confidentiality and privacy due 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 in the member's confidential medical file in accordance with the Personnel Records Policy.

Supervision of Inmates - Minimum Requirements

201.1 PURPOSE AND SCOPE

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

201.2 POLICY

It is the policy of this facility to provide for the safety and security of citizens, staff and 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.

201.3 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 correctional 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).

201.4 SEPARATION OF DUTIES

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

Prohibition on Inmate Control

202.1 PURPOSE AND SCOPE

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

202.2 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 department 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)).

202.3 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

203.1 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)).

203.2 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)).

203.3 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 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.

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203.4 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 correctional 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.

203.5 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 correctional 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 correctional 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 correctional 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

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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.

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

203.7 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 correctional 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 correctional deputy, who shall document each one.

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

Eating utensils (forks/spoons/sporks) shall be counted by the correctional 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.

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Disposition of Evidence

204.1 PURPOSE AND SCOPE

Refer to Sheriff's policy and Procedures # 804

Records and Data Practices

205.1 PURPOSE AND SCOPE

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

205.2 ACCESS TO CRIMINAL RECORDS

Official files, documents, records, electronic data, video and audio recordings and information held by the Mono County Sheriff's Office or in the custody or control of department 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 sergeant approval. All requests for information received from outside the Office shall be forwarded to the Jail Commander or his designee.

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 department 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 sergeant or Jail Commander to determine the status of the documents in question.

205.3 STAFF TRAINING

Prior to being allowed to work inside this facility, all custody staff, volunteers and contractors will receive training on department 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

206.1 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.

206.2 POLICY

The Mono County Sheriff's Department will conduct and support research that improves operations, enhances professional knowledge, decreases recidivism and advances the department's 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.

206.3 AUTHORIZATION REQUIREMENTS

Prior to initiating any approved research, all persons conducting research in this facility must agree to abide by all department 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 Office or other legal expert in these matters.

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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.

206.4 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.

206.4.1 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.

206.5 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.

206.6 HUMAN RESEARCH STUDIES

This department 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 Responsible Physician and legal counsel, and authorization provided prior to enrollment. Any authorized enrollments shall comply with all state and federal guidelines.

Inmate Records

207.1 PURPOSE AND SCOPE

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

207.2 POLICY

It is the policy of this department 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 department 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.

207.3 RECORD MAINTENANCE

It shall be the responsibility of the Records Division 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

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- Non-medical information regarding disabilities and other limitations

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

207.3.1 COURT ORDERS OF NAME OR GENDER CHANGE

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

207.4 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.

207.5 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.

207.6 RECORDS RETENTION

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

207.7 INFORMATION SHARING REGARDING IMMIGRATION STATUS

No member of this department 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 department 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

208.1 PURPOSE AND SCOPE

Report preparation is a major part of each correctional deputy's job. The purpose of reports is to refresh the correctional 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.

208.2 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. Reports should only be written by hand when there is no electronic means to document the incident.. 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.

208.3 REQUIRED REPORTING

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

208.3.1 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.

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208.3.2 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 department 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.

208.3.3 DEATHS

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

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

208.3.4 INJURY OR DAMAGE BY DEPARTMENT 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.

208.3.5 USE OF FORCE

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

208.4 GENERAL POLICY OF EXPEDITIOUS REPORTING

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

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Report Preparation

208.4.1 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 department consistency.

208.4.2 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.

208.5 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.

208.6 REPORT CHANGES OR ALTERATIONS

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

208.7 ELECTRONIC SIGNATURES

The Mono Jail has established an electronic signature procedure for use by all employees of the Mono 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

209.1 PURPOSE AND SCOPE

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

209.2 POLICY

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

209.2.1 KEY IDENTIFICATION

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

A separate secure document identifying all keys will be maintained in the key control box and in the jail supervisors office.

209.2.2 KEYSSET 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.

209.2.3 KEY CONTROL

1. The key inventory will consist of a manual count of Jail Keys:

- a. Small outer gates
- b. Sallyport gate
- c. "D" Block
- d. "A-B-C" Block doors
- e. Isolation Cells "1 & 2" and Visiting Cell
- f. Mechanical Room and Plumbing Chases
- g. "E" Block / Sobering / Holding

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- h. Outer Sallyport to Intake and Food Service entrance and fire exits
- i. Multi-purpose Room, Records Division and Safety Door to "A-B-C", Isolation Cells and "D" Block
- j. Control Center
- k. Cell Doors (1)-(8) "A" Block
- l. Laundry Room
- m. Kitchen & Pantry
- n. Inmate Property / Pantry / Walk-in Freezer
- o. Key Locker in Control Room

2. Upon completing the key inventory, the Duty Correctional Deputy shall indicate on the Jail Log **"** ALL KEYS ACCOUNTED FOR**"**.

3. Any inventory that reveals a security key is missing shall immediately be reported to the Jail Supervisor or Watch Commander for appropriate search.

4. If it is determined that a key was inadvertently taken home by an employee, it is that employee's responsibility to return the key to the facility as soon as possible and without delay. In all cases, a jail sergeant shall be notified of the employee's name and expected return time of the key.

209.2.4 LOCK POLICY

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

209.2.5 MISSING KEYS

Any staff member who discovers that a key or keyset is missing shall immediately make a verbal report to a sergeant and shall prepare a written incident report as directed by the sergeant. The sergeant shall immediately initiate a search for the missing key. If a reasonable effort to locate the key fails, the sergeant 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 sergeant shall, as soon as practicable, notify the Jail Lieutenant 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.

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

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

209.2.6 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 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.

209.3 KEY CONTROL RECORDS

A shift log 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.

Daily Activity Logs and Shift Reports

210.1 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.

210.2 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.

210.3 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.

210.4 SHIFT ACTIVITY LOG

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

- Personnel on-duty
- Bookings and releases
- Formal counts

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- 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

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

210.5 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

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The shift report will be retained in accordance with established records retention schedules.

210.6 SUPERVISOR RESPONSIBILITIES

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

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

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

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

Personnel Records

211.1 PURPOSE AND SCOPE

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

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

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

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

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

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

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

- (a) Records relating to the report, investigation, or findings of:
 1. The discharge of a firearm at another person by a correctional deputy.
 2. The use of force against a person resulting in death or in great bodily injury (as defined by Penal Code § 243(f)(4)) by a correctional deputy.

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

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

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

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

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

211.2.1 REDACTION

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

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

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

211.2.2 DELAY OF RELEASE

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

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

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211.2.3 NOTICE OF DELAY OF RECORDS

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

- (a) Provide the specific basis for the determination that the interest in delaying disclosure clearly outweighs the public interest in disclosure. The notice shall also include the estimated date for the disclosure of the withheld information.
- (b) When delay is continued beyond the initial 60 days because of criminal enforcement proceedings against anyone at 180-day intervals provide, the specific basis that disclosure could reasonably be expected to interfere with a criminal enforcement proceeding and the estimated date for disclosure.
 1. Information withheld shall be disclosed when the specific basis for withholding the information is resolved, the investigation or proceeding is no longer active, or no later than 18 months after the date of the incident, whichever occurs sooner, unless:
 - (a) When the criminal proceeding is against someone other than a correctional deputy and there are extraordinary circumstances to warrant a continued delay due to the ongoing criminal investigation or proceeding, then the Office must show by clear and convincing evidence that the interest in preventing prejudice to the active and ongoing criminal investigation or proceeding outweighs the public interest for prompt disclosure of records about misconduct or use of force by correctional deputy.

In cases where an action to compel disclosure is brought pursuant to Government Code § 7923.000, the Office may justify delay by filing an application to seal the basis for withholding if disclosure of the written basis itself would impact a privilege or compromise a pending investigation (Penal Code § 832.7(b)(8)).

211.3 POLICY

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

211.4 OFFICE FILE

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

- (a) Personal data, including photographs, marital status, names of family members, educational and employment history, or similar information. A photograph of the member should be permanently retained.
- (b) Election of employee benefits.
- (c) Personnel action reports reflecting assignments, promotions, and other changes in employment/appointment status. These should be permanently retained.

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- (d) Original performance evaluations. These should be permanently retained.
- (e) Discipline records including copies of sustained personnel complaints (see the Personnel Complaints Policy).
 - 1. Disciplinary action resulting from sustained internally initiated complaints or observation of misconduct shall be maintained pursuant to the established records retention schedule and at least four years (Government Code § 12946).
 - 2. Disciplinary action resulting from a sustained civilian's complaint involving misconduct shall be maintained pursuant to the established records retention schedule and at least 15 years (Penal Code § 832.5).
 - 3. A civilian's complaint involving misconduct that was not sustained shall be maintained pursuant to the established records retention schedule and at least five years (Penal Code § 832.5).
- (f) Adverse comments, such as supervisor notes or memos may be retained in the department file after the member has had the opportunity to read and initial the comment (Government Code § 3305).
 - 1. Once a member has had an opportunity to read and initial any adverse comment, the member shall be given the opportunity to respond in writing to the adverse comment within 30 days (Government Code § 3306).
 - 2. Any member response shall be attached to and retained with the original adverse comment (Government Code § 3306).
 - 3. If a member refuses to initial or sign an adverse comment, at least one supervisor should note the date and time of such refusal on the original comment and the member should sign or initial the noted refusal. Such a refusal, however, shall not be deemed insubordination, nor shall it prohibit the entry of the adverse comment into the member's file (Government Code § 3305).
- (g) Commendations and awards.
- (h) Any other information, the disclosure of which would constitute an unwarranted invasion of personal privacy.

211.5 DIVISION FILE

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

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

211.6 TRAINING FILE

An individual training file shall be maintained by the Training Manager for each member. Training files will contain records of all training; original or photocopies of available certificates, transcripts,

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diplomas, and other documentation; and education and firearms qualifications. Training records may also be created and stored remotely, either manually or automatically (e.g., Daily Training Bulletin (DTB) records).

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

211.7 INTERNAL AFFAIRS UNIT FILE

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

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

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

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

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

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

211.8 MEDICAL FILE

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

- (a) Materials relating to a medical leave of absence, including leave under the Family and Medical Leave Act (FMLA).
- (b) Documents relating to workers' compensation claims or the receipt of short- or long-term disability benefits.
- (c) Fitness-for-duty examinations, psychological and physical examinations, follow-up inquiries, and related documents.

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- (d) Medical release forms, doctor's slips, and attendance records that reveal a member's medical condition.
- (e) Any other documents or material that reveals the member's medical history or medical condition, including past, present, or future anticipated mental, psychological, or physical limitations.

211.9 SECURITY

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

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

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

Administrative and Supervisory Inspections

212.1 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.

212.2 POLICY

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

212.3 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.

212.3.1 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

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Administrative and Supervisory Inspections

- Sallyports and transportation staging areas

212.4 INSPECTIONS OF SECURITY EQUIPMENT

The on-duty jailer shall be responsible for conducting inspections of all security devices, identifying those in need of repair or maintenance and providing a written documentation of the results of the inspection in their daily log. The inspecting officer shall document all action taken to correct identified deficiencies, including maintenance records, and shall retain those records in accordance with established records retention schedules. A copy of the log shall be printed and given to a jail sergeant or the jail commander for their review.

212.5 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 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

213.1 PURPOSE AND SCOPE

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

213.2 POLICY

All entry points to the secure perimeter of the facility shall be monitored and controlled continuously by Mono One 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.

213.2.1 VISITORS

This facility shall be maintained as a secure area and no person shall enter any portion of the inner perimeter without specific authorization from the 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. Visitors shall be escorted by one or more staff members at all times while they are in the secure areas of the facility.

213.3 PROCEDURE

The secure perimeter shall be maintained by jail staff. 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 Supervisor and the Dispatch. The Dispatch 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.

An on duty Public Safety Officer 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 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 staff.

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Perimeter Security

Keys to the secure perimeter shall be easily identifiable and issued only in emergency situations or with the authorization the on duty sergeant.

Weapons lockers are provided outside all secure perimeter entrances. All weapons must be secured prior to an individual being allowed to enter the security area of the jail. 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 in and out of the secure inner perimeter of this facility. Public Safety Officers are responsible for ensuring all perimeter surveillance equipment is in good working order and shall immediately report malfunctions or failures to the on-duty sergeant.

Accessibility - Facility and Equipment

214.1 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).

214.1.1 DISABILITY DEFINED

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

214.2 POLICY

The Mono County Sheriff's Department prohibits discrimination of persons with disabilities. The Mono County Sheriff's Department 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.

214.2.1 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 in areas that include, but are not limited to:

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

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Accessibility - Facility and Equipment

214.2.2 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 department 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.
- (g) Local disability advocacy groups or other disability groups.
- (h) Negotiation and mediation.

214.2.3 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.

214.3 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.

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- Visitor check-in areas.
- Visitation areas, including attorney interview rooms that can accommodate wheelchairs and other mobility devices.

214.3.1 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.

214.4 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 department'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.

214.4.1 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.

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214.5 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

215.1 PURPOSE AND SCOPE

Refer to Sheriff's Policy and Procedures #346

Community Relations and Public Information Plan

216.1 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.)

216.2 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

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Community Relations and Public Information Plan

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.

216.3 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.

216.4 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.

216.5 POLICY

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

Victim Notification of Inmate Release

217.1 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.

217.2 POLICY

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

217.3 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.

217.4 NOTIFICATION

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

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

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

217.4.1 REQUIRED NOTIFICATIONS

The 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

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Victim Notification of Inmate Release

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 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 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

218.1 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.

218.2 POLICY

It is the policy of the Mono County Sheriff's Department 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.

218.3 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

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Community Service Program

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 Mono County Sheriff's Department.

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

218.4 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. Inmate welfare funds can be expended in support of the program.

Vehicle Safety

219.1 PURPOSE AND SCOPE

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

Fitness for Duty

220.1 PURPOSE AND SCOPE

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

220.2 POLICY

This policy requires all correctional deputy 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 department 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 department 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.

220.3 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 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.

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Fitness for Duty

220.4 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.

220.5 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 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.

220.6 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 department 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.

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- (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.

220.7 APPEALS

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

220.8 MEDICAL RECORDS

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

Employee Speech, Expression and Social Networking

221.1 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.

221.1.1 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.

221.2 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 department. Due to the nature of the work and influence associated with the law enforcement profession, it is necessary that employees of this department be subject to certain reasonable limitations on their speech and expression. To achieve its mission and efficiently provide service to the public, the Mono County Sheriff's Department 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.

221.3 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 Mono County Sheriff's Department 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

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Employee Speech, Expression and Social Networking

associates. Examples of the type of information that could reasonably be expected to compromise safety include:

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

221.4 PROHIBITED SPEECH, EXPRESSION AND CONDUCT

To meet the department'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 department'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.

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- (g) Posting, transmitting or disseminating any photographs, video or audio recordings, likenesses or images of department logos, emblems, uniforms, badges, patches, marked vehicles, equipment or other material that specifically identifies the Office on any personal or social networking or other website or web page, without the express authorization of the Sheriff.
- (h) Accessing websites for non-authorized purposes, or use of any personal communication device, game device or media device, whether personally or department-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).

221.4.1 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 department, 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

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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).

221.5 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 department e-mail system, computer network or any information placed into storage on any department system or device.

All messages, pictures and attachments transmitted, accessed or received over department networks are considered department 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 department system or device, or any such information placed into any department storage area or device. This includes records of all key strokes or web-browsing history made at any department computer or over any department 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 department computers or networks.

221.6 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.

221.7 TRAINING

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

Information Technology Use

222.1 PURPOSE AND SCOPE

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

222.1.1 DEFINITIONS

Definitions related to this policy include:

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

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

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

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

222.2 POLICY

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

222.3 PRIVACY EXPECTATION

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

The Office reserves the right to access, audit and disclose, for whatever reason, any message, including attachments, and any information accessed, transmitted, received or reviewed over any technology that is issued or maintained by the Office, including the department e-mail system, computer network or any information placed into storage on any department system or device. This includes records of all key strokes or web-browsing history made at any department computer or over any department 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 department computers, electronic devices or networks.

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222.4 RESTRICTED USE

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

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

222.4.1 SOFTWARE

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

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

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

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

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

222.4.2 HARDWARE

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

222.4.3 INTERNET USE

Internet access provided by or through the Office shall be strictly limited to department-related activities. Internet sites containing information that is not appropriate or applicable to department use and which shall not be intentionally accessed include, but are not limited to, adult forums,

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pornography, gambling, chat rooms, and similar or related Internet sites. Certain exceptions may be permitted with the express approval of the Supervisor as a function of a member's assignment.

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

222.4.4 OFF-DUTY USE

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

222.5 PROTECTIONS OF SYSTEMS AND FILES

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

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

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

222.6 INSPECTION OR REVIEW

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

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

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

Illness and Injury Prevention

223.1 PURPOSE AND SCOPE

Refer to Mono County Sheriff's Office Policy 1028.

Evaluation of Employees

224.1 PURPOSE AND SCOPE

Refer to Mono County Sheriff's Office Policy 1001.

Occupational Disease and Work-Related Injury Reporting

225.1 PURPOSE AND SCOPE

Refer to Mono County Sheriff's Office Policy 1020.

Payroll Records

226.1 PURPOSE AND SCOPE

Refer to Mono County Sheriff's Office Policy 1017.

Temporary Modified-Duty Assignments

227.1 PURPOSE AND SCOPE

Refer to Mono County Sheriff's Office Policy 1024.

Wellness Program

231.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidance on establishing and maintaining a proactive wellness program for department members.

The wellness program is intended to be a holistic approach to a member's well-being and encompasses aspects such as physical fitness, mental health, and overall wellness.

231.1.1 DEFINITIONS

Definitions related to this policy include:

Critical incident - An event or situation that may cause a strong emotional, cognitive, or physical reaction that has the potential to interfere with daily life.

Critical Incident Stress Debriefing (CISD) - A standardized approach using a discussion format to provide education, support, and emotional release opportunities for members involved in work-related critical incidents.

Peer support - Mental and emotional wellness support provided by peers trained to help members cope with critical incidents and certain personal or professional problems.

231.2 POLICY

It is the policy of the Mono County Sheriff's Department to prioritize member wellness to foster fitness for duty and support a healthy quality of life for department members. The Office will maintain a wellness program that supports its members with proactive wellness resources, critical incident response, and follow-up support.

231.3 WELLNESS COORDINATOR

The Sheriff should appoint a trained wellness coordinator. The coordinator should report directly to the Sheriff or the authorized designee and should collaborate with advisers (e.g., Department of Human Resources, legal counsel, licensed psychotherapist, qualified health professionals), as appropriate, to fulfill the responsibilities of the position, including but not limited to:

- (a) Identifying wellness support providers (e.g., licensed psychotherapists, external peer support providers, physical therapists, dietitians, physical fitness trainers holding accredited certifications).
 1. As appropriate, selected providers should be trained and experienced in providing mental wellness support and counseling to public safety personnel.
 2. When practicable, the Office should not use the same licensed psychotherapist for both member wellness support and fitness-for-duty evaluations.
- (b) Developing management and operational procedures for department peer support members, such as:
 1. Peer support member selection and retention.

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2. Training and applicable certification requirements.
 3. Deployment.
 4. Managing potential conflicts between peer support members and those seeking service.
 5. Monitoring and mitigating peer support member emotional fatigue (i.e., compassion fatigue) associated with providing peer support.
 6. Using qualified peer support personnel from other public safety agencies or outside organizations for department peer support, as appropriate.
- (c) Verifying members have reasonable access to peer support or licensed psychotherapist support.
- (d) Establishing procedures for CISDs, including:
1. Defining the types of incidents that may initiate debriefings.
 2. Steps for organizing debriefings.
- (e) Facilitating the delivery of wellness information, training, and support through various methods appropriate for the situation (e.g., phone hotlines, electronic applications).
- (f) Verifying a confidential, appropriate, and timely employee assistance program (EAP) is available for members. This also includes:
1. Obtaining a written description of the program services.
 2. Providing for the methods to obtain program services.
 3. Providing referrals to the EAP for appropriate diagnosis, treatment, and follow-up resources.
 4. Obtaining written procedures and guidelines for referrals to, or mandatory participation in, the program.
 5. Obtaining training for supervisors in their role and responsibilities, and identification of member behaviors that would indicate the existence of member concerns, problems, or issues that could impact member job performance.

231.4 OFFICE PEER SUPPORT

231.4.1 PEER SUPPORT MEMBER SELECTION CRITERIA

The selection of any department peer support member will be at the discretion of the coordinator. Selection should be based on the member's:

- Desire to be a peer support member.
- Experience or tenure.
- Demonstrated ability as a positive role model.
- Ability to communicate and interact effectively.
- Evaluation by supervisors and any current peer support members.

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231.4.2 PEER SUPPORT MEMBER RESPONSIBILITIES

The responsibilities of department peer support members include:

- (a) Providing pre- and post-critical incident support.
- (b) Presenting department members with periodic training on wellness topics, including but not limited to:
 - 1. Stress management.
 - 2. Suicide prevention.
 - 3. How to access support resources.
- (c) Providing referrals to licensed psychotherapists and other resources, where appropriate.
 - 1. Referrals should be made to department-designated resources in situations that are beyond the scope of the peer support member's training.

231.4.3 PEER SUPPORT MEMBER TRAINING

Every department peer support member should complete department-approved training prior to being assigned.

231.5 CRITICAL INCIDENT STRESS DEBRIEFINGS

A Critical Incident Stress Debriefing should occur as soon as practicable following a critical incident. The coordinator is responsible for organizing the debriefing. Notes and recorded statements shall not be taken because the sole purpose of the debriefing is to help mitigate the stress-related effects of a critical incident.

The debriefing is not part of any investigative process. Care should be taken not to release or repeat any communication made during a debriefing unless otherwise authorized by policy, law, or a valid court order.

Attendance at the debriefing should only include peer support members and those directly involved in the incident.

231.6 PEER SUPPORT COMMUNICATIONS

Although the Office will honor the sensitivity of communications with peer support members, there is no legal privilege to such communications.

231.7 PHYSICAL WELLNESS PROGRAM

The coordinator is responsible for establishing guidelines for any on-duty physical wellness program, including the following:

- (a) Voluntary participation by members
- (b) Allowable physical fitness activities
- (c) Permitted times and locations for physical fitness activities
- (d) Acceptable use of [agency_office]-provided physical fitness facilities and equipment

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- (e) Individual health screening and fitness assessment
- (f) Individual education (e.g., nutrition, sleep habits, proper exercise, injury prevention) and goal-setting
- (g) Standards for fitness incentive programs. The coordinator should collaborate with the appropriate entities (e.g., human resources, legal counsel) to verify that any standards are nondiscriminatory.
- (h) Maintenance of physical wellness logs (e.g., attendance, goals, standards, progress)
- (i) Ongoing support and evaluation

231.8 WELLNESS PROGRAM AUDIT

At least annually, the coordinator or the authorized designee should audit the effectiveness of the department's wellness program and prepare a report summarizing the findings. The report shall not contain the names of members participating in the wellness program, and should include the following information:

- Data on the types of support services provided
- Wait times for support services
- Participant feedback, if available
- Program improvement recommendations
- Policy revision recommendations

The coordinator should present the completed audit to the Sheriff for review and consideration of updates to improve program effectiveness.

231.9 TRAINING

The coordinator or the authorized designee should collaborate with the Training Manager to provide all members with regular education and training on topics related to member wellness, including but not limited to:

- The availability and range of department wellness support systems.
- Suicide prevention.
- Recognizing and managing mental distress, emotional fatigue, post-traumatic stress, and other possible reactions to trauma.
- Alcohol and substance disorder awareness.
- Countering sleep deprivation and physical fatigue.
- Anger management.
- Marriage and family wellness.
- Benefits of exercise and proper nutrition.

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- Effective time and personal financial management skills.

Training materials, curriculum, and attendance records should be forwarded to the Training Manager as appropriate for inclusion in training records.

Chapter 3 - Recruitment Selection and Planning

Employee Orientation

300.1 PURPOSE AND SCOPE

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

300.2 NEW EMPLOYEE ORIENTATION

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

- Working conditions
- Code of ethics
- Personnel policy manual (Electronic copy)
- Employee rights and responsibilities
- Overview of the criminal justice system
- Tour of the facility
- Facility goals and objectives
- Facility organization
- Staff rules and regulations
- Prison Rape Elimination Act
- Program overview

300.3 EMPLOYEE ACKNOWLEDGEMENTS

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

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

Continuing Professional Education

301.1 PURPOSE AND SCOPE

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

301.1.1 PHILOSOPHY

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

301.2 OBJECTIVES

Training involves activities whereby correctional deputys, 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 Office and the community.

301.3 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

302.1 PURPOSE AND SCOPE

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

302.2 POLICY

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

302.3 TRAINING OBJECTIVES

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

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

302.4 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).

302.4.1 SUPERVISORY TRAINING

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

302.5 TRAINING RECORDS

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

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

- The course outline or lesson plan

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- 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.

Jail Training Officer Program

303.1 PURPOSE AND SCOPE

The jail training officer program is intended to provide a standardized program to facilitate the correctional deputy's transition from the academic setting to the actual performance of general corrections duties.

It is the policy of this department to assign all new correctional deputy to a structured jail training officer program that is designed to prepare the new correctional deputy to perform in a custody assignment, and to provide training on all skills needed to operate in a safe, productive and professional manner.

303.2 TRAINING OFFICER

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

This training can come either through formal training provided by an outside provider or from jail supervisors. In either case, jail supervisors shall have frequent contact with all TO's while they are with trainees.

303.2.1 SELECTION PROCESS

Training officers will be selected based on the following requirements:

- (a) A desire to perform the training mission
- (b) A minimum of two years as a correctional deputy
- (c) A demonstrated ability to be a positive role model
- (d) Successfully passed an internal oral interview selection process, if required by the Jail Sergeant
- (e) Evaluation by sergeants and current TOs, if required by the Jail Commander.
- (f) The jail commander shall be briefed by the jail sergeant about his/her training officer choice. In all cases, the jail commander shall have final say regarding who will be used as a training officer.

303.3 TRAINING OFFICER RESPONSIBILITIES

- (a) TOs shall complete and submit a written evaluation on the performance of their assigned trainee to the TO's immediate sergeant on a weekly basis.
- (b) TOs shall review the performance evaluations with the trainee each week.
- (c) A detailed end-of-phase performance evaluation on the assigned trainee shall be completed by the TO at the end of each phase of training.

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- (d) TOs 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) At anytime a TO believes that a trainee is at risk of failing to meet minimum standards, the training officer shall immediately schedule a meeting with a jail sergeant and the jail commander as soon as possible.

Recruitment and Selection

304.1 PURPOSE AND SCOPE

Refer to Mono County Sheriff's Office Policy 1000.

Training

305.1 PURPOSE AND SCOPE

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

305.2 MINIMUM TRAINING REQUIREMENTS

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

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

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 correctional deputy.

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

305.3 JAIL TRAINING PROGRAM PHASES

The jail training program is designed to build upon the conceptual foundation taught in the basic academy, whereupon the theoretical knowledge gained in the academy can be molded into a practical skill set. The jail training program consists of the five phases described below.

305.3.1 FIRST PHASE - FACILITY ORIENTATION

The trainee will be assigned to a jail Training Officer (TO) to whom the trainee is assigned. The TO will, at a minimum:

- (a) Brief the trainee on the purpose, scope and responsibilities expected during the training program.
- (b) Explain the evaluation system and acquaint the trainee with the rating forms that will be used.
- (c) Provide the trainee with any required equipment or materials.
- (d) Tour the entire facility and support services with the trainee.
- (e) Introduce the trainee to the Jail Commander and key supervisory, administrative and support personnel.

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305.3.2 SECOND PHASE - SHADOWING

In this phase the trainee will be exposed to the many duties at each post, including transportation and special functions, by observing the TO demonstrate how each task is to be performed. The TO should provide instruction to the trainee and encourage the trainee to ask questions.

Time should be made available during this phase to allow the trainee to study policies and procedures, directives, post orders and any other materials deemed necessary by the TO.

The TO will monitor the trainee's progress by asking questions and administering tests on the materials and demonstrations that have been provided to the trainee.

The work performance of the trainee will be evaluated and recorded daily by the TO. Areas of deficiency will be discussed and remedial training provided if deemed necessary by the TO.

305.3.3 THIRD PHASE - HANDS-ON WITH CLOSE SUPERVISION

During this phase the TO will instruct the trainee in each required activity at each post, including transportation and special functions. Once each task is demonstrated, the trainee will be directed to perform each activity under the close supervision of the TO.

The TO will provide direction as needed to the trainee during the hands-on activities.

The work performance of the trainee will be evaluated and recorded daily by the TO. Areas of deficiency will be discussed and remedial training provided if deemed necessary by the TO.

305.3.4 FOURTH PHASE - SOLO WITH MONITORING

During this phase the trainee will be directed to work solo in each area that training has been provided.

The solo activities of the trainee will be monitored by the TO and a sergeant.

The work performance of the trainee will be evaluated and recorded by the TO. Areas of deficiency will be discussed and remedial training provided if deemed necessary by the TO.

305.3.5 FIFTH PHASE - WORKING INDEPENDENTLY WITH SUPERVISION

Provided that there are no concerns about the trainee's ability, the trainee will be assigned to a shift and will be supervised regularly by the supervisor.

The supervisor, in consultation with the TO and the Jail Commander, will make a recommendation to pass the trainee on to his/her assignment, to continue training or will recommend termination.

305.4 PROBATIONARY PERIOD EVALUATION

Mono County has a one year probationary period for Public Safety Officer's.

Firearms Training

306.1 PURPOSE AND SCOPE

Refer to Sheriff's Policy and Procedures # 312

Chemical Agents Training

307.1 PURPOSE AND SCOPE

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

307.2 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.

307.3 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.

307.4 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.

307.5 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

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- 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.

307.6 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

308.1 PURPOSE AND SCOPE

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

308.2 POLICY

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

308.3 MEMBER TRAINING

All staff, volunteers and contractors who may have contact with inmates shall receive department-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.

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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 Direct Supervisor will maintain training records on all those receiving training in accordance PREA procedures.

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

308.4 SPECIALIZED MEDICAL TRAINING

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

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

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

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

308.5 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).

Briefing Training

309.1 PURPOSE AND SCOPE

Briefing training is generally conducted when any of the topics mentioned in section 309.2 are added or changed in the facility. Briefing training provides an opportunity for an important exchange of information between employees and supervisors. Briefing training will be conducted a minimum of once a quarter.

309.2 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 correctional 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:

- Custody facility policies and procedures
- Office Interim Directives not yet established into policy
- Reviewing recent incidents for training purposes
- In preparation or response to an unusual occurrence
- Statutory requirements or court orders
- Operation of new equipment, including computer software
- Notifying the staff of changes in schedules and assignments
- Any other topic as determined by the Sheriff or Jail Commander

309.3 TRAINING RECORDS

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

Training Plan

310.1 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.

310.2 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.

310.3 TRAINING MANAGER

A qualified individual shall be appointed by the Jail Commander or the authorized designee to serve as the Training Manager, who shall report to the Jail Commander 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.

310.4 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.

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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 department, 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.

310.5 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.

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Training Plan

3. Make arrangements through the supervisor and the Training Manager to attend the required training on an alternate date.

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 department 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.

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

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 Mono One and the Supervisor. The Supervisor, or in his/her absence Mono One, 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 Supervisor should instruct any staff not directly involved in the lockdown to escort any visitors and nonessential contractors out of the facility.

A headcount shall be immediately conducted for all inmates, visitors, contractors, and staff. The Supervisor shall be immediately notified of the status of the headcount. If any person is unaccounted for, the 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.

400.5 HUNGER STRIKE

Upon being made aware that one or more inmates is engaging in a hunger strike, the staff will notify the 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.

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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 Supervisor or the Jail Commander of the incident. The 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 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.

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 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.

400.7 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

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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 NOTIFICATIONS

As soon as practicable, the Supervisor or a responsible staff member shall notify the Jail Supervisor, who in turn, shall notify the Jail Commander and the Sheriff.

400.7.4 REPORTING

The Jail Supervisor or Supervisor shall direct that a report be written detailing the incident by the end of the shift. If appropriate, a crime report will also be prepared by the responsible law enforcement agency. All video and audio recordings shall be downloaded to a storage device and placed into evidence for use in both criminal and civil litigation.

400.7.5 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.

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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 Mono County Sheriff's Department 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

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

The Jail 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. The watch Commander and available beat Deputy's should be advised of the incident and asked to respond to assist.

400.8.2 NOTIFICATION OF QUALIFIED HEALTH CARE PROFESSIONALS

At the direction of the Supervisor or the authorized designee, Medic 7 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. Care Flight should be dispatched and staged as part of the medical evacuation plan. If Care Flight is unavailable, another air resource should be considered.

400.8.3 HOSTAGE RESCUE

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

400.8.4 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.

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400.9 ESCAPES

Upon being made aware that an escape may have occurred, or did in fact occur, the staff member should immediately notify Mono One. Mono One should notify the 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 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 officers 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 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.

400.10 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 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 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

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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 REVIEW OF EMERGENCY PROCEDURES

The Jail Commander shall ensure that there is a review of emergency response plans at least annually. This review should be documented with reports submitted to the Jail Commander or the authorized designee within 10 days of the review for approval. This review should also include the signatures or initials of the facility staff responsible for the review. At a minimum, the review shall include:

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

400.12 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.

Emergency Staffing

401.1 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.

401.2 POLICY

It is the policy of this department 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.

401.2.1 EMERGENCY STAFFING

In the event the jail Sergeant 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 Sergeant will notify the Jail Commander and 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 department who have custody experience may be used to fill vacancies in the facility.
- Assistance from allied agencies may be requested to help management and sergeants 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 County's Public Health Officer shall be notified in accordance with the Communicable Diseases Policy.

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401.2.2 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.

Fire Safety

402.1 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.

402.2 POLICY

It is the policy of this department 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.).

402.2.1 FIRE CODES

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

402.2.2 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.

402.3 FIRE SUPPRESSION 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.

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

402.4 FIRE PREVENTION EQUIPMENT

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

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

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

402.5 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.

402.6 FIRE TRAINING

The Training Manager is responsible for ensuring that within the first six months of assignment to the facility all staff members receive training on the use of the SCBA sufficient to demonstrate proficiency. The staff should also be trained in the use of the facility's firefighting equipment sufficient to demonstrate proficiency. The staff should receive refresher training at least annually on the use of firefighting equipment.

Each shift will have at least one designated staff member who is trained to maintain the facility's firefighting equipment, including the SCBA.

402.7 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.

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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)).

402.7.1 FURNISHINGS

All furnishings allowed in the facility shall meet fire authority standards for fire performance characteristics. Prior to the introduction of any furnishing into the facility, the staff shall receive clearance from the local fire authority as to its appropriateness.

402.7.2 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.

402.8 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.

Emergency Power and Communications

403.1 PURPOSE AND SCOPE

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

403.2 POLICY

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

403.2.1 PREVENTIVE MAINTENANCE

It is the responsibility of the Sheriff and 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 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 Three hours, portable emergency generators should be secured as a temporary emergency power source until the repair or replacement of the primary system occurs.

403.2.2 SAFETY AND SECURITY

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

403.2.3 INSPECTION AND TESTING

The 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.

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

Evacuation

404.1 PURPOSE AND SCOPE

The purpose of this policy is to promote planning and to establish procedures, responsibilities, and training requirements for the staff of the Mono County Sheriff's Department jail in case of fire and other emergency evacuations.

404.2 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.

404.3 EVACUATION PLAN

The Mono County Sheriff's Department 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.

404.3.1 EXITS

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

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

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

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404.3.2 EVACUATION PLANS AND ROUTES

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

404.3.3 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.

404.4 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

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 Office to forecast staffing and facility growth needs into the future, and to plan for the associated expenditures.

500.2 REPORTS

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 males and females. 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 and trend analysis and to respond to funding opportunities (see the Crowding Policy) (15 CCR 1040).

500.3 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, transfer and release of inmates.

500.4 DATA COLLECTION

For each reporting period, the report should include, but is not 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 percentage of:
 - 1. Bookings
 - 2. Male inmates
 - 3. Female inmates

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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

501.1 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.

501.2 POLICY

It is the policy of this department 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)).

501.3 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 Supervisor as needed. Electronic counts shall not be substituted for direct staff observation.

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

Any discrepancy in the count should immediately be reported to the Jail Commander and resolved prior to the release of the shift personnel responsible for the count. A formal count in which all inmates are personally identified by a correctional deputy should be conducted once a day 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 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.

All count sheets shall be signed by the Supervisor and forwarded to the Records Division. Count sheets shall be maintained for a period of time prescribed by statute, ordinance, or policy.

Inmate Reception

502.1 PURPOSE AND SCOPE

The Mono County Sheriff's Department 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.

502.2 POLICY

This department 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.

502.3 PRE-BOOKING SCREENING

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

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

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

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

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

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502.3.1 IMMIGRATION DETAINERS

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

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

502.3.2 NOTICE TO INDIVIDUALS

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

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

502.3.3 ICE INTERVIEWS

Before any interview between ICE personnel and an individual in custody for civil immigration violations, the department 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.

502.3.4 IMMIGRATION INQUIRIES PROHIBITED

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

502.4 SEARCHES BEFORE ADMISSION

All arrestees and their property shall be searched for contraband by the booking correctional 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 correctional 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

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returned to the arresting or transporting correctional deputy prior to the arrestee being accepted for booking. A description of the items returned to the arresting or transporting correctional deputy shall be documented on the arrestee's booking record.

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

502.5 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 correctional deputy and transporting correctional deputy, if different
- Health insurance information
- Legal authority for confinement, including specific charges, arrest warrant information, and court of jurisdiction
- Sex
- Age
- Date and place of birth
- Race
- Height and weight
- Occupation and current or most recent employment
- Preferred emergency contact, including name, address, telephone number, and relationship to inmate
- Driver's license number and state where issued, state identification number, or passport number
- Social Security number
- Additional information concerning special custody requirements or special needs
- Local, state, and federal criminal history records
- Photographs, fingerprints, and notation of any marks or physical characteristics unique to the inmate, such as scars, birthmarks, deformities, or tattoos

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- 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.

502.5.1 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.

502.5.2 ADMISSION OF SEX OFFENDER REGISTRANTS

The Records Division 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 § 290.013).

502.6 TRANSITION FROM RECEPTION TO GENERAL POPULATION

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

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

502.6.1 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.

502.6.2 INMATE SEPARATION

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

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502.7 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 correctional deputy and referenced to the booking number before the admission is completed. The original copy of the property receipt will be retained and placed in the inmate's file and/or with the property. A second copy will be presented to the inmate at the time of booking.

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

502.7.1 VERIFICATION OF INMATE'S MONEY

All monies belonging to the inmate and retained by the booking correctional 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 the inmate be housed at the Mono County jail, the money shall be placed in the inmate cash box. The corresponding inmate cash ledger sheet shall be placed in the inmate cash ledger sheet binder. It is the responsibility of the on duty jailer who is being relieved to ensure that the money in the cash box matches the cash ledger sheets.

502.7.2 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.

502.8 INMATE TELEPHONE CALLS

Every inmate detained in this facility shall be entitled to at least three completed telephone calls immediately upon being admitted and no later than three hours after arrest. Either the arresting or booking correctional 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

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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.

502.8.1 TELEPHONE CALL PROCEDURES

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

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

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

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

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

502.8.2 ONGOING TELEPHONE ACCESS

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

502.9 JUVENILE DETAINEES

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

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

Inmate Handbook and Orientation

503.1 PURPOSE AND SCOPE

This policy provides for the orientation of inmates booked into the Mono County Sheriff's Department facility. The purpose of the orientation is to inform inmates of the jail routine, rules, inmate rights, and services.

503.2 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.

503.2.1 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.

503.3 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)

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- (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).

503.4 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).

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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

504.1 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.

504.2 POLICY

It is the policy of the Mono County Sheriff's Department 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.

504.3 SAFETY CHECKS

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

- (a) Safety checks shall be conducted at least once every 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 correctional 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 department 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.

Special Management Inmates

505.1 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 Mono County Sheriff's Department.

505.1.1 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.

505.2 POLICY

This department 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).

505.3 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:

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- 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.

505.4 CIRCUMSTANCES REQUIRING IMMEDIATE SEGREGATION

Inmates will generally be assigned to segregation through the classification process. The Jail Commander or the Supervisor 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.

505.4.1 REVIEW PROCESS

The Jail Commander 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 Jail Commander 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.

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- (c) The inmate remains segregated pending a disciplinary hearing.
- (d) The inmate is returned to general inmate population.

505.5 PROTECTIVE CUSTODY

The correctional 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.

505.6 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.

505.7 REVIEW OF STATUS

The Supervisor or the classification officer 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 every seven days for the first two months of segregation and at least once every 30 days thereafter. The review should include information about these inmates to determine whether their status in administrative segregation and protective custody is still warranted.

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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.

505.8 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 30 minutes on an irregular schedule. Inmates who are violent, have mental health problems, or demonstrate behavior that is easily identified as out of the ordinary or bizarre in nature should be personally observed by the staff 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.

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.

505.9 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

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- 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 Supervisor or the Jail Commander at midnight each day.

505.9.1 LOG INSPECTION AND ARCHIVAL OF LOGS

The 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.

Civil Detainees

506.1 PURPOSE AND SCOPE

This policy provides safeguards to ensure that persons held under a civil detainee are afforded appropriate standards of custody.

Nothing in this policy prevents application of discipline under the Inmate Discipline Policy.

506.1.1 DEFINITIONS

Definitions related to this policy include:

Civil detainee - Any person in custody held for a reason other than for criminal matters.

Enhanced security concern - A status applicable to a civil detainee that indicates the person poses an enhanced threat to staff or others due to the person's past criminal behavior, criminal sophistication or other actions.

506.2 POLICY

It is the policy of the Mono County Sheriff's Department to only hold civil detainees in extreme circumstances due to our limited ability to separate a civil commit from the general inmate population. Before housing a civil commit, a meeting between the presiding Superior Court Judge, County council and the District Attorney same be held to discuss other possible housing alternatives.

In the event that a civil detainee is held, it is the policy that any restrictions placed on civil detainees must be for legitimate, non-punitive purposes that cannot be reasonably accomplished through less restrictive means.

506.3 LESS RESTRICTIVE CONDITIONS

The Jail Commander or the authorized designee is responsible for monitoring the accommodations of civil detainees and taking steps to keep those accommodations above the level of non-sentenced, general population inmates. The Jail Commander or the authorized designee should institute alternative and less harsh confinement methods for civil detainees, while still maintaining security and effective management of the facility.

506.4 SCREENING

Civil detainees should undergo the same screening process as inmates, including attention to whether the person poses an enhanced security concern. Any reason for departure from the standard treatment of civil detainees as defined in this policy or in related procedures should be documented with specific recommendations included addressing the risks.

The Jail Commander or the authorized designee should review the screening documents to ensure any enhanced safety concerns are appropriately addressed and part of the detainee's record.

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506.5 ORIENTATION

Civil detainees should receive orientation materials that explain the benefits and rules that are applicable to civil detainees. Staff should meet one-on-one with the civil detainee during orientation to review the orientation material and conditions of custody with the detainee. Staff should specifically review the grievance process with the civil detainee and encourage the detainee to use the grievance process when appropriate.

506.6 CONDITIONS OF CONFINEMENT IN HOUSING

All civil detainees should be housed separately from other inmates.

506.6.1 CLOTHING

Civil detainees should be provided a minimum of 50 percent additional clothing exchanges than non-sentenced inmates receive and be provided an extra set of undergarments and socks that they may retain in their housing area.

Civil detainees should be provided an additional storage container for their personal belongings and extra-issued clothing.

506.6.2 USE OF RESTRAINTS AND TRANSPORTATION

Civil detainees should not be placed in leg or waist restraints absent an enhanced security concern.

Civil detainees may be handcuffed in the event there is a need to control the detainee based on enhanced security concerns.

Civil detainees should be transported separately from inmates.

506.6.3 RECREATION

Civil detainees should receive a minimum of 50 percent additional recreation time (indoor and outdoor) than non-sentenced inmates in the general population receive. The recreation may be increased by the Jail Commander as resources allow.

506.6.4 ACCESS TO MAIL AND TELEPHONE

Civil detainees shall have the same access to books, periodicals and magazines as any other general population inmate, except incoming books and magazines must only be censored with a substantial government interest, and only when it is necessary or essential to address the particular government interest. Government interests that would justify confiscation of incoming books, periodicals or magazines from a civil detainee may include:

- (a) Maintaining facility security and safety, such as a book covering improvised weapons or promoting aggression.
- (b) Preventing dangerous conduct.
- (c) Complying with a court order or court ordered treatment plan.

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Outgoing and incoming mail may be inspected but not read, unless there is specific and articulable information to believe a particular security or safety issue is at hand.

Civil detainees should be provided with a minimum of 50 percent additional telephone access than non-sentenced inmates in the general population receive. Civil detainees should be provided with telephone privacy. A reasonable amount of telephone messages should be taken for a civil detainee.

506.6.5 ACCESS TO INTERNET

Civil detainees should receive a minimum of 50 percent more time to access the Internet than non-sentenced inmates in the general population receive.

506.6.6 VISITING

Civil detainees should be allowed to receive a minimum of 50 percent additional visitation than non-sentenced inmates in the general population receive.

506.6.7 MENTAL HEALTH CARE

Civil detainees who are detained due to issues related to their mental health should be provided with:

- (a) An interview with the civil detainee's established mental health care provider and/or a review of the civil detainee's records by the assigned department mental health professional.
- (b) A review of the reasonable options available to address the civil detainee's continued mental health care. The department's mental health professional and the Jail Commander or the authorized designee should identify benefits or restrictions that may advance the purpose of the civil detainee's confinement. Examples include:
 1. Restricting or providing special access to books, periodicals or Internet sites as part of the civil detainee's treatment.
 2. Providing special access to mental health care professionals or other visitors.
- (c) A conference with the civil detainee's mental health care provider prior to the decision to discipline the civil detainee.

506.7 SEARCHES

Strip searches of civil detainees must be justified by probable cause, unless the Jail Commander specifies otherwise based upon an enhanced security concern. The specified concern shall be documented in the civil detainee's record. Modified strip searches may be conducted when a civil detainee has entered an environment where contraband or weapons may be accessed (see the Searches Policy).

Absent an enhanced security concern or reasonable suspicion where contraband may be found, there should be no unscheduled cell searches of a civil detainee's personal effects or a cell search

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when the civil detainee is not present. Non-invasive cell inspections for security purposes may still be conducted.

Management of Weapons and Control Devices

507.1 PURPOSE AND SCOPE

This policy will address the availability and control of weapons.

507.2 POLICY

It is the policy of the Mono County Sheriff's Department 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.

507.3 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. If it is necessary to load or unload a firearm, personnel shall use the clearing barrels located outside of the facility's secure perimeter to facilitate the safe loading and unloading of firearms.

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 Jail Commander or authorized designee and under the direct supervision of a supervisor.

507.4 OTHER WEAPONS, TOOLS AND CHEMICAL AGENTS

Department-approved weapons, tools and chemical agents, including, but not limited to, pepper projectiles, batons, TASER devices, impact weapons, weapon-fired projectiles, noise/flash distraction devices, sting grenades and similar devices, may be possessed and used only by custody staff members who have received department-authorized training and are qualified to use them.

507.5 STORAGE OF WEAPONS, CHEMICAL AGENTS AND CONTROL DEVICES

The armory shall be located in a secure and readily accessible repository outside of inmate housing and activity areas. It shall be secured at all times. Only personnel who have received department-approved training in the maintenance of the stored equipment and who have been designated by the jail Sergeant are authorized to be inside the armory. The following equipment shall be stored and secured in the armory:

- (a) All department-approved weapons
- (b) All department-approved control devices and associated supplies, with the exception of the TASER device
- (c) All department-approved chemical agents

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Management of Weapons and Control Devices

- (d) All security equipment, such as helmets, face shields, stab or protective vests and handheld shields shall be stored in the lockers located next to the jail armory.

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.

507.5.1 WEAPONS LOCKER

There should be a secure weapons locker located outside of the secure perimeter of the jail.

507.5.2 INVENTORY

The Jail Commander should designate one or more properly trained staff to be responsible for maintaining all weapons, chemical agents and control devices in a safe and secure manner, and to inventory and report the condition and availability of the facility's weapons and control devices on a monthly basis.

To facilitate the inventory, all weapons, chemical agents and control devices shall be stored in assigned locations inside the armory. A log sheet shall be maintained within the armory at all times, detailing the exact location of each item. The removal of any weapon, chemical agent or control device shall be documented on the log sheet, showing who removed the item, the date and time of removal and the reason for removal. An additional log entry shall be made indicating the date and time of the item's return.

The Supervisor and the Jail Commander shall be immediately notified in the event that any weapon, chemical agent or control device is determined to be missing. An immediate and thorough search of the facility shall take place in order to locate the item.

507.5.3 REVIEW, INSPECTION AND APPROVAL

Every control device and chemical agent will be periodically inspected for serviceability and expiration dates by the Rangemaster or the instructor designated to train on the use of a particular control device or chemical agent. The Rangemaster or the designated instructor is responsible to ensure replacement of outdated or unserviceable items.

Inmate Classification

508.1 PURPOSE AND SCOPE

This policy describes the Mono County Sheriff's Department'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).

508.2 POLICY

It is the policy of this department 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.

508.3 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)).

508.4 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, 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
- Current charges
- Behavior during arrest and intake process
- Criminal and incarceration history

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- 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., 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).

508.4.1 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.

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- (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.

508.5 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 correctional deputy as soon as possible in the booking process. The intake correctional deputy shall complete the initial classification form. The initial classification form should include a place for the intake correctional 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 correctional deputy, who will, within the limits of available resources, determine the appropriate temporary housing location.

508.6 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.

508.6.1 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 correctional 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).

508.6.2 OVERRIDE

The classification correctional 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 correctional 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.

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508.7 REVIEWS AND APPEALS

Once an inmate is classified and housed, he/she may appeal the decision of the classification correctional 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.

508.7.1 PERIODIC CLASSIFICATION REVIEWS

The classification correctional 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).

508.7.2 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 correctional deputy.

508.8 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
- Any other criteria identified by the Jail Commander

508.9 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

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Jail Commander or the authorized designee should periodically meet with representatives of the classification correctional deputy 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.

508.10 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.

508.11 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.

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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).

508.12 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.

508.13 STAFF TRAINING IN CLASSIFICATION

correctional deputy 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

509.1 PURPOSE AND SCOPE

This policy provides guidelines for the issuance and use of the TASER® device.

509.2 ISSUANCE AND CARRYING TASER DEVICES

The TASER device may only be issued to authorized members who have completed department-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 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) Correctional Deputy 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.

509.3 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.

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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.

509.4 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.

509.4.1 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.

509.4.2 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) Elderly inmates.
- (b) Inmates with obviously low body mass.
- (c) Inmates who are handcuffed or otherwise restrained.
- (d) 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.
- (e) Inmates whose position or activity may result in collateral injury (e.g., falls from height).

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

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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.

509.4.3 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.

509.4.4 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.

509.4.5 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 department 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 the discharge, the onboard TASER device memory will be downloaded through the data port by a supervisor or Rangemaster and 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. Confetti tags should be collected and the expended cartridge along with both

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probes and wires should be submitted into evidence for future reference by the member collecting the cartridge. The cartridge serial number should be noted 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.

509.4.6 PREGNANT INMATES

Application of the TASER device shall not be used on a pregnant inmate (Penal Code § 4023.8).

509.5 MEDICAL TREATMENT

Absent extenuating circumstances or unavailability, only qualified medical personnel should remove TASER device probes from an inmate's body. Used TASER device probes shall be considered a sharps biohazard, similar to a used hypodermic needle, and handled properly. 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, head, face and neck).
- (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

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staff 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.

Any inmate exhibiting signs of distress or who is exposed to multiple or prolonged applications (e.g., more than 15 seconds) shall be promptly examined by qualified medical personnel or medically evaluated.

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.

509.6 TRAINING

Personnel who are authorized to carry the TASER device shall be permitted to do so only after successfully completing the initial department-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 department 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 correctional 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.

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.

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- (e) Restraint techniques that do not impair respiration following the application of the TASER device.
- (f) De-escalation techniques.

509.6.1 TESTING

All training delivered to the staff should include testing to document that the employee understands the subject matter presented.

509.7 POLICY

It is the policy of the Mono County Sheriff's Department to use the TASER device to control violent or potentially violent inmates. The appropriate use of such a device should result in fewer serious injuries to staff and inmates.

Control of Inmate Movement

510.1 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.

510.2 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.

510.3 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.

510.4 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.

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511.1 PURPOSE AND SCOPE

This policy provides guidelines on the reasonable use of force. While there is no way to specify the exact amount or type of reasonable force to be applied in any situation, every member of this department is expected to use these guidelines to make such decisions in a professional, impartial, and reasonable manner (Government Code § 7286; 15 CCR 1029(a)(3)).

In addition to those methods, techniques, and tools set forth below, the guidelines for the reasonable application of force contained in this policy shall apply to all policies addressing the potential use of force, including but not limited to the Conducted Energy Device, Use of Restraints, and Electronic Restraints policies.

Retaliation prohibitions for reporting suspected violations are addressed in the Anti-Retaliation Policy.

511.1.1 DEFINITIONS

Definitions related to this policy include:

Deadly force - Any use of force that creates a substantial risk of causing death or serious bodily injury, including but not limited to the discharge of a firearm (Penal Code § 835a).

Feasible - Reasonably capable of being done or carried out under the circumstances to successfully achieve the arrest or lawful objective without increasing risk to the correctional deputy or another person (Government Code § 7286(a)).

Force - The application of physical techniques or tactics, chemical agents, or weapons to another person. It is not a use of force when a person allows him/herself to be searched, escorted, handcuffed, or restrained.

Force team technique - The force team technique ordinarily involves trained members clothed in protective gear who enter the inmate's area in tandem, each with a specific task, to achieve immediate control of the inmate.

Serious bodily injury - A serious impairment of physical condition, including but not limited to the following: loss of consciousness; concussion; bone fracture; protracted loss or impairment of function of any bodily member or organ; a wound requiring extensive suturing; and serious disfigurement (Penal Code § 243(f)(4)).

Totality of the circumstances - All facts known to the correctional deputy at the time, including the conduct of the officer and the individual leading up to the use of force (Penal Code § 835a).

511.2 POLICY

The use of force is a matter of critical concern, both to the public and to the public safety community. Members are involved on a daily basis in numerous and varied interactions and, when warranted, may use reasonable force in carrying out their duties.

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Members must have an understanding of, and true appreciation for, their authority and limitations. This is especially true with respect to overcoming resistance while engaged in the performance of public safety duties.

The Mono County Sheriff's Department recognizes and respects the value of all human life and dignity without prejudice to anyone. Vesting members with the authority to use reasonable force and to protect the public welfare requires monitoring, evaluation, and a careful balancing of all interests.

511.2.1 FAIR AND UNBIASED USE OF FORCE

Correctional Deputy are expected to carry out their duties, including the use of force, in a manner that is fair and unbiased (Government Code § 7286(b)).

511.3 USE OF FORCE

Authorized members shall use only that amount of force that reasonably appears necessary given the facts and totality of the circumstances known to or perceived by the member at the time of the event to accomplish a legitimate government purpose such as to gain control of the individual; protect and ensure the safety of inmates, members, and others; prevent serious property damage; prevent escape; obtain compliance with facility rules and member orders; or to ensure the institution's security and good order (Penal Code § 835a).

The reasonableness of force will be judged from the perspective of a reasonable member on the scene at the time of the incident. Any evaluation of reasonableness must allow for the fact that members are often forced to make split-second decisions about the amount of force that reasonably appears necessary in a particular situation, with limited information and in circumstances that are tense, uncertain, and rapidly evolving.

Given that no policy can realistically predict every possible situation a member might encounter, members are entrusted to use well-reasoned discretion in determining the appropriate use of force in each incident. Members may only use a level of force that they reasonably believe is proportional to the seriousness of the suspected offense or the reasonably perceived level of actual or threatened resistance (Government Code § 7286(b)).

It is also recognized that circumstances may arise in which members reasonably believe that it would be impractical or ineffective to use any of the approved or authorized tools, weapons, or methods provided by this department. Members may find it more effective or reasonable to improvise their response to rapidly unfolding conditions that they are confronting. In such circumstances, the use of any improvised device or method must nonetheless be objectively reasonable and utilized only to the degree that reasonably appears necessary to accomplish a legitimate government purpose.

While the ultimate objective of every encounter is to avoid or minimize injury, nothing in this policy requires a member to retreat or be exposed to possible physical injury before applying reasonable force.

Force shall never be used as punishment.

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511.3.1 FACTORS USED TO DETERMINE THE REASONABLENESS OF FORCE

When determining whether to apply force and evaluating whether a member has used reasonable force, a number of factors should be taken into consideration, as time and circumstances permit (Government Code § 7286(b)). These factors include but are not limited to:

- (a) The apparent immediacy and severity of the threat to members or others (Penal Code § 835a).
- (b) The conduct of the individual being confronted, as reasonably perceived by the member at the time (Penal Code § 835a).
- (c) Member/individual factors (e.g., age, size, relative strength, skill level, injuries sustained, level of exhaustion or fatigue, the number of members available vs. individuals).
- (d) The conduct of the involved member leading up to the use of force (Penal Code § 835a).
- (e) The effects of suspected drug or alcohol use.
- (f) The individual's apparent mental state or capacity (Penal Code § 835a).
- (g) The individual's apparent ability to understand and comply with correctional deputy commands (Penal Code § 835a).
- (h) The proximity of weapons or dangerous improvised devices.
- (i) The degree to which the individual has been effectively restrained and his/her ability to resist despite being restrained.
- (j) The availability of other reasonable and feasible options and their possible effectiveness (Penal Code § 835a).
- (k) The seriousness of the suspected offense or reason for contact with the individual prior to and at the time force is used.
- (l) The training and experience of the member.
- (m) The potential for injury to members, inmates, bystanders, and others.
- (n) Whether the individual appears to be resisting, attempting to evade arrest by flight, or is attacking the member.
- (o) The risk and reasonably foreseeable consequences of escape.
- (p) The apparent need for immediate control of the individual or a prompt resolution of the situation to maintain or restore order.
- (q) Whether the conduct of the individual being confronted no longer reasonably appears to pose an imminent threat to the member or others.
- (r) Prior contacts with the individual or awareness of any propensity for violence.
- (s) Any other exigent circumstances.

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511.3.2 DUTY TO INTERCEDE

Any correctional deputy present and observing another law enforcement officer or member using force that is clearly beyond that which is necessary, as determined by an objectively reasonable correctional deputy under the circumstances, shall, when in a position to do so, intercede (as defined by Government Code § 7286) to prevent the use of unreasonable force.

When observing or reporting force used by a law enforcement officer, each correctional deputy should take into account the totality of the circumstances and the possibility that other law enforcement officers may have additional information regarding the threat posed by the subject (Government Code § 7286(b)).

511.3.3 ALTERNATIVE TACTICS - DE-ESCALATION

As time and circumstances reasonably permit, and when community and correctional deputy safety would not be compromised, correctional deputy should consider actions that may increase correctional deputy safety and may decrease the need for using force:

- (a) Summoning additional resources that are able to respond in a reasonably timely manner.
- (b) Formulating a plan with responding correctional deputy before entering an unstable situation that does not reasonably appear to require immediate intervention.
- (c) Employing other tactics that do not unreasonably increase correctional deputy jeopardy.

In addition, when reasonable, correctional deputy should evaluate the totality of circumstances presented at the time in each situation and, when feasible, consider and utilize reasonably available alternative tactics and techniques that may persuade an individual to voluntarily comply or may mitigate the need to use a higher level of force to resolve the situation before applying force (Government Code § 7286(b)). Such alternatives may include but are not limited to:

- (a) Attempts to de-escalate a situation.
- (b) If reasonably available, the use of crisis intervention techniques by properly trained personnel.

511.3.4 FAILURE TO INTERCEDE

a correctional deputy who has received the required training on the duty to intercede and then fails to act to intercede when required by law may be disciplined in the same manner as the correctional deputy who used force beyond that which is necessary (Government Code § 7286(b)).

511.3.5 NOTIFICATION TO SUPERVISORS REGARDING USE OF FORCE

Any use of force by a correctional deputy shall be reported immediately to a supervisor (Penal Code § 832.13).

As used in this section, "immediately" means as soon as it is safe and feasible to do so.

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511.3.6 DUTY TO REPORT EXCESSIVE FORCE

Any correctional deputy who observes a law enforcement officer or a member use force that potentially exceeds what the correctional deputy reasonably believes to be necessary shall immediately report these observations to a supervisor (Government Code § 7286(b)).

As used in this section, "immediately" means as soon as it is safe and feasible to do so.

511.3.7 PAIN COMPLIANCE TECHNIQUES

Pain compliance techniques may be effective in controlling a physically or actively resisting individual. Members may only apply those pain compliance techniques for which they have successfully completed department-approved training. Members utilizing any pain compliance technique should consider:

- (a) The degree to which the application of the technique may be controlled given the level of resistance.
- (b) Whether the individual can comply with the direction or orders of the member.
- (c) Whether the individual has been given sufficient opportunity to comply.

The application of any pain compliance technique shall be discontinued once the member determines that compliance has been achieved.

511.3.8 RESTRICTIONS ON THE USE OF CAROTID CONTROL HOLD

Correctional Deputy of this department are not authorized to use a carotid restraint hold. A carotid restraint means a vascular neck restraint or any similar restraint, hold, or other defensive tactic in which pressure is applied to the sides of a person's neck that involves a substantial risk of restricting blood flow and may render the person unconscious in order to subdue or control the person (Government Code § 7286.5).

511.3.9 RESTRICTIONS ON THE USE OF A CHOKE HOLD

Correctional Deputy of this department are not authorized to use a choke hold. A choke hold means any defensive tactic or force option in which direct pressure is applied to a person's trachea or windpipe (Government Code § 7286.5).

511.3.10 ADDITIONAL RESTRICTIONS

Terms such as "positional asphyxia," "restraint asphyxia," and "excited delirium" continue to remain the subject of debate among experts and medical professionals, are not universally recognized medical conditions, and frequently involve other collateral or controlling factors such as narcotics or alcohol influence, or preexisting medical conditions. While it is impractical to restrict a correctional deputy's use of reasonable control methods when attempting to restrain a combative individual, correctional deputy are not authorized to use any restraint or transportation method which might unreasonably impair an individual's breathing or respiratory capacity for a period beyond the point when the individual has been adequately and safely controlled. Once controlled, the individual should be placed into a recovery position (e.g., supine or seated) and monitored for signs of medical distress (Government Code § 7286.5).

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511.3.11 USE OF FORCE TO SEIZE EVIDENCE

In general, members may use reasonable force to lawfully seize evidence and to prevent the destruction of evidence. However, members are discouraged from using force solely to prevent a person from swallowing evidence or contraband. In the instance when force is used, members should not intentionally use any technique that restricts blood flow to the head, restricts respiration, or creates a reasonable likelihood that blood flow to the head or respiration would be restricted. Members are encouraged to use techniques and methods taught by the Mono County Sheriff's Department for this specific purpose.

511.3.12 MEDICAL CONSIDERATION

Once it is reasonably safe to do so, properly trained members should promptly provide or procure medical assistance for any individual injured or claiming to have been injured in a use of force incident (Government Code § 7286(b)).

511.4 USE OF OTHER WEAPONS, TOOLS, AND CHEMICAL AGENTS ON INMATES

511.4.1 NOISE/FLASH DISTRACTION DEVICES

Noise/flash distraction devices, sting grenades, chemical grenades, and similar devices shall be used only at the direction of a supervisor and only by members who have been trained in and are qualified for the use of the devices.

511.4.2 ELECTRONIC CONTROL DEVICES

The use of the TASER® device shall be in accordance with the department's Conducted Energy Device Policy.

The use of other electronic devices, such as stun cuffs, stun vests, and stun belts, shall be in accordance with the department's Electronic Restraints Policy.

511.4.3 CHEMICAL AGENTS

Chemical agents shall only be used in the facility as authorized by the Jail Commander or the authorized designee and in accordance with the department's Chemical Agents Training Policy. Oleoresin capsicum (OC) spray should not be used in the medical unit or other designated areas where inmates are assigned to respiratory isolation or on any inmate who is under control with or without restraints.

Inmates who have been affected by the use of chemical agents shall be promptly provided with the proper solution to decontaminate the affected areas.

If the inmate refuses to decontaminate, such a refusal shall be documented. If an inmate has been exposed in a cell and not removed from the cell where the exposure occurred, in-cell decontamination shall be afforded to the inmate, including:

- (a) Health-trained custody member advising the inmate how to decontaminate in the cell.
- (b) Clean clothing if the inmate's clothing was contaminated.

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- (c) Monitoring of the in-cell inmate at least every 15 minutes on an irregular schedule, for a period of not less than 45 minutes, by health-trained custody member.

511.4.4 PROJECTILE CHEMICAL AGENTS

Pepper projectile systems are plastic spheres filled with a derivative of OC powder. A compressed gas launcher delivers the projectiles with enough force to burst the projectiles on impact, releasing the OC powder. The potential exists for the projectiles to inflict injury if they strike the head, neck, spine, or groin. Therefore, members deploying the pepper projectile system should not intentionally target those areas except when the member reasonably believes the inmate may cause serious bodily injury or death to the member or others. The use of the pepper projectile system is subject to the following requirements:

- (a) Office-approved projectile chemical agents may only be used by members who have received department-authorized training in their use.
- (b) Members encountering a situation that requires the use of the pepper projectile system shall notify a supervisor as soon as practicable. The supervisor shall respond to all such deployments. The supervisor shall ensure that all notifications and reports are completed as required by this policy.

Each deployment of a pepper projectile system shall be documented and, if reasonably practicable, recorded on video. This includes situations where the launcher was directed toward the inmate, regardless of whether the launcher was used. Only non-incident deployments are exempt from the reporting requirement (e.g., training, product demonstrations).

511.4.5 IMPACT WEAPONS

The need to immediately incapacitate the inmate must be weighed against the risk of causing serious injury or death. The head and neck should not be intentionally targeted with an impact weapon, except when the member reasonably believes the inmate may cause serious bodily injury or death to the member or others.

511.4.6 KINETIC ENERGY PROJECTILES

Kinetic energy projectiles, when used properly, are less likely to result in death or serious physical injury and can be used by a trained and qualified member in an attempt to de-escalate a potentially deadly situation.

511.4.7 CHEMICAL AGENTS AND PREGNANT INMATES

Pregnant inmates shall not be pepper sprayed or exposed to other chemical weapons (Penal Code § 4023.8).

511.5 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 a member 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 a

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member 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, members 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 members (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.

511.5.1 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, the supervisor should direct the members 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 Division
- (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 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 members 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 force team technique should be used to control the inmate and to apply restraints, if required.

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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.

511.6 REPORTING THE USE OF FORCE

Every member use of force is an incident that shall be reported on the appropriate report form.

The documentation will reflect the actions and responses of each member participating in the incident, as witnessed by the reporting member.

The report should include:

- (a) A clear, detailed description of the incident, including any application of weapons or restraints.
- (b) The identity of all individuals involved in the incident (e.g., inmates, members, others).
- (c) The member should articulate the factors perceived and why he/she believed the use of force was reasonable under the circumstances.
- (d) Efforts made to temper the severity of a forceful response, and if there were none, the reasons why.
- (e) Description of any injuries to anyone involved in the incident, including the result of any medical checks that show the presence or absence of injury.

Any member directly observing the incident shall make a verbal report to a supervisor as soon as practicable and include as much of the aforementioned information as is known by the member.

Members shall submit the appropriate documentation prior to going off-duty, unless directed otherwise by a supervisor.

A video recording is required for all calculated use of force incidents and should include the introduction of all members participating in the process. The recording and documentation will be part of the investigation package. The supervisor should ensure the recording is properly processed for retention and a copy is forwarded with the report to the 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 the immediate psychological and/or physical condition of the involved member.

The Supervisor shall promptly notify the Jail Commander of any incident involving a member employing deadly force, or any incident where a death or serious bodily injury may have been caused by a member.

511.6.1 REPORTING TO CALIFORNIA DEPARTMENT OF JUSTICE

Statistical data regarding all officer-involved shootings and incidents involving use of force resulting in serious bodily injury is to be reported to the California Department of Justice as required by Government Code § 12525.2.

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511.7 SUPERVISOR RESPONSIBILITIES

A supervisor should respond to a reported application of force resulting in visible injury, if reasonably available. When a supervisor is able to respond to an incident in which there has been a reported use of force, the supervisor is expected to (Government Code § 7286(b)):

- (a) Ensure a crime scene is established to preserve and protect evidence, if appropriate.
- (b) Ensure that the chain of command is notified and that all necessary health and safety and security measures are initiated.
- (c) Obtain the basic facts from the involved members. Absent an allegation of misconduct or excessive force, this will be considered a routine contact in the normal course of duties.
- (d) Ensure that the appropriate investigation authority is notified, if appropriate.
- (e) 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.
- (f) When possible, separately obtain a recorded interview with all individuals upon whom force was used. If this interview is conducted without the person having voluntarily waived his/her *Miranda* rights, the following should apply:
 - 1. The content of the interview should not be summarized or included in any related criminal charges.
 - 2. The fact that a recorded interview was conducted should be documented in a property or other report.
 - 3. The recording of the interview should be distinctly marked for retention until all potential for civil litigation has expired.
- (g) Once any initial medical assessment has been completed or first aid has been rendered, ensure that photographs have been taken of any areas involving visible injury or complaint of pain, as well as overall photographs of uninjured areas.
 - 1. These photographs should be retained until all potential for civil litigation has expired.
- (h) Identify any witnesses not already included in related reports.
- (i) Review and approve all related reports.
- (j) Determine if there is any indication that the individual may pursue civil litigation.
 - 1. If there is an indication of potential civil litigation, the supervisor should complete and route a notification of a potential claim through the appropriate channels.
- (k) Evaluate the circumstances surrounding the incident and initiate an administrative investigation if there is a question of policy noncompliance or if for any reason further investigation may be appropriate.

In the event that a supervisor is unable to respond to the scene of an incident involving a reported application of force, the supervisor is still expected to complete as many of the above items as circumstances permit.

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511.8 USE OF DEADLY FORCE

Where feasible, the correctional deputy shall, prior to the use of deadly force, make reasonable efforts to identify him/herself as a peace officer and to warn that deadly force may be used, unless the correctional deputy has objectively reasonable grounds to believe the person is aware of those facts (Penal Code 835a).

If an objectively reasonable correctional deputy would consider it safe and feasible to do so under the totality of the circumstances, correctional deputy shall evaluate and use other reasonably available resources and techniques when determining whether to use deadly force. To the extent that it is reasonably practical, correctional deputy should consider their surroundings and any potential risks to bystanders prior to discharging a firearm (Government Code § 7286(b)).

The use of deadly force is only justified when the correctional deputy reasonably believes it is necessary in the following circumstances (Penal Code § 835a):

- (a) a correctional 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 correctional deputy or another person.
- (b) a correctional deputy may use deadly force to stop an escaping inmate, or stop a fleeing individual, when the correctional deputy has probable cause to believe that the individual has committed, or intends to commit, a felony involving the infliction or threatened infliction of serious bodily injury or death, and the correctional deputy reasonably believes that there is an imminent or future potential risk of serious bodily injury or death to any other person if the individual is not immediately apprehended.

Correctional Deputy shall not use deadly force against an inmate based on the danger that inmate poses to him/herself, if an objectively reasonable correctional deputy would believe the inmate does not pose an imminent threat of death or serious bodily injury to the correctional deputy or to another person (Penal Code § 835a).

An "imminent" threat of death or serious bodily injury exists when, based on the totality of the circumstances, a reasonable correctional 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 correctional deputy or another person. a correctional 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).

511.9 USE OF FORCE REVIEW

The 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. The Supervisor should also ensure that a review packet containing a copy of all pertinent reports and materials is prepared and forwarded to the Use of Force Review Committee.

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511.9.1 USE OF FORCE REVIEW COMMITTEE

The review committee shall meet and review all use of force cases within 30 days of the incident. It is the responsibility of the Supervisor to ensure these meetings occur. The committee will comprise the following members:

- (a) The Jail Commander
- (b) One supervisor assigned on a rotational basis
- (c) The Direct Supervisor
- (d) One qualified health care professional
- (e) a correctional deputy with advanced use of force training
- (f) Other members as selected by the Sheriff

The committee should render a single finding as to whether the use of force was within policy. Any recommendations for areas identified as needing training, changes in policy, or further investigation into incidents that may lead to member discipline shall be addressed in a separate memorandum to the Training Manager and/or the Internal Affairs Unit, as appropriate.

511.10 TRAINING

The Jail Commander shall work with the Training Manager to ensure legal and facility training mandates are met. This training shall include the following:

- (a) Use of force
- (b) Weapons training
- (c) Self-defense
- (d) Confrontation avoidance procedures:
 - 1. Communication techniques
 - 2. De-escalation techniques
 - 3. Dealing with the mentally ill
 - 4. Application of restraints
- (e) Forced cell extraction techniques
- (f) Force team techniques
- (g) General restraint training (soft and hard restraints)
- (h) Reporting procedures
- (i) Guidelines regarding vulnerable populations, including but not limited to inmates who are elderly, pregnant, and inmates with physical, mental, and developmental disabilities (Government Code § 7286(b))
- (j) Training courses required by and consistent with POST guidelines set forth in Penal Code § 13519.10

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The Training Manager is responsible for establishing a process to identify correctional deputy who are restricted from training other correctional deputy for the time period specified by law because of a sustained use of force complaint (Government Code § 7286(b)).

511.10.1 TRAINING FOR CONTROL DEVICES

The Training Manager shall ensure that all personnel who are authorized to carry a control device have been properly trained and certified to carry the specific control device and are retrained or recertified, as necessary.

- (a) Proficiency training shall be monitored and documented by a certified control-device weapons or tactics instructor.
- (b) All training and proficiency for control devices will be documented in the member's training file.
- (c) Members who fail to demonstrate proficiency with the control device or knowledge of this policy will be restricted from carrying the control device until demonstrating proficiency. If a member cannot demonstrate proficiency with a control device or knowledge of this policy after remedial training, the member may be subject to discipline.

511.10.2 PERIODIC TRAINING

Members will receive periodic training on this policy and demonstrate their knowledge and understanding (Government Code § 7286(b)).

Supervisors should conduct and document regular periodic briefings concerning this policy and the storage and use of weapons and control devices. Any test sheets or documentation of performance should be forwarded to the Training Manager to be included in the member's training file.

511.11 USE OF FORCE COMPLAINTS

The receipt, processing, and investigation of public complaints involving use of force incidents should be handled in accordance with the Personnel Complaints Policy (Government Code § 7286(b)).

511.12 POLICY REVIEW

The Sheriff or the authorized designee should regularly review and update this policy to reflect developing practices and procedures (Government Code § 7286(b)).

511.13 POLICY AVAILABILITY

The Sheriff or the authorized designee should ensure this policy is accessible to the public (Government Code § 7286(c)).

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511.14 PUBLIC RECORDS REQUESTS

Requests for public records involving a correctional deputy's personnel records shall be processed in accordance with Penal Code § 832.7 and the Personnel Records and Records and Data policies (Government Code § 7286(b)).

Use of Restraints

512.1 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).

512.1.1 DEFINITIONS

Definitions related to this policy include:

Clinical restraints - Restraints applied when an inmate's disruptive, assaultive and/or self-injurious behavior is related to a medical or mental illness. Clinical restraints can include leather, rubber or canvas hand and leg restraints with contact points on a specialized bed (four/five-point restraints) or a portable restraint chair.

Therapeutic seclusion - Segregated confinement of an agitated, vulnerable and/or severely anxious inmate with a serious mental illness as part of his/her treatment when clinically indicated for preventive therapeutic purposes.

512.2 POLICY

It is the policy of this department 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.

Restraints 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.

512.3 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 Supervisor

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prior to application. In instances where prior approval is not feasible, the 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 Supervisor at least every hour.

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- (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.

512.3.1 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.

512.4 USE OF RESTRAINTS - CLINICAL

Inmates may be considered for clinically ordered restraints or seclusion when exhibiting dangerous behavior that is believed to be a product of a medical or mental illness and that puts the inmate or others at risk of physical harm, or when medical care is urgently required and the inmate is not considered competent to give or withhold consent.

Clinical restraints and/or therapeutic seclusion shall only be used when an inmate's safety or the safety of others cannot be protected by less restrictive means, and only upon the direct order of a qualified health care professional and notification of the Jail Commander or the authorized designee prior to taking action. Restraints shall be used no longer than is reasonably necessary to provide for the legitimate safety concerns of the inmate, staff, or others.

The following provisions shall be used any time clinical restraints or therapeutic seclusion is authorized:

- (a) Excluding short-term use to gain immediate control of an inmate exhibiting dangerous or destructive behavior, an inmate may be placed in clinical restraints or therapeutic seclusion only on the orders of a qualified health care professional and only after making a determination that less restrictive interventions are ineffective to prevent the inmate from causing property damage or serious injury to him/herself or others.
- (b) Clinical restraints or therapeutic seclusion shall never be ordered or otherwise applied as a means of coercion, discipline, punishment, convenience, or retaliation.
- (c) The qualified health care professional's order may only be in effect for up to 12 hours for adult inmates and up to two hours for inmates age 17 or younger.
- (d) Within one hour of the application of restraints or therapeutic seclusion, a face-to-face observation of the inmate to evaluate the need for continued restraint or therapeutic seclusion shall be conducted by a qualified health care professional.

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- (e) If deemed clinically necessary, the qualified health care professional who gave the initial order for restraints or therapeutic seclusion may renew the original order for an additional four hours for an adult or up to two hours for a person who is age 17 or younger.
- (f) Inmates placed in clinical restraints shall be placed in designated cells within the medical unit. The restraints shall be applied in the least restrictive manner possible, based on the qualified health care professional's evaluation and order.
- (g) Inmates placed in restraints shall only be placed in a face-up position.
- (h) Following the first face-to-face observation, a qualified health care professional shall conduct face-to-face checks every 15 minutes on an irregular schedule to assess the inmate's condition and behavior. The restraints shall be checked for proper application and to ensure that circulation is not compromised. Checks shall be documented in the inmate's medical file.
- (i) Except in the event of a medical emergency for the inmate, only a qualified health care professional shall determine when an inmate shall be released from clinical restraints or therapeutic seclusion.

512.5 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.

512.6 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.

512.7 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.

512.8 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).

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512.9 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).

512.9.1 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.

Electronic Restraints

513.1 PURPOSE AND SCOPE

This policy establishes guidelines for the application, supervisory oversight and restrictions on the use of electronic restraints on persons incarcerated in this facility, during transportation of inmates and during court appearances.

513.2 POLICY

The Mono County Sheriff's Department allows the use of department-issued electronic restraints as provided in this policy.

513.3 MEMBER RESPONSIBILITIES

Members shall successfully complete department-approved training prior to using any electronic restraint device. Only department-issued electronic restraint devices shall be used.

Members should perform a function test on the device prior to placing it on an inmate. The Supervisor shall ensure that all electronic restraint devices are properly maintained and in good working order.

When an electronic restraint device is used during a court appearance, the staff member should inform the court that an inmate with an electronic restraint device is present. The member should briefly explain the operation of the device to the judge.

513.4 VERBAL WARNING

A verbal warning of the intended use of the electronic restraint device should precede its application, unless it would otherwise endanger the safety of staff members or when it is not practicable due to the circumstances. The warning is intended to provide the inmate with an opportunity to comply. The fact that a verbal or other warning was given or the reasons it was not given shall be documented by the member deploying the device.

513.5 APPLICATION

Prior to applying the electronic restraint device to an inmate, the member should describe its operation and caution the inmate about behaviors that may result in its activation.

Although the electronic restraint device is generally effective in controlling most inmates, members should be aware that it may not achieve the intended result, and that they should be prepared with other options.

The electronic restraint device may be used in the following circumstances, when the circumstances perceived by the member at the time indicate that such application is reasonably necessary to:

- (a) Prevent self-injury, suicide, escape, injury to others or property damage.

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- (b) Control the behavior of a high-risk inmate who is being moved outside a cell or housing unit or transported outside the facility.

513.5.1 MULTIPLE APPLICATIONS

Members should activate the electronic restraint device for only one standard cycle and then evaluate the situation before applying any subsequent cycles. Multiple applications of an electronic restraint device or for more time than is necessary to control the inmate are generally not recommended and should be avoided unless the member reasonably believes that the need to control the inmate outweighs the potentially increased risk posed by multiple applications.

If the first application of the electronic restraint device appears to be ineffective in gaining control of an inmate, the member should consider certain factors before additional applications, including whether the inmate has the ability to comply and has been given a reasonable opportunity to comply.

513.5.2 SPECIAL CONSIDERATIONS

Electronic restraint devices should not be used on:

- (a) Inmates who are known to be pregnant.
- (b) Elderly or infirm inmates.
- (c) Inmates with obviously low body mass.
- (d) Inmates who have been recently sprayed with a flammable chemical agent or who are otherwise in close proximity to any known combustible vapor or flammable material, including alcohol-based oleoresin capsicum (OC) spray.
- (e) Inmates whose position or activity may result in collateral injury (e.g., falls from height, running).

Because the application of the electronic restraint device relies primarily on pain compliance, its use generally should be limited to a distraction technique to gain separation between the member and the inmate, or to disrupt an inmate's violent or unruly behavior, thereby giving members time and distance to consider other force options or actions.

The electronic restraint device shall not be used to psychologically torment, elicit statements, retaliate against or punish any inmate.

513.6 DOCUMENTATION

Members shall document each incident where electronic restraints are placed on an inmate or are activated. Notification shall also be made to a supervisor in compliance with the Use of Force Policy. Unintentional activations will also be documented.

513.7 MEDICAL TREATMENT

All inmates who have been subjected to the electric discharge of an electronic restraint device should have the contact site medically assessed before further incarceration.

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Additionally, any inmate who falls under any of the following categories should, as soon as practicable, be examined by a qualified health care professional:

- (a) The inmate is suspected of being under the influence of controlled substances and/or alcohol.
- (b) The inmate may be pregnant.
- (c) The inmate reasonably appears to be in need of medical attention.
- (d) The inmate requests medical treatment.

If any inmate refuses medical attention, such a refusal should be witnessed by another staff member and/or medical personnel and shall be fully documented. If an audio recording is made of the contact or an interview with the inmate, any refusal should be included, if possible.

Members shall inform any person providing medical care or receiving custody that the inmate has been subjected to the activation of an electronic restraint device.

513.8 SUPERVISOR RESPONSIBILITIES

Supervisor approval is necessary before an electronic restraint device is placed on an inmate. A supervisor should respond to all incidents where an electronic restraint device was activated.

A supervisor should review each incident where an inmate has been exposed to an activation of an electronic restraint device. Any onboard memory should be downloaded by a supervisor and retained with the inmate's file.

Photographs of contact sites should be taken and witnesses interviewed.

513.9 TRAINING

Training should be consistent with recommendations made by the particular device manufacturer or any state requirements.

Searches

514.1 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 Mono County Sheriff's Department 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.

514.1.1 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 correctional deputy 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 correctional 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.

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514.2 POLICY

It is the policy of this department to ensure the safety of staff, inmates and visitors by conducting effective and appropriate searches of inmates, visitors 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.

514.3 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).

514.4 MODIFIED STRIP SEARCHES, STRIP SEARCHES AND PHYSICAL BODY CAVITY SEARCHES

Correctional Deputy 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.

514.4.1 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:
 - 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.

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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 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 department'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.

514.4.2 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.

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514.4.3 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 department's current evidence procedures.
- If appropriate, complete a crime report and/or disciplinary report.

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- 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.

514.4.4 MODIFIED STRIP SEARCH AND STRIP SEARCH PROCEDURES

All modified strip searches and strip searches shall be conducted in a professional manner under sanitary conditions and in an area of privacy so that the search cannot be observed by persons not participating in the search.

Unless conducted by a qualified health care professional or in case of an emergency, a modified strip search or strip search shall be conducted by staff members of the same sex as the person being searched (Penal Code § 4030). Any cross-gender modified strip searches and cross-gender strip searches shall be documented (28 CFR 115.15).

Whenever possible, a second staff member of the same sex should be present during the search for security purposes and to witness the discovery of evidence.

The staff member conducting a strip search shall not touch the breasts, buttocks or genitalia of the person being searched. These areas may be touched through the clothing during a modified strip search.

- (a) The searching staff member will instruct the inmate to:
 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 correctional 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 correctional 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 correctional 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.

514.4.5 PHYSICAL BODY CAVITY SEARCH

Physical body cavity searches shall be completed as follows:

- (a) No person shall be subjected to a physical body cavity search without the approval of the Jail Commander or the authorized designee and only with the issuance of a search

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warrant. A copy of any search warrant and the results of the physical body cavity search shall be included with the related reports and made available, upon request, to the inmate or authorized representative (except for those portions of the warrant ordered sealed by a court).

- (b) Only a physician may conduct a physical body cavity search. Except in exigent circumstances, only a physician who is not responsible for providing ongoing care to the inmate may conduct the search (15 CCR 1206(o)).
- (c) Except for the physician conducting the search, persons present must be of the same sex as the person being searched. Only the necessary staff needed to maintain the safety and security of the medical personnel shall be present (Penal Code § 4030).
- (d) Privacy requirements, including restricted touching of body parts and sanitary condition requirements are the same as required for a strip search.
- (e) All such searches shall be documented including:
 - 1. The facts that led to the decision to perform a physical body cavity search of the inmate.
 - 2. The reasons less intrusive methods of searching were not used or were insufficient.
 - 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 department's current evidence procedures.
- (h) If appropriate, the staff member shall complete a crime report and/or disciplinary report.

514.4.6 BODY SCANNER SEARCH

When a scanner is reasonably available, a body scanner should be performed on all inmates/arrestees upon entering the secure booking area of the facility.

If a body scanner is used, members (Penal Code § 4030):

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- (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.

514.5 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).

514.6 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.

514.7 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.

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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.

514.8 PHYSICAL PLANT SEARCHES

The following areas of this facility shall be periodically searched for contraband:

- (a) Exercise yards shall be searched for contraband prior to and after each inmate group occupies the yard.
- (b) Holding cells shall be searched prior to and after each inmate occupies the cell.
- (c) Program areas, such as classrooms and multipurpose rooms shall be searched after each use by an inmate or inmate group.
- (d) Laundry areas shall be searched before and after each inmate group occupies the area.
- (e) Kitchen areas shall be frequently searched for contraband and to account for tools, knives and food items.
- (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.

514.8.1 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).

514.9 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.

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514.10 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).

Reporting In-Custody Deaths

515.1 PURPOSE AND SCOPE

This policy provides direction on how in-custody deaths shall be reported.

515.1.1 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 department.

515.2 POLICY

It is the policy of this department to follow state and local guidelines for reporting in-custody deaths (15 CCR 1046).

515.3 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)).

The Sheriff or the authorized designee should ensure that all specified information relating to the in-custody death is posted on the department's website as prescribed and within the timeframes provided in Government Code § 10008.

515.4 PROCEDURE

Upon determining that a death of any person has occurred while in the custody of this department, the 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.

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Reporting In-Custody Deaths

The Supervisor shall also promptly notify the Jail Commander 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.

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. Correctional Deputy shall not make a public comment.

515.5 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)).

515.6 IN-CUSTODY DEATH WORKING ORDER

Please reference *section B-102 of the standard operating procedures manual and follow the additional information as it is will help correctional staff in the event of an in-custody death.*

Staff and Inmate Contact

516.1 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.

516.2 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.

516.3 GENERAL CONTACT GUIDELINES

Members are encouraged to interact with the inmates under their supervision and are expected to take prompt and appropriate action to address health and safety issues that are discovered or brought to their attention.

All members should present a professional and command presence in their contact with inmates. Members shall address inmates in a civil manner. The use of profanity, and derogatory or discriminatory comments is strictly prohibited.

Written communication (e.g., request forms, inmate communication, grievances, rules infraction forms, disciplinary reports) shall be answered in a timely manner. Such communication shall be filed with the inmate's records.

Members shall not dispense legal advice or opinions, or recommend attorneys or other professional services to inmates.

While profanity and harsh language are prohibited, the Office recognizes the necessity for staff to give inmates direction in a firm, determined, and authoritative manner in order to maintain proper supervision and control. Authoritative directions to inmates are particularly instructed when activities or events pose a threat to the safety or security of this facility.

516.4 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.

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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.

516.4.1 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.

516.5 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.

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- 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

517.1 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.

517.2 POLICY

It is the policy of the Mono County Sheriff's Department to provide safe, secure and humane transportation for all inmates and other persons as required by law.

This department shall 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.

517.3 PROCEDURES

Only staff members who have completed department-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, the breakdown of a transportation vehicle, or some other unforeseen event.
 4. Site verification, unloading and reloading instructions, and parking rules at the destination.
- (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 waist restraints while being transported (see the Use of Restraints Policy).
 2. Inmates who are transported to a hospital for the purpose of childbirth shall be transported in the least restrictive way possible and in accordance with Penal

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Transportation of Inmates Outside the Secure Facility

Code § 3407. The inmate shall not be shackled to anyone else during transport (see the Use of Restraints Policy) (Penal Code § 4023.8(l)).

- (d) Ensuring that all vehicle security devices (e.g., window bars, inside cages, door locks) are in good repair and are operational.
- (e) Thoroughly searching the transporting vehicle for contraband before any inmate is placed inside, and again after removing the inmate from the transporting vehicle.

517.4 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

518.1 PURPOSE AND SCOPE

This policy establishes the requirement for placing inmates into and the continued placement of inmates in sobering cells.

518.1.1 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.

518.2 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.

518.3 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 department 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.

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- (e) Females and males will be detained in separate sobering cells.

Biological Samples

519.1 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.

519.2 POLICY

The Mono County Sheriff's Department 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.

519.3 PERSONS SUBJECT TO BIOLOGICAL SAMPLE COLLECTION

Inmates must submit a biological sample (Penal Code § 296: Penal Code § 296.1):

- (a) Upon conviction or other adjudication of any felony offense.
- (b) Upon conviction or other adjudication of any offense if the person has a prior felony on record.
- (c) When arrested or charged with any felony.

519.4 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.

519.4.1 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, during regular business hours, calling the California Department of Justice (DOJ) designated DNA laboratory. There is no need to obtain a biological sample if one has been previously obtained.
- (c) Use the designated collection kit provided by the California DOJ to perform the collection and take steps to avoid cross contamination.

519.5 CALCULATED USE OF FORCE TO OBTAIN SAMPLES

If an inmate refuses to cooperate with the sample collection process, correctional deputy should attempt to identify the reason for refusal and seek voluntary compliance without resorting to using

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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 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 such actions are available.

The Supervisor shall review and approve any calculated use of force. The supervisor shall be present to supervise and document the calculated use of force.

519.5.1 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 department's established records retention schedule.

If the use of force includes a cell extraction, the extraction shall also be video recorded, including audio. The video recording shall be retained by the facility in accordance with established records retention schedules. Notwithstanding the use of the video as evidence in a criminal proceeding, the tape shall be retained by the jail administration (15 CCR 1059).

519.6 LEGAL MANDATES AND RELEVANT LAWS

California law provides for the following:

519.6.1 DOCUMENTATION RELATED TO FORCE

The 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.

519.6.2 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.

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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)).

519.6.3 STATE MANDATES

Correctional Deputy shall document their efforts to secure voluntary compliance and include an advisement of the legal obligation to provide the requisite specimen, sample, or impression, and the consequences of refusal (15 CCR 1059).

End of Term Release

520.1 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.

520.2 POLICY

It will be the policy of the Mono County Sheriff's Department to provide for the timely, efficient, and legal release of inmates.

520.3 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 staggered times on their release date to avoid congestion in the release area. Inmates scheduled for release shall be escorted by the staff to the transfer/release area to begin the release procedure 30 minutes prior to their scheduled release time.

The Supervisor or release officer 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 or a single digit fingerprint match system, if available.

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.
 - 3. Unresolved grievances, damage claims, or lost property.
- (c) Releasing staff must complete National Crime Information Center (NCIC) and local warrant checks to ensure that there are no outstanding warrants or detention orders. 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 a qualified health care professional and medically authorized for release. To the extent reasonably practicable, individuals who have been determined to be severely mentally

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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 their property by signed receipt. Any discrepancies shall be promptly reported to the 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 Supervisor. The inmate shall remain in custody until the Supervisor determines whether additional criminal charges should be filed against the inmate for the damage.
- (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) Inmates shall have access to at least three free telephone calls to plan for a safe and successful release (Penal Code § 4024.5).
- (j) Release standards, release processes, and release schedules shall be made available to an inmate following the determination to release the inmate (Penal Code § 4024.5).

The housing sheet, release log, and daily census log shall be updated accordingly after the inmate's release. The Supervisor shall ensure all release documents are complete and properly signed by the inmate and the staff where required.

520.3.1 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).

520.3.2 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 Division 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).

520.3.3 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.

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- (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.

520.3.4 DISCHARGE OF SEX OFFENDER REGISTRANTS

The Records Division shall inform the California Department of Justice when inmates required to register changes in address under Penal Code § 290.013 have been released from the jail within 15 days of release (Penal Code § 290.013).

520.3.5 ARRESTEE RELEASED FROM CUSTODY

Upon request, a detained arrestee released from custody shall be provided with the appropriate Judicial Council forms to petition the court to have the arrest and related records sealed (Penal Code § 851.91).

The 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.

Over-Detention and Inadvertent Releases

521.1 PURPOSE AND SCOPE

This policy is intended to provide guidance to staff and management in the event of over-detention or inadvertent release.

521.1.1 DEFINITIONS

Definitions related to this policy include:

Inadvertent release - Any instance of an inmate being mistakenly released.

Over-detention - Any instance of an inmate being mistakenly detained beyond his/her scheduled release date.

521.2 POLICY

It is the policy of this department to reasonably ensure that over-detention and inadvertent releases do not occur.

521.3 OVER-DETENTION

Any custody staff member who discovers or receives information of an over-detention, or a complaint from an inmate regarding over-detention (which could be discovered through a grievance), should immediately notify the Supervisor (see the Inmate Grievances Policy).

The Supervisor should direct the jail records unit to immediately conduct an investigation to determine the correct release date of the inmate and to report the findings to the Supervisor.

Inmates who are found to be over-detained shall be processed for immediate release in accordance with the End of Term Release Policy. The Supervisor shall ensure that the Jail Commander is notified, an entry is made to the daily activity log and that a report is completed.

521.3.1 OVER-DETENTION GRIEVANCES

Any custody staff member who receives information or a complaint from an inmate regarding over-detention should assist the inmate with completing a grievance form and forward the form directly to the Supervisor as soon as practicable.

The Supervisor receiving a grievance regarding an over-detention should direct the jail records unit to immediately conduct an investigation to determine the correct release date of the inmate and to report the findings to the Supervisor.

If the Supervisor decides not to release the inmate, the Supervisor should ensure the inmate receives a grievance hearing within 24 hours of the grievance submission. The hearing documentation should reflect efforts made to investigate the allegation (see the Inmate Grievances Policy).

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521.4 INADVERTENT RELEASE

Whenever an inadvertent release is discovered, the custody staff member making the discovery shall immediately notify the Supervisor. The notification shall be documented in the daily activity log.

521.4.1 INADVERTENT RELEASE INVESTIGATION

The Supervisor should direct the jail records unit to immediately conduct an investigation to determine the cause of the inadvertent release.

The Supervisor will coordinate a response based upon the seriousness of the threat the inmate may pose to the community. The threat assessment should be based upon the inmate's criminal history and the reason he/she is currently in custody, among other factors.

In the case of an inadvertent release, the Supervisor should immediately notify the Jail Commander and ensure a report is completed. The Jail Commander should notify the Sheriff.

An appropriate evaluation of the circumstances shall be made to determine whether the inadvertent release should be classified as an escape.

521.4.2 RETURNING THE INMATE TO CUSTODY

When the inmate is located and returned to the facility, the appropriate notifications should be made as soon as possible. If the inmate is not immediately located and returned to custody, dispatch shall notify the watch commander and the local beat deputy and ask for a larger search of the area. If the inmate is not found, the jail supervisor shall notify the District Attorney's office, the Probation Department and the sentencing Judge, as soon as practical.

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 this department 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.

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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 correctional 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.

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- 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 correctional deputy (15 CCR 1081).

A violation of rules observed by general service employees, volunteers, or contractors will be reported to a correctional deputy for further action. Correctional Deputy 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

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notification of a supervisor. The supervisor shall assess the situation and initiate any emergency action, if necessary, and notify the 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 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 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 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.

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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.

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Absent a safety or security concern, all staff reports and evidence, including exculpatory evidence, obtained during the disciplinary investigation shall be made available to the accused 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 (15 CCR 1081).

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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:

- 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 Safety and Sobering Cells Policy, be used for disciplinary purposes (15 CCR 1083).
- In no case shall any restraint device be used for disciplinary purposes (15 CCR 1083).
- Food shall not be withheld as a disciplinary measure (15 CCR 1083).
- Correspondence privileges shall not be withheld except in cases where the 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 (15 CCR 1083).
- 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)).

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- 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

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).

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
- 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.

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)).

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)).

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.

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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.

Disciplinary Separation

601.1 PURPOSE AND SCOPE

This policy specifically addresses disciplinary separation and guiding principles relating to the conditions attached to that separation. It will provide guidance to the staff on acceptable practices with regard to management of inmates in disciplinary separation or classified as requiring special management needs.

601.1.1 DEFINITIONS

Definitions related to this policy include:

Disciplinary separation - A status assigned to an 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.

601.2 POLICY

The Mono County Sheriff's Department 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.

601.3 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 department 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)).

601.4 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

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them in the supervision of inmates held in disciplinary separation or classified as requiring special management needs.

601.4.1 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.

601.4.2 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 a 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 disciplinary separation unit log.

Exceptions to this policy can only be made when the restriction is determined to be reasonably necessary for legitimate government purposes. Any exceptions to this basic requirement must be reviewed and approved by the Supervisor. The circumstances necessitating a restriction must be clearly documented on the unit log.

601.4.3 DENIAL OF AUTHORIZED ITEMS OR ACTIVITIES

Personal items may be withheld when it reasonably appears that the items will be destroyed by the 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 correctional deputy taking such action shall prepare a report describing the circumstances that necessitated the need to restrict personal items or activities. The report

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shall 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.

601.4.4 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)).

601.4.5 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)).

601.4.6 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.

601.4.7 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.

601.5 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

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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.

601.6 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.

601.7 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:

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- (a) A visit by the 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.

Inmates with Disabilities

602.1 PURPOSE AND SCOPE

This policy provides guidelines for addressing the needs and rights of inmates detained by this department, in accordance with the Americans with Disabilities Act (ADA).

602.1.1 DEFINITIONS

Definitions related to this policy include:

Disability - The ADA defines a disability as a physical or mental impairment that limits one or more major life activities. These include, but are not limited to, any disability that would substantially limit the mobility of an individual or an impairment of vision and/or hearing, speaking or performing manual tasks that require some level of dexterity.

602.2 POLICY

This department 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.

602.3 UNDERSHERIFF 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.

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- 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 Mono County Sheriff's Department 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.

602.4 OFFICERS RESPONSIBILITIES

Correctional Deputy should work with qualified health care professionals to aid in making accommodations for those with physical disabilities.

Correctional Deputy 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 correctional deputy should consult with the qualified health care professional or the Responsible Physician regarding housing location.

Correctional Deputy 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, correctional deputy 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 correctional 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.

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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.

602.5 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.

602.6 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

603.1 PURPOSE AND SCOPE

The purpose of this policy is to protect the constitutional rights of inmates to access the courts and legal counsel, while holding inmates accountable to the rules and regulations that govern conduct in this facility. The staff at every level is reminded the fundamental constitutional right of access to courts does not end when a person is incarcerated.

603.2 POLICY

It is the policy of this department that all inmates will have access to the courts and the ability to consult with legal counsel (15 CCR 1068).

603.3 INMATE ACCESS

Staff should not unreasonably interfere with inmates' attempts to seek counsel and where appropriate should assist inmates with making confidential contact with attorneys and authorized representatives.

Access to courts and legal counsel may occur through court-appointed counsel, attorney or legal assistant visits, telephone conversations or written communication. To facilitate access, this facility will minimally provide:

- Confidential attorney visiting areas that include the means by which the attorney and the inmate can share legal documents.
- Telephones that enable confidential attorney-client calls.
- Reasonable access to legal materials.
- A means of providing assistance through the court process by individuals trained in the law. This assistance will be available to illiterate inmates and those who cannot speak or read English or who have disabilities that would impair their ability to access.
- Writing materials, envelopes and postage for indigent inmates for legal communications and correspondence.

The 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.

603.4 CONFIDENTIALITY

All communication between inmates and their attorneys is confidential, including telephone conversations, written communication and video conferencing. The content of written attorney-client communication will not be reviewed or censored but the documents may be inspected for contraband.

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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.

603.5 INMATE REQUEST FOR ASSISTANCE

Written materials addressing how an inmate can access local attorneys and key legal documents will be provided by the courts. 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 or via an appointed legal assistant.

603.6 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 Supervisor for logging and distribution.

603.7 MAIL

Legal mail shall be handled in accordance with the Inmate Mail Policy.

603.8 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

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facility shall be updated to reflect this information. A copy of the court order shall be maintained in the inmate's file in accordance with established records retention schedules.

The court may, but is not required to, appoint to an inmate who is designated pro per a back-up attorney, paralegal or other person to assist the inmate with legal research. All information related to appointed assistants should be recorded in the relevant facility records.

Any provision of legal materials shall be in accordance with court directives and in consultation with the County Counsel.

603.8.1 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 Sargeant. The Jail Sargeant may recommend the suspension or a limitation of the inmate's pro per privileges if they adversely affect the safety and security of the jail.

Upon the concurrence with the findings and recommendation of the Jail Commander, Jail Sargeant or the authorized designee shall consult with Mono County legal counsel prior to notifying the court of any intent to limit the described pro per privileges.

The inmate may petition the court if he/she is dissatisfied with the action taken.

603.8.2 PRO PER STATUS - MATERIALS AND SUPPLIES

The facility may provide the following materials and supplies to a pro per inmate. These items may be retained by the inmate but must be kept in the container supplied for such purpose. The items may include:

- Up to one-half of a ream of 8-inch x 11-inch plain bond typing paper
- Up to three ruled legal notepads
- Standard legal size envelopes
- One dozen (maximum) black lead golf pencils
- Two erasers
- One legal size accordion file
- 9-inch x 12-inch manila envelopes and 10-inch x 14-inch manila envelopes

Unless otherwise ordered by the court, the Office shall have no obligation to supply materials beyond those listed above. Replacement of any of the listed items shall be accomplished through a written request to the Supervisor or the authorized designee. Supplies provided by a court legal liaison will be received and distributed by the Supervisor or the authorized designee. All supplies distributed to the inmate will be recorded in the inmate's pro per activities record. Supplies not listed in this policy are subject to approval by the Jail Commander or the authorized designee.

Copies of an inmate's final legal (criminal case) work product, upon the inmate's request, may be provided subject to arrangements with the court.

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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. Such materials will be kept in the inmates personal property, not in the cell block areas.

Any books or materials found in the inmate's possession beyond what is authorized will be returned or placed in the inmate's property.

603.8.3 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 this department or otherwise detained by a government agency, except upon a specific court order.

Inmate Rights - Protection from Abuse

604.1 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.

604.2 POLICY

It is the policy of this department 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.

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.

604.3 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.
- Referring sick or injured inmates to a qualified health care professional without unnecessary delay.
- Maintaining high standards of cleanliness throughout the jail.

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- Documenting all abuse protection efforts in facility logs and incident reports as applicable.

Foreign Nationals and Diplomats

605.1 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.

605.2 POLICY

The Mono County Sheriff's Department 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 Mono County Sheriff's Department 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.

605.3 DIPLOMATIC AND CONSULAR IMMUNITY

605.3.1 AVAILABILITY OF RESOURCES

The 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 department 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.

605.3.2 ADDRESSING CLAIMS OF DIPLOMATIC OR CONSULAR IMMUNITY

When an arrestee who claims diplomatic or consular immunity is brought to the Mono County Sheriff's Department Jail the receiving correctional deputy shall first inform the Supervisor and then generally proceed as follows:

- (a) Do not accept custody of the person from the transporting correctional deputy. The person should not be brought inside the Mono County Sheriff's Department 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.

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- (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.

It will be the responsibility of the Supervisor to communicate the claim of immunity to the on-duty supervisor of the arresting department (if not the Mono County Sheriff's Department). The Supervisor may assist another agency in determining the person's immunity status.

The Supervisor is responsible for ensuring appropriate action is taken based upon information received regarding the person's immunity status.

605.3.3 REPORTING

If the person's immunity status has been verified, the 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.

605.4 CONSULAR NOTIFICATIONS

605.4.1 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 department 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.

605.4.2 CONSULAR NOTIFICATION ON BOOKING

Office members assigned to book inmates shall:

- (a) Inform the foreign national, without delay, that he/she may have his/her consular officers notified of the arrest or detention and may communicate with them. Members shall ensure this notification is acknowledged and documented.
- (b) Determine whether the foreign national's country is on the U.S. Department of State's mandatory notification list.
- (c) If the foreign national's country is not on the list for mandatory notification but the foreign national requests that his/her consular officers be notified, then:
 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 officers without delay.

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- (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 form. If no fax confirmation is received, a telephonic notification should be made and documented.
 2. Tell the foreign national that this notification has been made and inform him/her without delay that he/she may communicate with his/her consular officers.
 3. Forward any communication from the foreign national to his/her consular officers without delay.
 4. Document all notifications to the embassy or consulate and retain the faxed notification and any fax confirmation for the inmate's file.

Members should never discuss anything with consulate personnel beyond the required notifications, such as whether the inmate is requesting asylum. Requests for asylum should be forwarded to the Supervisor.

Prison Rape Elimination Act

606.1 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).

606.1.1 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

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- 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).

606.2 POLICY

This department has zero tolerance with regard to sexual abuse and sexual harassment in this facility. This department 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.

606.3 PREA COORDINATOR

The Jail Commander shall appoint an upper-level manager with sufficient time and authority to develop, implement, and oversee department 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 department'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 department'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.

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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 department's ability to protect inmates from sexual abuse (28 CFR 115.18).
- (e) Ensuring that any contract for the confinement of department 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 department 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

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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 department, using a standardized instrument and set of definitions. Upon request, the Office shall provide all such data from the previous calendar year to the U.S. Department of Justice (DOJ) no later than June 30 (28 CFR 115.87; 34 USC § 30303; 15 CCR 1041).
 - 1. The data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the U.S. DOJ.
 - 2. The data shall be aggregated at least annually.
- (j) Establishing a process to monitor the conduct and treatment of detainees or staff who have reported sexual abuse, and the conduct and treatment of detainees who were reported to have suffered sexual abuse.
- (k) Ensuring that the following are published on the department'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 Mono County Sheriff's Department 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).

606.4 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

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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).

606.4.1 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).

606.5 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.

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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).

606.5.1 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.

606.6 FIRST RESPONDERS

If an allegation of inmate sexual abuse is made, the first correctional 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 correctional deputy, the responder shall request the alleged victim to refrain from any actions that could destroy physical evidence and then immediately notify a correctional 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).

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606.7 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 department-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 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 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).

606.7.1 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).

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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).

606.7.2 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).

606.8 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 Internal Affairs Unit for investigation.

606.8.1 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).

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606.9 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).

606.10 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 SAFEs nor SANEs are available, other qualified medical practitioners can perform the examination. The Office shall document its efforts to provide SAFEs or SANEs (28 CFR 115.21).
- (b) If requested by the victim, a victim advocate, a qualified department 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.

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- (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).

606.11 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).

606.12 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.

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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.

606.13 DATA REVIEWS

This department 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 department's progress in addressing sexual abuse.

The reports shall be approved by the Jail Commander and made available through the department 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 Mono County Sheriff's Department facilities and private facilities with which it contracts shall be made available to the public at least annually through the

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department website. Before making aggregated sexual abuse data publicly available, all personal identifiers shall be removed (28 CFR 115.89).

606.14 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).

606.15 PRESERVATION OF ABILITY TO PROTECT INMATES

The Office shall not enter into or renew any collective bargaining agreement or other agreement that limits the department'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).

Grooming

608.1 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.

608.2 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.

608.3 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.

608.3.1 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.

608.4 SHAVING

Inmates may shave daily. Facial hair shall be clean and well groomed. Long beards may allow inmates to conceal weapons or contraband. Inmates may be required to trim facial hair if it poses a security or safety risk. Inmates may be required to submit to new booking photographs if their appearance is significantly altered due to facial hair. Inmates with facial hair who work around food shall wear appropriate facial coverings.

An inmate may be denied access to razors if he/she appears to be a danger to him/herself or others, or if such access may jeopardize the safety and security of the facility.

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Inmates may be restricted from significantly altering their appearance for reasons of identification in court (15 CCR 1267(b)).

608.5 NAILS

Nail clippers will be kept at the control 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.

608.6 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.

608.7 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).

608.8 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.

Indigent inmates shall receive hygiene items necessary to maintain an appropriate level of personal hygiene.

No inmate will be denied the necessary personal care items. For sanitation and security reasons, personal care items shall not be shared (15 CCR 1265 et seq.).

Inmate Nondiscrimination

609.1 PURPOSE AND SCOPE

The constitutional rights of inmates regarding discrimination are protected during incarceration. These protections extend to administrative decisions, e.g., classification, access to programs and the availability of services. This policy is intended to guide the staff toward nondiscriminatory administrative decisions and to detail an inmate complaint and discrimination investigation process.

609.2 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.

609.3 INMATES REPORTING DISCRIMINATION

Inmates who wish to report an allegation of discrimination may communicate with facility management in any way, including:

- (a) Confidential correspondence addressed to the Jail Commander or the Sheriff or other government official, including the courts or legal representative.
- (b) Verbally to any supervisor or other staff member of this facility.

609.3.1 HANDLING COMPLAINTS OF DISCRIMINATION

Staff shall promptly forward all written allegations of discrimination by inmates to the Supervisor. If the allegation is presented verbally, the receiving staff member shall prepare an incident report identifying the circumstances prompting the allegation, the individuals involved, and any other pertinent information that would be useful to investigating the allegation.

Unless the complaint submitted by the inmate is clearly identified as confidential and addressed to the Jail Commander, Sheriff, or other official, the Supervisor shall review the complaint and attempt to resolve the issue. In any case, the 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

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- (f) The ability to safely provide the requested services

609.4 DISCRIMINATION PROHIBITED

Discriminating against an inmate based upon actual or perceived race, ethnicity, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, pregnancy, genetic information, veteran status, marital status, and any other classification or status protected by law is prohibited.

Reasonable and comparable opportunities for participation in services and programs including vocational, educational, and religious programs shall be made available to inmates in a nondiscriminatory manner.

The Jail Commander should periodically conduct interviews with inmates and staff members to identify and resolve potential problem areas related to discrimination before they occur.

Inmate Grievances

610.1 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.

610.2 POLICY

It is the policy of this department 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.

610.3 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.

610.3.1 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.

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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.

610.3.2 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.

610.3.3 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.

610.3.4 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.

610.4 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 brief 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 briefing.

The Sheriff should evaluate the recommendations and ensure appropriate action is taken.

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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.

610.5 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 Supervisor for investigation. Inmates and staff are not required to attempt to informally resolve grievances related to sexual abuse.
- (e) The Supervisor shall ensure that grievances related to sexual abuse are investigated and resolved within 90 days of the initial filing. The 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.

610.5.1 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 Supervisor, who will investigate and issue a final decision within five calendar days.

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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).

610.6 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

611.1 PURPOSE AND SCOPE

This policy establishes the requirement for providing eligible inmates the opportunity to vote during elections, pursuant to election statutes.

611.2 POLICY

Inmates who 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 voters to vote in local, state and federal elections, pursuant to election codes (Title 15 CCR § 1071).

Inmates should be advised of voting methods during the inmate orientation.

611.3 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.

611.4 PROCEDURES

Prior to each election, the Jail Commander will designate a correctional deputy to be a liaison between the Office and the local Registrar of Voters. The designated correctional deputy will be responsible for assisting inmates who have requested to vote.

611.4.1 REQUESTING AN ABSENTEE BALLOT

An inmate who will be in custody during an election and requests to vote by absentee ballot should ask the on duty correctional deputy for the ballot. The correctional deputy will make arrangement to get the ballot to the inmate in a timely manner. Associated official state and county voting informational materials will also be provided.

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611.4.2 VOTING

All ballots received shall be delivered to inmates in a timely manner to ensure compliance with the inmate's right to vote. The completed ballot shall be hand carried to the register of voters office located next to the jail.

Chapter 7 - Medical-Mental Health

Health Care Administrative Meetings and Reports

700.1 PURPOSE AND SCOPE

The Office recognizes that the delivery of effective health care requires open and frequent communication between the Responsible Physician and the Jail Commander. This policy provides guidelines for the continuous monitoring, planning and problem resolution in providing health care that addresses the medical needs of the inmate population and prevents potential outbreaks of communicable and contagious illness.

700.1.1 DEFINITIONS

Definitions related to this entire chapter include:

Access to care - An inmate should be seen in a timely manner by a qualified health care professional. The inmate should be given a professional clinical diagnosis and receive treatment that is ordered.

Clinical practice guidelines - A systematically developed science-based statement designed to assist practitioners and inmates with decisions about appropriate health care for specific clinical circumstances. Clinical practice guidelines are used to assist clinical decision-making, assess and assure the quality of care, educate individuals and groups about clinical disease, guide the allocation of health care resources and reduce the risk of legal liability for negligent care.

Clinical setting - An examination or treatment room, either on- or 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, health services administrator or health agency responsible for providing all health care services or coordinating the delivery of all health care services.

Health care - The sum of all actions, preventive and therapeutic, taken for the physical and mental 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 correctional 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.

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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.

Access to Health Care

701.1 PURPOSE AND SCOPE

The provision of adequate health services in a custody setting is a constitutional right afforded to all 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.

701.2 POLICY

It is the policy of this department 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 Mono County Sheriff's Department 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).

701.3 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.

701.4 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.

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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.

Non-Emergency Health Care Requests and Services

702.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a daily triage system of inmate requests for health care services. This is to ensure that the health needs of the population are addressed properly and in a timely manner.

702.2 POLICY

It is the policy of this department to provide 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 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 and referred appropriately.
- (e) Restrictions that prohibit non-health services personnel from diagnosing or treating an illness.

702.3 HEALTH CARE REQUESTS

During the collection of health care requests from inmates, care should be taken to protect the confidentiality of the inmate and the nature of the health issue. The requests shall be reviewed to determine the priority of need and the proper place for health care to be delivered.

Inmates will be instructed on how to obtain medical services during the inmate orientation process and in the inmate handbook. Inmates shall submit a medical request form to the housing unit correctional deputy or the health-trained staff delivering medications, or a nurse, if appropriate.

Medical request forms should be available in languages representative of the population. Inmates who communicate in a language not available in printed form shall have access to interpreter services.

Inmates with disabilities should be provided with appropriate assistance or accommodation to ensure they are able to request health care services.

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Non-Emergency Health Care Requests and Services

The public safety correctional deputy shall ensure the reason for seeking medical attention is on the medical request form. If no reason is given, the correctional deputy shall encourage the inmate to indicate whether the matter is urgent or confidential. The correctional deputy shall forward all requests to our contract medical staff.

702.4 TRIAGE OF HEALTH CARE REQUESTS

Sick call shall be available to inmates on the same days that it is available to public in the community of Bridgeport and shall be performed by a qualified health care professional.

The frequency and duration of sick call should be sufficient to meet the needs of the inmate population but should be conducted at least weekly by a qualified health care professional. If an inmate's custody status precludes attendance at sick call, arrangements shall be made to provide sick call services in the place of the inmate's detention (15 CCR 1211).

702.5 GUIDELINES FOR ELECTIVE PROCEDURES OR SURGERY

The Responsible Physician and the Jail Commander shall work cooperatively to develop guidelines that govern elective procedures or surgery for inmates. The guidelines must include decision-making processes for elective procedures or surgery that is needed to correct a substantial functional deficit or an existing pathological process that threatens the well-being of the inmate over a period of time. Any discussion of this nature with the inmate should be conducted in a language easily understood by the inmate and should be carefully documented in the inmate's medical record. This record should be maintained in accordance with established records retention schedules.

702.6 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

703.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process for referring inmates who need health care or specialty care that is beyond the resources available in the facility. The policy includes guidelines regarding transportation under appropriate security provisions and the formulation of advance written agreements for around the clock or on-call availability of alternate services. Specialty care includes specialist-provided health care, such as nephrology, surgery, dermatology and orthopedics.

703.2 POLICY

It is the policy of this department that inmates have access to necessary hospitalization and specialty services for serious medical needs. This facility will provide, either directly or through contracted sources, specialty care and emergency medical services to inmates when the need is determined by the Responsible Physician (15 CCR 1206(b); 15 CCR 1206(c)).

703.3 REFERRAL TO OFF-SITE MEDICAL CARE

A qualified health care professional shall evaluate the inmate, and if indicated, shall recommend specialty appointments in writing on the order sheet in the inmate's medical record. A referral form should be completed and any supporting documentation attached. The written referral shall be reviewed and authorized, if appropriate, by the Responsible Physician.

A court order is generally required when an inmate requires medical or surgical treatment necessitating hospitalization. A court order is not required for an inmate in need of immediate medical or hospital care, but an application for a court order should be made as soon as practicable when the inmate's condition requires him/her to be gone from the facility more than 48 hours (Penal Code § 4011.5).

703.4 OFF-SITE COORDINATION

The qualified health care professional is responsible for recommending off-site medical and psychiatric care for inmates, coordinating outside appointments and notifying supervisory custody staff of off-site transportation needs. The Jail Commander should establish a written transportation procedure that ensures inmates are transported securely and in a timely manner for medical, mental health, dental clinic or other specialty appointments. The procedure shall include the secure transfer of medical information to the receiving health care service.

Any conflicts that arise regarding off-site consultation trips will be communicated by the correctional 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

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Referrals and Coordination of Specialty Care

be discussed and resolved between the Responsible Physician and the Jail Commander (15 CCR 1206(c); 15 CCR 1206(n)).

Emergency Health Care Services

704.1 PURPOSE AND SCOPE

The purpose of this policy is to establish plans and procedures for responding to medical emergencies in the facility when the level of medical or mental health services exceeds the licensure or certification of staff who are on-duty, and to define staff training requirements.

704.2 POLICY

It is the policy of this department that emergency medical, mental health and dental services are available 24 hours a day. These services may include off-site health care services.

704.3 PROCEDURES

The 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.

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- (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.

704.4 EMERGENCY PROCEDURES

The health services administrator or the authorized designee is responsible for ensuring the following information, equipment and personnel are available in the event an inmate requires emergency treatment (15 CCR 1206(c)):

- (a) A current list of names, addresses and telephone numbers of all persons and agencies to be notified in an emergency. The list should be available to all health care and custody staff at all times, and should be updated quarterly.
- (b) Emergency drugs, equipment and supplies should be readily available at all times and replenished after each use. An inventory control system should be in use to ensure the necessary supplies are present when needed and have not expired.
- (c) A physician, dentist and mental health professional should be available on-call 24 hours a day, seven days a week (this can include off-site health care services) and there should be a back-up health care services plan.
- (d) Ambulances should be accessed through the facility staff or by calling the appropriate emergency number. There should be a clear security plan in place for the transportation of inmates.
- (e) The Supervisor will be contacted and informed of any emergency as soon as practicable.
- (f) All decisions regarding medical treatment and the need for emergency transportation are to be made by the qualified health care professionals or health-trained custody staff.

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- (g) Whenever reasonably possible, the on-call health care service should be notified prior to transporting the inmate to the hospital or other emergency care. However, in the event of a life- or limb-threatening emergency, the inmate shall be sent to the hospital in the most expedient way possible, which may require notifying the specific health care service after the inmate has been transported.

704.5 FIRST-AID KITS

The Responsible Physician or the authorized designee is responsible for determining the contents, number, location and procedures for monthly inspections of all first-aid kits in the facility. The Responsible Physician shall also ensure that (15 CCR 1220):

- (a) The contents of each first-aid kit are:
 - 1. Approved by the Responsible Physician.
 - 2. Appropriate for its location.
 - 3. Arranged for quick use.
 - 4. Documented on the outside cover.
 - 5. Inventoried every month.
 - 6. Secured with a plastic tamper-proof seal.
 - (a) Once the seal has been broken, the kit should be taken to the medical unit so the contents can be inventoried and restocked.
- (b) Written protocols and training materials are developed for the use of medical supplies and equipment by health-trained custody staff.
- (c) Inspections and testing of supplies and equipment are documented and maintained in accordance with established records retention schedules.

704.6 TRAINING

The 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.

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- (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.

Health Care for Pregnant Incarcerated Persons

705.1 PURPOSE AND SCOPE

The purpose of this policy is to establish prenatal and postpartum health care services for incarcerated persons who are pregnant. Services may include assistance recovering from the effects of potentially unhealthy lifestyles, which could include tobacco use, alcohol and drug abuse or addiction, and a lack of previous adequate medical care. Because of unhealthy lifestyle choices prior to incarceration, many incarcerated person pregnancies are classified as high-risk. This policy is intended to protect the health of the pregnant person and the fetus.

705.2 POLICY

It is the policy of this department that a qualified health care professional should provide comprehensive prenatal and postpartum care for all pregnant persons during their incarceration.

All pregnant and postpartum incarcerated persons shall receive appropriate timely, culturally responsive, and medically accurate and comprehensive care, evaluation, and treatment of existing or newly diagnosed chronic conditions, including mental health disorders and infectious diseases (Penal Code § 4023.8).

705.3 BOOKING - PREGNANCY SCREENING

When booking an incarcerated person who is identified as possibly pregnant or capable of becoming pregnant, the following steps shall be taken:

- (a) All incarcerated persons shall be asked if they are pregnant. They shall be offered a voluntary pregnancy test upon intake or by request, within 72 hours of arrival at the jail and administered by medical or nursing personnel (Penal Code § 4023.8(a)).
 1. If a test is declined, the incarcerated person shall be asked to sign an Informed Refusal of Pregnancy Test form, and the form shall be filed in the incarcerated person's medical file.
- (b) Incarcerated persons confirmed to be pregnant shall, within seven days of arriving at the jail, be scheduled for a pregnancy examination with a physician, nurse practitioner, certified nurse midwife, or physician assistant and examined as provided by Penal Code § 4023.8(d).
- (c) Pregnant incarcerated persons who appear to be under the influence of or withdrawing from alcohol or other substances shall be referred to a qualified health care professional.
- (d) The Responsible Physician, in collaboration with facility staff, shall ensure the proper clinic visits are scheduled in accordance with appropriate medical standards as provided in Penal Code § 4023.8(e).
- (e) A medical record should be opened with a notation indicating pregnancy.
- (f) The incarcerated person should be interviewed by a qualified health care professional for the following information, which should be written in the medical record:

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1. Last menstrual period (LMP)
 2. Estimated date of conception (EDC)
 3. Estimated due date (40 weeks from EDC)
 4. Number of pregnancies (gravidity)
 5. Number of live births (parity)
 6. Therapeutic abortions (TAB)
 7. Spontaneous abortions (SAB), aka miscarriages
 8. Prenatal care history
 9. Current medications
 10. Any current adverse symptoms: vaginal bleeding or discharge, abdominal cramping or pain (if yes, notify on-site or on-call physician)
 11. High-risk factors, if known: drug or alcohol use/abuse, smoking, previous pregnancy problems, other medical problems (cardiac issues, seizures, diabetes/DM, hypertension/HTN)
 12. If use of an opioid or methadone is identified, notify the on-site or on-call physician for orders. The incarcerated person shall be offered medication-assisted treatment and shall be provided information on the risks of withdrawal (Penal Code § 4023.8(i)).
- (g) Each pregnant incarcerated person should have:
1. A completed special diet form ordering a pregnant diet.
 2. An appointment at the next available obstetric clinic if the person is 10 or more weeks gestation.
- (h) Each pregnant incarcerated person shall (Penal Code § 4023.8):
1. Have access to daily prenatal vitamins in accordance with medical standards of care.
 2. Be assigned to the lower bunk and lower-tier housing for those housed in a multitier housing unit.

705.4 COUNSELING AND TREATMENT REGARDING PROPER CARE

The Office will provide all necessary counseling and treatment to pregnant incarcerated persons to ensure they are receiving the proper care. To accomplish this, the following shall occur:

- (a) The directions of the obstetric specialist shall be followed throughout the pregnancy and postnatal period. No non-medical staff has the unilateral authority to change or overrule an order or care recommendation made by the Responsible Physician. The 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 incarcerated person's medical needs.

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- (b) The Responsible Physician shall be consulted immediately if a patient is under 10 weeks gestation and has medical concerns.
- (c) Any pregnant incarcerated person with medical problems that occur between scheduled obstetric appointments shall be seen by a qualified health care professional. If the qualified health care professional assesses the problem as urgent and a physician is not available on-site, the person shall be sent to the hospital for evaluation.
- (d) The incarcerated person shall be advised to notify health-trained custody staff immediately of the following:
 - 1. Vaginal bleeding
 - 2. Acute, persistent abdominal or pelvic pain and/or severe cramping
 - 3. Leaking fluid
 - 4. Decreased or no fetal movement
 - 5. Headache or blurred vision
 - 6. Rapid weight gain with swelling (edema)
 - 7. Abnormal vaginal discharge
 - 8. Symptoms of a urinary tract infection (UTI)
 - 9. Fever
- (e) Postpartum examinations and additional appointments shall be scheduled by the obstetric clinic as needed.
- (f) An incarcerated person shall have the right to summon and receive the services of any physician, nurse practitioner, certified nurse midwife, or physician assistant of the person's choice in order to determine pregnancy. The Jail Commander may develop reasonable rules and regulations governing the conduct of such examinations. If found to be pregnant, the incarcerated person is entitled to a determination of the extent of medical and surgical services needed from the medical professional of the person's choice. Expenses incurred by the services not provided by the Jail shall be borne by the incarcerated person (Penal Code § 4023.6).

705.5 RESTRAINTS

Incarcerated persons who are known to be pregnant or who are in labor shall not be placed in restraints except as provided in the Use of Restraints Policy and other policies related to medical treatment and transportation outside the secure facility.

705.5.1 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 incarcerated persons. The procedures shall be reviewed and updated at least every two years (15 CCR 1206).

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705.6 ABORTIONS

An incarcerated person who chooses to have an abortion shall be given access to abortion services and be requested to sign a statement acknowledging that the person has been provided the opportunity for related counseling and chooses to have an abortion. Any financial obligations for elective abortions will be handled consistent with state law as provided in Penal Code § 4011.1 and 15 CCR 1200. The jail shall provide necessary transportation and supervision for such services. Staff members who object to facilitating an incarcerated person's elective abortion (including arrangements, transportation, and security) should not be required to perform such duties.

705.6.1 STATE REQUIREMENTS FOR ABORTION

The Jail shall not confer authority or discretion to nonmedical staff to decide if a pregnant incarcerated person is eligible for an abortion. Conditions or restrictions on abortion access shall not be imposed. Impermissible restrictions include but are not limited to imposing gestational limits inconsistent with state law, unreasonably delaying access to the procedure, or requiring court-ordered transportation (Penal Code § 4028(a)).

If the pregnant incarcerated person decides to have an abortion, the person shall be offered, but not forced to accept, all due medical care and accommodations until no longer pregnant. A pregnant incarcerated person who decides to have an abortion shall be referred to a licensed professional as specified in Business and Professions Code § 2253(b) (Penal Code § 4023.8(c)).

705.6.2 REQUIRED POSTED NOTICE

The rights provided for pregnant incarcerated persons by Penal Code § 4023.6, Penal Code § 4023.8, and Penal Code § 4028 shall be posted in at least one conspicuous place that all incarcerated persons can access.

705.7 ADVISEMENT AND COUNSELING

Incarcerated persons who are pregnant shall be advised of the provisions of this policy manual, the Penal Code, and the standards established by the Board of State and Community Corrections related to pregnant incarcerated persons (Penal Code § 3407(e); 15 CCR 1058.5).

A qualified health care professional or counselor shall provide comprehensive and unbiased counseling and information to pregnant incarcerated persons regarding their options, including but not limited to prenatal health care, adoption, and abortion. Staff shall not urge, force, or otherwise influence a pregnant incarcerated person's decision (15 CCR 1206(f); Penal Code § 4023.5; Penal Code § 4023.8(b)).

Pregnant incarcerated persons shall also be referred to a social worker regarding options for feeding, placement, and care of the child after birth, including the benefits of lactation (Penal Code § 4023.8(k)).

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705.8 INCARCERATED PERSONS IN LABOR AND POSTPARTUM CARE

Pregnant incarcerated persons who are in labor or are presumed to be in labor shall be treated as an emergency and shall be transported in the least restrictive way possible to a hospital outside the jail (Penal Code § 4023.8(l)).

Pregnant incarcerated persons may have an approved support person present during labor, childbirth, and postpartum recovery while hospitalized (Penal Code § 4023.8(m)).

Incarcerated persons shall be given the maximum level of privacy possible during the labor and delivery process as provided in Penal Code § 4023.8(o).

Upon an incarcerated person's return to the jail, a physician, nurse practitioner, certified nurse midwife, or physician assistant shall provide a postpartum examination within one week from childbirth and as needed for up to 12 weeks postpartum, and shall determine whether the incarcerated person may be cleared for full duty or if medical restrictions are warranted. Postpartum incarcerated persons shall be given at least 12 weeks of recovery after childbirth before they are required to resume normal activity (Penal Code § 4023.8).

705.8.1 INCARCERATED PERSON ACCESS TO NEWBORN CARE

The Responsible Physician should ensure that an incarcerated person is provided access to newborn care that includes access to appropriate assessment, diagnosis, care, and treatment for infectious diseases that may be transmitted from the incarcerated person to the infant (Penal Code § 4023.8(f)).

705.8.2 NOTICE OF SERVICES AFTER INCARCERATION

The Responsible Physician should ensure that eligible incarcerated persons who give birth after incarceration are provided notice of, access to, and written application for community-based programs serving pregnant, birthing, or lactating incarcerated persons (Penal Code § 4023.8(j)).

Health Authority

707.1 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).

707.2 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.

707.3 SELECTION PROCESS

The Sheriff or the authorized designee shall select a health authority using an existing department procurement or selection process. The individual or organization selected shall be designated as the health authority for inmate health care on behalf of the facility.

Aside from any monetary or term considerations, the contract between the Office, and the selected individual or organization shall minimally include:

- (a) Language establishing the scope of services being contracted and the type of health care service needed.
- (b) Job descriptions, minimum qualifications, and performance expectations for contract personnel.
- (c) Language requiring the contractor to develop appropriate measures and review processes for assessing the quality, effectiveness, and timeliness of the services provided and periodically reporting those findings to the facility.
- (d) Identification of a Responsible Physician, who shall serve as the medical authority on treatment matters requiring medical expertise and judgment.
- (e) Language regarding the minimum frequency that the health authority shall be present at the facility.
- (f) The roles and responsibilities of staff in ensuring that the contractor may adequately deliver services in a safe and secure environment.

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- (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)).

707.4 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 department 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).

707.5 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).

Transfer Screening

708.1 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.

708.2 POLICY

It is the policy of this department 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)).

708.3 TRANSFERS

Any inmate being transferred to another correctional or health care facility will have a review of their health care file prior to transfer as described below.

The medical screening should include:

- (a) A determination of whether the inmate is being treated for a medical, mental health or dental problem.
- (b) A determination of whether the inmate has any apparent, current medical, mental health or dental needs or complaints.
- (c) What medication, if any, the inmate is presently prescribed.
- (d) Whether the inmate has any physical deformities or special daily living assistance needs.

Whether the inmate has any pending follow-up appointments or requirements.

Completed discharge summaries, including the medical screening results, shall accompany inmates being transferred to another department's jurisdiction to ensure that the receiving health care service can assume and continue necessary care. A release of information authorization is not required.

- Current health conditions
- Current treatments and medications
- Upcoming appointments and diagnostic studies

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- Allergies
- Copies of any health information that is critical to continuity of care

If the receiving facility requests a copy of the medical record, it will be supplied within five working days.

The discharge summary and any related medical records being transferred shall be placed in a file or envelope that maintains the confidentiality of the inmate's medical information. The transporting personnel shall be provided written instructions regarding medication or health interventions, including necessary precautions that are required en route.

708.4 RECEIVING TRANSFERRED INMATES

When an inmate being transferred to this facility arrives without a medical transfer packet from another facility, the inmate shall be medically screened and receive a comprehensive health appraisal in accordance with the Medical Screening Policy and Health Appraisals Policy. The inmate should be asked if he was under the care of a doctor at the facility that he was just transferred from and whether he/she has any outstanding appointments as a result of that care. If the inmate answers that he/she was being seen for a medical issue, he/she shall be seen and evaluated at the next sick call to discuss and arrange continued treatment from our medical staff.

Medical Screening

709.1 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.

709.2 POLICY

It is the policy of this department 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).

709.3 ELEMENTS OF MEDICAL SCREENING

The medical screening shall be performed by health services personnel when available, but may also be performed by health-trained correctional staff. The Responsible Physician, in cooperation with the Jail Commander, shall establish protocols for use by health-trained correctional staff during the medical screening. All completed medical screenings should be forwarded to the Responsible Physician. A review of any positive finding shall be performed by a qualified health care professional.

Regardless of training, no 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.

709.3.1 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

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communicable diseases, or special health requirements and/or dietary needs (15 CCR 1051)

- Acute dental problems
- Past and recent serious communicable disease symptoms (e.g., chronic cough, coughing up bloody sputum, lethargy, weakness, weight loss, loss of appetite, fever, night sweats) (15 CCR 1051)
- Mental illness, including psychiatric hospitalizations within the last three months
- Gender issues
- History of or current suicidal ideation
- Acute allergies
- History of or current prescription or illegal drug use, including the time of last use
- History or current symptoms of substance abuse withdrawal
- Current, recent, or suspected pregnancy; any history of gynecological problems and present use and method of birth control
- Appearance or history of developmental disability, body deformities, or other physical abnormalities
- 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.

709.3.2 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

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- Pain - requires painful stimulation to respond
- Unresponsive - does not respond
- Ease of movement (e.g., body deformities, gait)
- Breathing (e.g., persistent cough, hyperventilation)
- Skin (e.g., lesions, jaundice, rashes, infestations, bruises, scars, recent tattoos, needle marks or other indications of drug abuse)
- Any other observable health symptoms

The 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.

709.3.3 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.

709.4 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

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- Intoxication to a degree that the individual cannot speak coherently or stand or walk unaided
- Recent drug overdose
- Suspected or known complications of pregnancy
- Active seizures
- Suspected or known complications of diabetes
- Exhibits behavior indicating a potential danger to themselves or others
- Active tuberculosis or other serious contagious diseases
- Actively suicidal
- Any other medical condition, which, in the opinion of the booking personnel, should be urgently referred for evaluation by medically trained personnel

Inmates with these medical conditions are not suitable for admission to the facility until medically cleared by a qualified health care professional. This department 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

709.5 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).

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709.5.1 MEMBERS CONDUCTING HEALTH APPRAISALS

Medical screening should be completed by licensed health personnel or trained facility staff, with documentation of staff training regarding site-specific forms with appropriate disposition based on responses to questions and observations made at the time of screening (15 CCR 1207).

709.5.2 TELEHEALTH

Telehealth may be incorporated into procedures used to identify and evaluate inmates who have a mental disorder (15 CCR 1052).

Mental Health Services

710.1 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.

710.1.1 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.

710.2 POLICY

It is the policy of this department 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).

710.3 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.

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710.4 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.
 - 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

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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

711.1 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 staff or health-trained custody staff using an instrument developed by qualified health care professionals. The initial mental health screening takes place at the time of booking, and is for the safety of the inmate and the general population. It helps the custody staff to make appropriate classification and housing decisions and to ensure that the treatment and intervention needs of the inmate are met.

711.2 POLICY

It is the policy of this department 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)).

711.3 MENTAL HEALTH SCREENING

The initial screening is designed to identify whether mental health conditions exist that require immediate or ongoing intervention. The screening shall be performed prior to the inmate being placed in general housing and should include:

- (a) Inquiry into whether the inmate is or has:
 - 1. Thoughts or history of suicidal behavior.
 - 2. Been prescribed or is taking psychotropic medication or antidepressants.
 - 3. Been treated for mental health issues.
 - 4. A history of psychiatric treatment.
 - 5. A history of treatment for substance abuse or been treated for substance abuse.
- (b) Any observations of:
 - 1. Appearance and behavior.
 - 2. Abuse, injury or trauma.
 - 3. Symptoms of aggression, depression, psychosis.
- (c) A determination of whether the inmate is cleared for or referred to:
 - 1. General housing
 - 2. General housing with mental health referral

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Mental Health Screening and Evaluation

3. Mental health emergency treatment

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.

711.4 MENTAL HEALTH APPRAISAL

All new inmates shall receive a mental health appraisal by a qualified mental health professional within 14 days, if the screening officer believes there is a need or if the inmate states that he/she is under the care of mental health services. Mental health appraisals should include, but not necessarily be limited to the following assessments:

- Mental health status
- Suicide potential
- Violence potential
- Previous psychiatric treatment
- Any history of treatment with psychotropic medication or antidepressants
- Substance abuse or treatment for substance abuse
- Educational history
- Sexual abuse victimization (28 CFR 115.81)
- Predatory behavior or perpetrated sexual abuse (28 CFR 115.81)

711.5 MENTAL HEALTH REFERRALS

Qualified mental health staff should administer a complete and thorough evaluation of inmates referred for treatment as soon as practicable but no later than 14 days from the referral. The evaluation should include:

- Review of the inmate's screening and appraisal information.
- Observations of the inmate's behavior.
- Information gathered from interviews and testing to determine the inmate's mental health condition, intellect, personality, problems and ability to deal with a custody environment.
- Collection of the Inmate's mental health history.

Following the evaluation, a plan of treatment and maintenance, which may include a complete psychological evaluation, should be developed to meet the inmate's needs.

Special Needs Medical Treatment

712.1 PURPOSE AND SCOPE

This purpose of this policy is the proper treatment and management of inmates with chronic diseases and special needs. This is accomplished by utilizing nationally recognized, generally accepted clinical guidelines and establishing communication between qualified health care professionals and custodial personnel.

712.1.1 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.

712.2 POLICY

It is the policy of this department 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)).

712.3 CLINICAL PRACTICE GUIDELINES

The Responsible Physician or the authorized designee is responsible for establishing and annually reviewing clinical protocols to ensure consistency with the National Clinical Practice Guidelines.

The clinical protocols for the management of chronic disease and special needs include, but are not limited to, the following:

- Asthma
- Communicable diseases

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- 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

712.4 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.

712.5 CHRONIC CARE PROGRAM

- (a) Newly incarcerated inmates shall receive a medical screening. This screening includes the documentation of any acute or chronic health problems or injuries, special needs and any medications or treatments the inmate is currently receiving.

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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 Supervisor and the housing officer to ensure the inmate is properly housed.
 3. Current medications being taken by the inmate should be verified and continued as deemed appropriate by the Responsible Physician.
 4. A health assessment shall be completed within 14 days of incarceration and a physical examination conducted within six months of incarceration.
 5. The status of a special needs inmate should be evaluated, at minimum, every 90 days to determine the need for the continued designation.
- (b) The 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.

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- (g) Critical specialty medical procedures or treatment, such as dialysis, which cannot be provided at the Mono County Sheriff's Department do not require a court order unless the care is expected to prevent the inmate from returning within 48 hours (Penal Code § 4011.5).
- (h) When inmates are sent out of this facility for emergency or specialty treatment, written information regarding the inmate's current medical status and treatment should accompany the inmate. Upon return to the facility, treatment recommendations from outside health care services should be reviewed by the Responsible Physician or the authorized designee for any changes in the custodial environment or in-house treatment plan.
- (i) Inmates identified as developmentally disabled shall be considered for discharge planning services.
 - 1. 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.
- (j) With the inmate's written consent, the health services staff should:
 - 1. Share necessary information with outside health care services.
 - 2. Arrange for follow-up appointments.
 - 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.
- (k) Contacts with community providers should be documented via an administrative note in the patient's health record.
- (l) Patients with serious mental health issues, including those receiving psychotropic medication, will be informed about community options for continuing treatment and provided with follow-up appointments when possible.
- (m) Medications should be provided as appropriate.
- (n) The Responsible Physician is responsible for ensuring that local site-specific procedures facilitate discharge planning.

Communicable Diseases

713.1 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.

713.1.1 DEFINITIONS

Definitions related to this policy include:

Aerosol transmissible disease (ATD) - A disease or pathogen for which droplet (whooping cough, influenza, streptococcus) or airborne (measles, chickenpox, tuberculosis) precautions are required.

Aerosol transmissible disease (ATD) exposure - Any event in which all of the following has occurred:

- An employee has been exposed to an individual who has or is suspected to have an ATD, or the employee is working in an area or with equipment that is reasonably expected to contain aerosol transmissible pathogens associated with an ATD.
- The exposure occurred without the benefit of applicable exposure controls required by this section.
- It reasonably appears from the circumstances of the exposure that transmission of disease is likely sufficient to require medical evaluation.

Airborne precautions - Include the use of an Airborne Infection Isolation Room (AIIR) that meets the American Institute of Architects/Facility Guidelines Institute (AIA/FGI) standards for AIIRs, for

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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.

713.2 POLICY

It is the policy of this department to maintain an effective program that focuses on the identification, education, immunization, prevention, surveillance, diagnosis, medical isolation (when indicated), treatment, follow-up and proper reporting to local, state and federal agencies of communicable

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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)).

713.2.1 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.

713.2.2 PROCEDURES

The ECO shall be responsible for establishing, implementing and maintaining effective written procedures for the following:

- (a) Incorporating the recommendations contained in the CDC's "Respiratory Hygiene/ Cough Etiquette in Healthcare Settings."
- (b) Screening and referring cases and suspected cases of ATD to appropriate facilities within five hours of identification.
- (c) Creating a multidisciplinary team, including the Responsible Physician, and security and administrative representatives, who will meet at least quarterly to review and discuss communicable disease issues and activities. The ECO shall retain minutes of these meetings in accordance with established records retention schedules. The ECO also shall coordinate with the local public health entity on appropriate policy and procedure.
- (d) Conducting an assessment on the incidence and prevalence of tuberculosis (TB) within the facility's population and the surrounding community. If the statistics indicate a risk, the ECO shall develop a written plan that addresses the management of TB, from testing to follow-up care.
- (e) Communicating with employees, other employers, and the local health officer regarding the suspected or diagnosed infectious disease status of referred inmates, including notification of exposed employees.

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- (f) Reducing the risk of ATDs through the ECP and reviewing the plan at least annually.
- (g) Reducing the risk of exposure to BBPs (HIV, hepatitis).
- (h) Providing a system of medical services for employees who may become exposed to communicable diseases during the course of their employment.
- (i) Ensuring that all employees who have occupational exposure to communicable diseases participate in a training program at the time of their initial assignment, at least annually thereafter, and any time there is a change in working conditions.
- (j) Making all exposure and treatment plans available for employees, employee representatives, and NIOSH review.
- (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 department 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 department website (Health and Safety Code § 1797.188).
- (n) Coordinating with the Department of Human Resources to provide required notices to members regarding COVID-19 exposures (Labor Code § 6409.6).

713.3 COMMUNICABLE DISEASE PROGRAM COMPONENTS

713.3.1 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.

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- (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.

713.3.2 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)).

713.3.3 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)).

- (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.

713.3.4 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.

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- (c) The Jail Commander shall be apprised of any medical situation that raises the risk of disease level for inmates, correctional officers or any other staff members.

713.3.5 EMPLOYEE TRAINING

The Responsible Physician or the authorized designee shall provide education to all correctional staff who have contact with infected inmates 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.

713.3.6 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.).

713.3.7 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.

713.3.8 TRANSMISSION-BASED PRECAUTIONS

Transmission-based precautions may be needed in addition to universal precautions for selected patients who are known or suspected to harbor certain infections. These precautions are divided into three categories that reflect the differences in the way infections are transmitted. Some diseases may require more than one category.

- (a) Airborne precautions are designed to prevent the spread of ATDs, which are transmitted by minute particles called droplet nuclei or contaminated dust particles. These particles, because of their size, can remain suspended in the air for long periods

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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).
 1. All staff should wear masks within 3 feet of the inmate. Inmate movement should be restricted to the minimum necessary for effective facility operations. The inmate should wear a mask during transport.
- (c) Contact precautions are designed to prevent the spread of organisms from an infected inmate through direct (touching the inmate) or indirect (touching surfaces or objects the inmate touched) contact. Examples of inmates who might be placed in contact precautions are those infected with the following:
 1. Antibiotic-resistant bacteria
 2. Hepatitis A
 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 shall receive training on the disease transmission process and will be provided with appropriate barrier devices.

Precautions for Inmate Contact and Transportation

| | GLOVES | SURGICAL MASKS | N95 MASKS | ISOLATION GOWNS |
|----------------|---------------|-----------------------|------------------|------------------------|
| Contact | | | | |
| Inmate | No | No | No | No |
| Personnel | Yes | No | No | Yes |
| Droplet | | | | |
| Inmate | No | Yes | No | No |
| Personnel | No | Yes | No | Yes |

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| | | | | |
|-----------------|----|-----|-----|----|
| Airborne | | | | |
| Inmate | No | Yes | No | No |
| Personnel | No | No | Yes | No |

713.3.9 ENVIRONMENTAL HEALTH AND SAFETY

The Responsible Physician or the authorized designee shall conduct a monthly inspection of areas where health services are provided to verify the following:

- The equipment is inspected and maintained to the manufacturer's recommendations.
- The area is clean and sanitary.
- The appropriate measures are being taken to ensure the unit is occupationally and environmentally safe.

713.3.10 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.

713.4 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 parasitological 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 correctional 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.

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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:
 - (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.

713.5 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.

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Eating, drinking, smoking, applying lip balm and handling contact lenses shall be prohibited in areas where the potential for exposure exists.

713.5.1 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.

713.5.2 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.

713.5.3 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.

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713.5.4 DECONTAMINATION OF SKIN AND MUCOUS MEMBRANES

Personnel shall wash their hands as soon as possible following the removal of potentially contaminated gloves. Antibacterial soap and warm water or an approved disinfectant shall be used, paying particular attention to the fingernails.

If an employee's intact skin contacts someone else's blood or body fluids or other potentially infectious materials, the employee shall immediately wash the exposed part of his/her body with soap and warm water and/or an approved disinfectant as soon as possible. If the skin becomes grossly contaminated, body washing shall be followed by an approved hospital strength disinfectant. If large areas of the employee's skin are contaminated, the employee shall shower as soon as reasonably possible, using warm water and soap and/or an approved disinfectant. Medical treatment should be obtained.

Contaminated non-intact skin (e.g., injured skin, open wound) shall be cleaned using an approved disinfectant and then dressed or bandaged as required. Medical treatment is required. All hand, skin and mucous-membrane washing that takes place shall be done in the designated cleaning or decontamination area. Cleaning shall not be done in the kitchen, bathrooms or other locations not designated as a cleaning or decontamination area.

713.5.5 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.

713.5.6 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.

713.6 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

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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.

713.7 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.

713.7.1 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)).

713.7.2 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.

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713.7.3 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.
- 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.

713.7.4 COUNSELING

The Office shall provide the exposed employee (and his/her family if necessary) the opportunity for counseling and consultation.

713.7.5 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)).

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713.7.6 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.
- (e) Under certain circumstances, a court may issue a search warrant for testing an adult when an employee of the Mono County Sheriff's Department qualifies as a crime victim.

713.7.7 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.

713.7.8 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:

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- (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.

Aids to Impairment

714.1 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 Mono County Sheriff's Department 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.

714.1.1 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.

714.2 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).

714.3 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).

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- (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.

714.4 REQUESTS FOR MEDICAL AND DENTAL PROSTHESES

All requests for new or replacement medical or dental prostheses shall be individually evaluated by the Responsible Physician or dentist and reviewed for approval by the Jail Commander. Considerations for approval shall be based upon:

- Medical needs of the inmate.
- The anticipated length of incarceration.

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- The safety and security of the facility.

Detoxification and Withdrawal

715.1 PURPOSE AND SCOPE

Significant percentages of inmates have a history of alcohol and/or drug abuse. Newly incarcerated individuals may enter the facility while under the influence of a substance or they may develop symptoms of alcohol or drug withdrawal. This policy is intended to ensure that the staff is able to recognize the symptoms of intoxication and withdrawal from alcohol or drugs, and that those inmates who are intoxicated or experiencing withdrawal are provided appropriate medical treatment.

This policy also identifies protocols to be used by qualified health care professionals. These protocols are appropriate for inmates who are under the influence of alcohol or drugs or who are experiencing withdrawal from any type of substance abuse.

715.1.1 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.

715.2 POLICY

Withdrawal from alcohol or drugs can be a life-threatening medical condition requiring professional medical intervention. It is the policy of this department 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).

715.3 STAFF RESPONSIBILITY

Staff should remain alert to signs of drug and alcohol overdose and withdrawal. These symptoms include, but are not limited to, sweating, nausea, abdominal cramps, anxiety, agitation, tremors, hallucinations, rapid breathing and generalized aches and pains. Any staff member who suspects

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that an inmate may be suffering from overdose or experiencing withdrawal symptoms shall promptly notify the Supervisor, who shall ensure that a qualified health care professional is promptly notified.

715.4 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.

715.5 PROCEDURE

Inmates who are observed experiencing severe, life-threatening intoxication (overdose) or withdrawal symptoms will be promptly seen by a physician or referred to an off-site emergency facility for treatment. Detoxification shall be conducted under medical supervision at the facility or in a hospital or community detoxification center under appropriate security conditions.

If the qualified health care professional determines that an inmate is at risk for progression to a more severe level of withdrawal, the inmate will be appropriately housed in an area where he/she can be kept under constant observation by qualified health care professionals or trained correctional staff.

715.6 WITHDRAWAL AND DETOXIFICATION PROTOCOLS

Protocols are available to the qualified health care professionals to guide the care and treatment of individuals who are intoxicated or experiencing drug and/or alcohol withdrawal. These protocols, which have been developed and approved by the Responsible Physician, fall within nationally accepted guidelines and are reviewed annually.

When dealing with inmates who are in a custody situation, qualified health care professionals shall utilize detoxification protocols in accordance with local, state and federal laws.

No direct supervision is required at the time of identifying and initiating care. Overall supervision is provided by the Responsible Physician. Qualified health care professionals shall evaluate and provide care to patients utilizing written procedures and/or physician orders.

715.7 ALCOHOL WITHDRAWAL SYMPTOMS CHART

The following chart describes typical symptoms of mild, moderate and severe withdrawal. It is to be used as a guide for determining when to refer inmates to a qualified health care professional. Not all symptoms are always present.

| | MILD | MODERATE | SEVERE (Delirium Tremens) |
|--|-------------|-----------------|-------------------------------------|
| | | | |

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| | | | |
|-----------------------|--------------------------------------|---|--|
| ANXIETY | Mild restlessness and anxiety | Obvious motor restlessness | Extreme restlessness and agitation with appearance of intense fear is common |
| APPETITE | Impaired appetite | Marked anorexia | Often rejects all food and fluid except alcohol |
| BLOOD PRESSURE | Normal or slightly elevated systolic | Usually elevated systolic | Elevated systolic and diastolic |
| CONFUSION | Oriented, no confusion | Variable confusion | Marked confusion and disorientation |
| CONVULSIONS | No | May occur | Severe convulsions are common |
| HALLUCINATIONS | No hallucinations | Often vague, transient, visual and auditory hallucinations and delusions, often with insight, often occurring only at night | Visual and occasional auditory hallucinations, usually of fearful or threatening content. Misidentification of persons and frightening delusions relating to hallucinatory experiences |
| MOTOR CONTROL | Inner "shaky" | Visible tremulousness | Gross uncontrollable shaking |
| NAUSEA | Nausea | Nausea and vomiting | Dry heaves and vomiting |
| PULSE | Tachycardia | Pulse 100-120 | Pulse 120-140 |
| SLEEP | | Marked insomnia and nightmares | Total wakefulness |
| SWEATING | Restless sleep or insomnia | Obvious | Extreme |

Clinical Decisions

717.1 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.

717.1.1 DEFINITIONS

Definitions related to this policy include:

Clinical decisions - The process of formulating a differential diagnosis with information gathered from an inmate's medical history and physical and mental examinations, developing a list of possible causes and ordering tests to help refine the list or identify a specific disease.

Differential diagnosis - A systematic method of identifying unknowns or diagnosing a specific disease using a set of symptoms and testing as a process of elimination.

717.2 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)).

717.3 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.

717.4 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 Custody Staff

718.1 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.

718.2 POLICY

It is the policy of this department 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). Additionally, in facilities that do not have full-time qualified health care professionals, the Jail Commander shall appoint a staff member to act as a liaison to coordinate health care delivery in the facility under the direction of the Responsible Physician.

718.3 DUTIES OF THE HEALTH-TRAINED STAFF

The Jail Commander or the authorized designee, in coordination with the Responsible Physician, shall be responsible for developing a job description for health-trained staff positions. 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.

718.4 TRAINING

The Jail Commander, Training Manager and the Responsible Physician shall be jointly responsible for developing a training curriculum for the health-trained staff positions and for the delivery of that training, which shall include:

- Instruction on proper action in the case of a medical emergency.
- Documentation requirements.
- Appropriate triage of health care requests and follow-up.
- Confidentiality of health information.

718.5 UNREASONABLE BARRIERS

No member of the Mono County Sheriff's Department 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:

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- (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.

Licensure, Certification, and Registration Requirements

719.1 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.

719.2 POLICY

It is the policy of this department 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).

Suicide Prevention and Intervention

720.1 PURPOSE AND SCOPE

This policy establishes the suicide prevention and intervention program to identify, monitor and, when necessary, provide for emergency response and treatment of inmates who present a suicide risk while incarcerated at the department 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.

720.2 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 correctional deputy.

Recommendations for modification to suicide training should be directed to the Jail Commander, who shall review the recommendations and approve, if appropriate.

720.3 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

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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).

720.4 SUICIDE WATCH

Inmates should only be housed on suicide watch with the approval of a qualified health care professional and the Supervisor. If a qualified health care professional is not present in the jail, the 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. Correctional Deputy 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 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 correctional 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.

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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.

720.4.1 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).

720.4.2 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).

720.5 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.

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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 correctional 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.

720.5.1 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 Supervisor and staff to apprise them of 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.

720.6 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 correctional deputy should ensure that the suicide threat or other danger is communicated to personnel at the receiving facility.

Inmate Death - Clinical Care Review

721.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the actions and notifications required in the event of an in-custody death and the medical care received by the inmate. The policy requires that a review of all in-custody deaths be conducted to assess the appropriateness of the clinical care provided and the effectiveness of the facility's policies and procedures.

721.1.1 DEFINITIONS

Definitions related to this policy include:

Administrative review - An assessment of the facility's emergency response actions surrounding the death of an inmate. The purpose of the administrative review is to identify areas where operations, policies and procedures may be improved.

Clinical mortality review (CMR) - An assessment of the medical condition of the inmate prior to treatment, the clinical care provided by contractors and the circumstances of the death. The purpose of the CMR is to identify areas of patient care or system policies and procedures that may be improved.

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.

721.2 POLICY

It is the policy of this department that all in-custody deaths are reviewed to determine the appropriateness of the clinical care provided, to determine whether existing policies are appropriate or if revision is necessary and to identify any other issues associated with the circumstances of the death. A postmortem examination should be performed according to the laws of the jurisdiction if the cause of death is unknown, if the death occurred under suspicious circumstances or if the inmate was not under current medical care (15 CCR 1046(a)).

721.3 NOTIFICATIONS

In the event of an in-custody death, all authorities with jurisdiction, including the Coroner or the authorized designee shall immediately be notified by the Jail Commander or the authorized designee at the time of 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.

Continuation of Care

722.1 PURPOSE AND SCOPE

The purpose of this policy is to establish and maintain a proactive health system in the facility that fosters the continuation of health care needs that, if discontinued, would have a negative effect on the health of the incarcerated person. The sole objective is to maintain or improve the health of the incarcerated persons. This policy is intended to ensure that incarcerated persons receive health services in keeping with current community standards as ordered by qualified health care professionals.

722.2 POLICY

It is the policy of this department that all incarcerated persons shall have access to the continuation of care for a health issue, provided the treatment plan meets community standards. The incarcerated person's health care needs will be assessed by qualified health care professionals and continued as determined or referred after release (15 CCR 1206.5(a); 15 CCR 1210).

722.3 CONTINUATION OF CARE

The Jail Commander is responsible for coordinating with the Responsible Physician to ensure that all incarcerated persons receive appropriate health care, including but not limited to:

- (a) Newly booked incarcerated persons shall have a medical screening as part of the booking and classification process. This screening includes documentation of acute or chronic health issues or conditions, existing injuries, and medications or treatments the incarcerated person is currently receiving.
 - 1. Any prior 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) Continuation of birth control measures, upon request by the incarcerated person, as prescribed by a physician, nurse practitioner, certified nurse midwife, or physician assistant (Penal Code § 4023.5).
- (d) Individual treatment plans that are used to guide treatment. The format for planning may vary but should include, at a minimum:
 - 1. The frequency of follow-up for medical evaluation and adjustment of treatment modality.
 - 2. The type and frequency of diagnostic testing and therapeutic regimens.
 - 3. When appropriate, instructions about diet, exercise, medication, and adaptation to the correctional environment.

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4. Custody staff is informed of the treatment plan when necessary to ensure coordination and cooperation in the ongoing care of the incarcerated person.
 - (e) Reasonable effort should be made to obtain information and records relating to previous health care professionals, with the consent of the incarcerated person, if the incarcerated person is currently under medical care.
 - (f) Upon transfer to another facility, a medical discharge summary of the incarcerated person's current condition, medications, and treatment plan will be forwarded in a sealed envelope (to maintain confidentiality) to the receiving facility.
 - (g) Response to requests for health information from medical facilities and health care professionals, with the incarcerated person's written consent.
 - (h) When incarcerated persons are sent out of the facility for emergency or specialty medical treatment, written information regarding the incarcerated person's reason for transfer, pertinent medical problems, and list of current medications should be sent with the incarcerated person and may be given to those providing care upon request. The name and telephone number of a contact person the medical facility can call should be included with the patient's health information. Upon the incarcerated person's return to the facility, treatment recommendations should be reviewed by the Responsible Physician or the authorized designee and appropriate plans should be made for continuing care in the facility based on the treating facility's diagnosis, recommended medications, and other treatment.
 - (i) Upon release from the facility, incarcerated persons should be given written instructions for the continuation of care, including but not limited to:
 1. The name and contact information of health care facilities for follow-up appointments.
 2. Prescriptions and/or an adequate supply of medication for those with chronic medical or psychiatric conditions.

Informed Consent and Right to Refuse Medical Care

723.1 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.

723.1.1 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.

723.2 POLICY

It is the policy of this department 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).

723.3 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.

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723.4 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.

723.4.1 STERILIZATION

This department 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 department shall provide psychological consultation before and after the procedure, as well as the appropriate medical follow-up (Penal Code § 3440(c)).

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The Records Supervisor 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)).

723.4.2 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.

723.5 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

724.1 PURPOSE AND SCOPE

The purpose of this policy is to establish 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.

724.1.1 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).

724.2 POLICY

It is the policy of this department 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.

724.3 INITIATING A HEALTH RECORD

Following the receiving screening process, the Intake correctional deputy shall have the inmate fill out a medical request who requires or requests additional health care. The health services administrator shall be responsible for developing and implementing procedures for standardized record formatting (Title 15 CCR § 1205 et seq.).

724.4 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:

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- (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

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will propose related policies and procedures and other activities designed to facilitate proper documentation of health care and access to records.

724.4.1 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).

724.5 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.

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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.

724.6 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.

724.7 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

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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.

724.8 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.

724.9 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

725.1 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.

725.2 POLICY

It is the policy of this department that effective communication shall occur between the Jail Commander and the treating qualified health care professionals regarding any significant health issues of an inmate. All health issues should be considered during classification and housing decisions in order to preserve the health and safety of the occupants of this facility.

When a qualified health care professional recognizes that an inmate will require accommodation due to a medical or mental health condition, custody personnel shall be promptly notified either verbally or in writing.

The Jail Commander shall be responsible for establishing measurable goals relating to processes that enhance good communication between the qualified health care professionals and the custody staff. The Jail Commander should also establish the desired performance objectives relating to practices that support good communication between the qualified health care professionals and the custody staff. The Jail Commander should review the documents annually for any necessary revisions or updates in support of continuous improvement in the delivery of health care services.

725.3 MANAGING SPECIAL NEEDS INMATES

Upon an inmate's arrival at the facility, qualified 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 Supervisor and the housing correctional 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.

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- (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

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10. Developmentally disabled

725.4 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.

725.5 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.

Oral Care

726.1 PURPOSE AND SCOPE

The intent of this policy is to ensure that inmates have access to dental care and treatment for serious dental needs. While the focus of this policy is primarily on urgent and emergent dental care, as with medical or mental health care, dental care is available based upon patient need.

726.1.1 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.

726.2 POLICY

It is the policy of this department 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).

726.3 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

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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.

Pharmaceutical Operations

727.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the procedures and protocols under which the facility must manage a pharmaceutical operation in order to comply with federal, state and local laws that govern prescribing and administering medication.

727.1.1 DEFINITIONS

Definitions related to this policy include:

Administration - The act of giving a single dose of a prescribed drug or biological substance to an inmate. Administration is limited to qualified health care professionals and health-trained custody staff members in accordance with state law.

Controlled substances - Medications classified by the Drug Enforcement Administration (DEA) as Schedule II-IV (21 USC § 812).

Delivery - The act of providing a properly labeled prescription container (e.g., a dated container that includes the name of the individual for whom the drug is prescribed, the name of the medication, dose and instructions for taking the medication, the name of the prescribing physician and expiration dates). Under these circumstances, a single dose at a time can be delivered to the inmate, according to the written instructions, by any qualified health care professional or health-trained custody staff member.

Dispensing - Those acts of processing a drug for delivery or administration to an inmate pursuant to the order of a qualified health care professional. Dispensing consists of:

- Comparing directions on the label with the directions on the prescription or order to determine accuracy.
- Selection of the drug from stock to fill the order.
- Counting, measuring, compounding or preparing the drug.
- Placing the drug in the proper container and affixing the appropriate prescription label to the container.
- Adding any required notations to the written prescription.

Dispensing does not include the acts of distributing, delivery or administration of the drug. The function of dispensing is limited to pharmacists and qualified health care professionals.

Distributing - The movement of a drug, in the originally labeled manufacturer's container or in a labeled pre-packaged container, from the pharmacy to a health care services area.

Dose - The amount of a drug to be administered at one time.

Drug - An article recognized in the United States Pharmacopoeia and National Formulary (USP-NF), the Homeopathic Pharmacopoeia of the United States or any supplement that is intended for

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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.

727.2 POLICY

It is the policy of this department 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).

727.3 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 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

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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.

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- (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.

727.4 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 Supervisor of all known medication errors in a timely manner. Medication error reports shall be completed on all known medication errors.

727.5 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

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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, housing location and 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

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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.

727.6 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.

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- (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.

727.7 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.

727.8 TRAINING

All health-trained custody staff members authorized to deliver, administer and provide medication assistance shall be trained by jail training correctional deputy's on the administration of medication.

Release Planning

728.1 PURPOSE AND SCOPE

This department 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.

728.1.1 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.

728.2 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.

Privacy of Care

729.1 PURPOSE AND SCOPE

This policy recognizes that inmates have a right to privacy and confidentiality regarding their health-related issues. It also recognizes inmates' right to health care services that are provided in such a manner as to ensure that privacy and confidentiality, and encourage inmates use and trust of the facility's health care system.

729.1.1 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.

729.2 POLICY

It is the policy of this department 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.

729.3 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.

729.4 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.

729.5 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 Mono County Sheriff's Department 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. 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

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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.

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Supervisors shall review SDS information in their work areas semiannually to determine if the information is current and that appropriate training has been completed. Upon review, a copy of the SDS file and all logs shall be forwarded to the Maintenance Supervisor or the authorized designee.

800.4.3 SDS RECORDS MASTER INDEX

The Maintenance Supervisor or the authorized designee will compile a master index of all hazardous materials in the facility, including locations, along with a master file of SDS information. He/she will maintain this information in the safety office (or equivalent), with a copy to the local fire department. Documentation of the semiannual reviews will be maintained in the SDS master file. The master index should also include a comprehensive, current list of emergency phone numbers (e.g., fire department, poison control center) (29 CFR 1910.1200(g)(8)).

800.4.4 CLEANING PRODUCT RIGHT TO KNOW ACT

In addition to SDS information, printable information regarding ingredients of certain products used by staff and inmates shall be readily accessible and maintained in the same manner as an SDS (Labor Code § 6398.5; Health and Safety Code § 108952(f); Health and Safety Code § 108954.5(c)).

800.5 POLICY

It is the policy of the Office to maintain a safe and sanitary facility. To accomplish this goal, the Office will maintain a written plan that contains schedules and procedures for conducting weekly and monthly sanitation inspections of the facility.

Housekeeping and Maintenance

801.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines to ensure that the facility is kept clean and in good repair in accordance with accepted federal, state and county standards.

801.2 POLICY

The 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.

801.3 SANITATION SCHEDULE

A daily, weekly and monthly cleaning schedule will be established by the housing unit supervisor. The facility staff should implement a site specific plan for cleaning and maintenance of each area of the jail (e.g., housing, food preparation, laundry, loading dock/trash storage, barber shop, warehouse, common areas). The following recommendations include, but are not limited to, specific areas and items:

- (a) Daily cleaning:

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1. Sweep and then wet mop the entire jail floor
 2. Clean all cell block areas
 3. Empty all trash receptacles
 4. Clean all toilets and sinks
 5. Clean all showers
- (b) Weekly cleaning:
1. Dust bars and window ledges
 2. Clean air conditioning/heating grates
 3. Clean mattresses (mattresses are also to be cleaned prior to being issued to a new inmate)
 4. Pour water down floor drains to test for flow
- (c) Monthly cleaning:
1. Walls
 2. Ceilings
 3. Bunk pans

801.4 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.

Vermin and Pest Control

802.1 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.

802.2 POLICY

It is the policy of this department 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).

802.3 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.

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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.

802.4 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

803.1 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.

803.2 POLICY

The Mono County Sheriff's Department 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.

803.3 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.

803.4 INVESTIGATION REPORTS

The Supervisor shall ensure that reports relating to an inmate's injury are completed and should include the following:

- Incident reports
- Investigative reports
- Health record entries
- Any other relevant documents

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803.5 ANNUAL REVIEWS

The Jail Commander or the authorized designee shall conduct an annual review of all injuries involving inmates for the purpose of identifying problem areas and documenting a plan of action to abate circumstances relating to inmate injuries.

The plan of action should include, but not be limited to:

- The area where the deficiencies have been identified.
- Strategies to abate the deficiency.
- Resources needed to correct a deficiency.
- The person or persons responsible for taking corrective action and the target completion date.

The Sheriff shall consult with the Office risk manager to coordinate corrective action or to seek managerial/administrative guidance for implementing corrective action.

Inmate Hygiene

804.1 PURPOSE AND SCOPE

This policy outlines the procedures that will be taken to ensure the personal hygiene of every inmate in the Mono County Sheriff's Department jail is maintained. The Mono County Sheriff's Department 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.

804.2 POLICY

It is the policy of the Mono County Sheriff's Department 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.

804.3 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.

804.3.1 BEDDING ISSUE

Upon entering a living area of the Mono County Sheriff's Department 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).

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- (c) Two sheets.
- (d) One bath towel.

Linen exchange, including towels, shall occur at least weekly and shall be documented in the daily activity log (15 CCR 1271). The 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.

804.3.2 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 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.

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.

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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.

804.4 LAUNDRY SERVICES

Laundry services shall be managed so that daily clothing, linen and bedding needs are met.

804.5 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.

804.6 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
- Sanitary pads, panty liners, and tampons as requested at no cost (Penal Code § 4023.5)

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)).

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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.

804.7 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).

804.8 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).

804.9 DELOUSING MATERIALS

Delousing materials and procedures shall be approved through consultation with the Responsible Physician or qualified health care professionals.

804.10 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.

804.11 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 department 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 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 professionals, and shall be recorded. All substitutions will be of equal or better nutritional value. If

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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.

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.

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).

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

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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 the evening meal and breakfast. 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. 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 correctional deputys 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 sergeant.

To the extent reasonably practical, an adequate number of food services staff and correctional personnel should supervise meal service in central dining areas.

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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

901.1 PURPOSE AND SCOPE

The purpose of this policy is to reduce the risk of potential injury to staff, contractors and inmate workers in the food services areas by developing and implementing a comprehensive training program in the use of equipment and safety procedures.

901.2 POLICY

The Mono County Sheriff's Department ensures a safe and sanitary environment is maintained for the storage and preparation of meals through the appropriate training of food services staff and inmate workers (15 CCR 1230; 15 CCR 1243(g); 15 CCR 1245(a)).

901.3 TRAINING

The food 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.

Dietary Guidelines

902.1 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.

902.2 POLICY

It is the policy of this department that diets provided by this facility will meet or exceed the guidelines established in the current publications of the Dietary Reference Intakes (DRI) of the Food and Nutrition Board, Institute of Medicine of the National Academies, the California Food Guide (CFG) and the U.S. Department of Agriculture's Dietary Guidelines for Americans (DGA).

902.3 REVIEW OF DIETARY ALLOWANCES

The food services manager is responsible for developing the facility's menus and shall ensure that all menus served by food services comply with the nutritional and caloric requirements found in the 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 dietitian, 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.

902.4 MENU CYCLE PLANNING

The food services manager or the authorized designee should plan the menus one month in advance of their use.

Any changes to the menu must be recorded and kept until the next annual inspection (15 CCR 1242). Any menu substitutions must use better or similar items.

Menus should include the following minimum food group allowances per day (15 CCR 1241):

- (a) Dairy Group: Three servings of pasteurized fat-free or low-fat milk fortified with Vitamins A and D or food providing at least 250 mg. of calcium and equivalent to 8 ounces of fluid milk. One serving can be from a fortified food containing at least 150 mg. of calcium. 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:

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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 Workers Health Safety and Supervision

903.1 PURPOSE AND SCOPE

The purpose of this policy is to establish basic personal health, hygiene, sanitation and safety requirements to be followed by all food services workers and to ensure the proper supervision of food services staff and inmate workers.

903.2 POLICY

The Mono County Sheriff's Department will ensure that meals are nutritionally balanced, safe and prepared and served in accordance with applicable health and safety laws. All inmate food services workers will be properly supervised by custody staff to ensure safety and security at all times (15 CCR 1243(h)).

903.3 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.

903.4 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.

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- (d) A supervisor shall inspect and monitor all persons working in any food services area on a daily basis for health and cleanliness, and shall remove anyone exhibiting any signs of food-transmissible disease from any food services area.
- (e) Any person working in any food services area who is diagnosed by a qualified health care professional with a contagious illness should be excluded from the food services areas until medically cleared to return to work.
- (f) All food handlers shall wash their hands when reporting for duty and after using toilet facilities. Aprons shall be removed and secured in a clean storage area before entering the toilet facility.
- (g) Food services workers shall wear disposable plastic gloves and a protective hair covering, such as a hat or hairnet, when handling or serving food. Gloves shall be changed after each task is completed.
- (h) Any outside vendor must submit evidence of compliance with state and local regulations regarding food safety practices.
- (i) Smoking at any time is prohibited in any food services area.
- (j) Documentation of compliance with all of the above and with any other risk-minimizing efforts implemented to reduce food transmissible disease shall be maintained in accordance with established records retention schedules.
- (k) All food services workers shall report to a supervisor any information about their health and activities in accordance with health and safety codes as they relate to diseases that are transmittable through food, (e.g., open sores, runny nose, sore throat, cough, vomiting, diarrhea, fever, recent exposure to contagious diseases such as Hepatitis A or tuberculosis).

Any food services worker is prohibited from handling food or working in any food services area if he/she reports symptoms such as vomiting, diarrhea, jaundice, sore throat with fever or has a lesion containing pus, such as a boil or infected wound that is open or draining. Food service workers shall only return to work in food service areas when cleared by a qualified health care professional.

903.5 TRAINING REQUIREMENTS FOR FOOD SERVICES WORKERS

The 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:

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Food Services Workers Health Safety and Supervision

- Proper hand-washing techniques and personal hygiene as it applies to food services work
- Proper application and rotation of gloves when handling food
- Proper use of protective hair coverings, such as hats or hairnets
- Wearing clean aprons and removing aprons prior to entering toilet facilities
- Maintaining proper cooking and holding temperatures for food
- Proper portioning and serving of food
- Covering coughs and sneezes to reduce the risk of food-borne illness transmission
- Reporting illness, cuts or sores to the custody staff in charge

903.6 SUPERVISION OF INMATE WORKERS

Only personnel authorized to work in the food preparation area will be allowed inside. Inmate food handlers working in the kitchen must be under the supervision of a staff member (15 CCR 1243(h)). The 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.

903.7 SUPERVISION OF THE FOOD SUPPLY

The risk of conflict and protest is reduced when the inmate population has confidence in the safety and quality of their food. Custody staff should supervise the transport and delivery of food to the respective serving areas. Custody staff should ensure the food is protected during transportation, delivered to the right location efficiently and under the right temperatures.

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Food services staff should report any suspected breach 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 documented and reported to the food services manager as soon as practicable.

Food Preparation Areas

904.1 PURPOSE AND SCOPE

This policy is intended to ensure the proper design and maintenance of the food preparation area.

904.2 POLICY

It is the policy of this department to comply with all federal, state and local laws and regulations concerning the institutional preparation of food.

904.3 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).

904.4 CONSTRUCTION REQUIREMENTS

All remodeling and new construction of food preparation areas shall comply with federal, state and local building codes, comply with food and agricultural laws and standards and include any required approvals from any local regulatory authority (Health and Safety Code § 113700 et seq.).

The food preparation area shall be sized to include space and equipment for adequate food preparation for the facility's population size, type of food preparation and methods of meal services.

Floors, floor coverings, walls, wall coverings and ceilings should be designed, constructed and installed so they are smooth, non-absorbent and attached so that they are easily cleanable (Health and Safety Code § 114268; Health and Safety Code § 114271).

Except in the area used only for dry storage, porous concrete blocks or bricks used for interior walls shall be finished and sealed for a smooth, non-absorbent, easily cleanable surface.

Food storage areas shall be appropriately clean, sized, typed and temperature-controlled for the food being stored (Health and Safety Code § 114047).

Lighting throughout the kitchen and storage areas shall be sufficient for staff and inmates to perform necessary tasks (Health and Safety Code § 114252).

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Food Preparation Areas

Mechanical ventilation of sufficient capacity to keep rooms free of excessive heat, steam, condensation, vapors, obnoxious odors, smoke and fumes shall be provided if necessary (Health and Safety Code § 114149(a)).

All equipment used in the food preparation area shall be commercial grade and certified by the American National Standards Institute or approved by a registered environmental health professional/sanitarian (Health and Safety Code § 114130).

Dishwashing machines will operate in accordance with the manufacturer recommendations and hot water temperatures will comply with federal, state and local health requirements (Health and Safety Code § 114101).

Equipment must be smooth, easy to clean, and easy to disassemble for frequent cleaning. Equipment should be corrosion resistant and free of pits, crevices or sharp corners.

Dry food storage must have sufficient space to store a minimum of 15 days of supplies and be stored in compliance with the provisions of Health and Safety Code § 114047.

904.5 TOILETS AND WASHBASINS

Adequate toilet and washbasin facilities shall be located in the vicinity of the food preparation area for convenient sanitation and proper hygiene. Toilet facilities shall be completely enclosed and shall have tight-fitting, self-closing, solid doors, which shall be closed except during cleaning and maintenance.

Signs shall be conspicuously posted throughout the food preparation area and in each restroom informing all food services staff and inmate workers to wash their hands after using the restroom. Signs shall be printed in English and in other languages as may be dictated by the demographic of the inmate population.

To reduce the potential for contaminants being brought into the food preparation area, toilet facilities in the vicinity of the food preparation area should be limited to use by the 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).

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If the toilet facility is outside of the kitchen area, food services workers must wash their hands after using the toilet facility and again upon returning to the kitchen area before preparing or serving food.

Food Budgeting and Accounting

905.1 PURPOSE AND SCOPE

The purpose of this policy is to establish processes that will enable the facility's food services to operate within its allocated budget, and for the development of specifications for purchasing food, equipment and supplies for the delivery of food services.

905.2 POLICY

The Mono County Sheriff's Department food services facilities shall serve nutritious meals in an efficient and cost-effective manner in accordance with applicable laws and standards (15 CCR 1243(i)).

905.3 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.

905.4 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.

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- (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

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Food Budgeting and Accounting

equipment for the required period of time, as mandated by the governing body of the facility.

Inspection of Food Products

906.1 POLICY

The Mono County Sheriff's Department will ensure the safety and quality of all food products grown or produced at this facility through routine inspections and approvals, as required by law.

906.1.1 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) The FDA or USDA inspection and/or approval of all food products grown or produced by this facility prior to distribution.
- (b) A system of periodic audits and inspections of the facility and of all raw material suppliers, either by custody staff or by a third-party vendor.
- (c) A system of thorough documentation of all inspection and approval processes, training activities, raw material handling procedures, activities, cleaning and sanitation activities, cleanliness testing, correction efforts, record-keeping practices and the proper use of sign-off logs shall be developed and implemented.
- (d) Processes of evaluating the effectiveness of training, and validating cleanliness through testing (e.g., swabs, bioluminescence and visual, taste and odor evaluations), shall be created and implemented. Records Division of all such activities shall be documented.
- (e) 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.
- (f) 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.

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Inspection of Food Products

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. The distribution of all prepared food is done in a manner that reduces the risk of food-borne illness or contamination.

Food Services Facilities Inspection

907.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for inspecting food services areas and facilities to ensure a safe and sanitary environment for staff and inmates.

907.2 POLICY

It is the policy of the Mono County Sheriff's Department that the food services area be maintained in a safe, sanitary condition by conducting regularly scheduled inspections, both by facility staff and by an outside independent inspection authority as may be required by law (15 CCR 1245(a)).

907.3 CLEANING AND INSPECTIONS BY STAFF

The food 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.

907.3.1 SAFETY INSPECTION CHECKLIST

The following items should be part of the weekly inspection:

- Lighting is adequate and functioning properly.
- Ample working space is available.

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- Equipment is securely anchored.
- There are suitable storage facilities, minimizing the risk of falling objects.
- Floors are clean, dry, even and uncluttered.
- Machines have proper enclosures and guards.
- A clear fire safety passageway is established and maintained.
- Fire extinguishers and sprinkler systems are available, not expired and are tested regularly.
- The food preparation area has good ventilation.
- Furniture and fixtures are free from sharp corners, exposed metal and splintered wood.
- All electrical equipment is in compliance with codes and regulations.
- All workers wear safe clothing, hair coverings, gloves and protective devices while working.
- All workers are in good health, with no symptoms of illness or injury that would pose a risk to food safety.
- All ranges, ovens and hot holding equipment are clean and in good operating condition.
- Mixers and attachments are clean and in good operating condition.
- Dishwashing machines are clean and in good operating condition, and proper chemicals are in use.
- Water temperatures for hand sinks, ware washing sinks and dishwashing machines meet minimum acceptable temperatures.
- All hand-washing stations have free access, soap, hot and cold running water under pressure and a method to dry hands.
- Toilet facilities are in good repair and have a sufficient supply of toilet paper.
- All temperature charts and testing documents are current, accurate and periodically reviewed and verified by the food services manager.
- Only authorized personnel are allowed in the kitchen area.
- Foods are labeled and stored properly using the first-in first-out system.
- The refrigerators and freezers are in good operating condition and maintain proper temperature.
- There is no evidence of cross-connection or cross-contamination of the potable water system.

Food Storage

908.1 PURPOSE AND SCOPE

The purpose of this policy is to establish food storage methods that are designed to meet manufacturer's recommendations, Health and Safety Codes, state laws and local ordinances, and to safely preserve food, extend storage life and reduce food waste.

908.2 POLICY

Food and food supplies will be stored in sanitary and temperature-controlled areas, in compliance with state and local health laws and standards (15 CCR 1243(c); 15 CCR 1245(a)).

908.3 PROCEDURES

The food 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.

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 Division of the temperature readings should be maintained in accordance with established records retention schedules.

An evaluation system should be established for food stored in any area with temperature readings outside the normal range, and should include contingency plans for menu changes, food storage relocation or food destruction, as indicated. All actions taken to ensure the safety of the food served should be documented and retained in accordance with established records retention schedules.

908.4 DRY FOOD STORAGE

Canned items and dry food that does not need refrigeration should be stored in a clean, dry, secure storage area where temperatures are maintained between 45 and 80 degrees.

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.

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New food shipments shall be placed behind existing like items and rotated using a first-in first-out rotation method.

Personal clothing and personal items shall not be stored in food storage areas.

908.4.1 MAINTENANCE OF DRY FOOD STORAGE AREAS

Inmate workers or staff should clean the storage areas 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)).

908.5 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.

908.5.1 MAINTENANCE OF REFRIGERATED AND FREEZER AREAS

Refrigeration storage units should be cleaned daily, including mopping floors and wiping down walls. A more thorough cleaning should occur weekly to include dismantling and cleaning shelves. 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)).

908.5.2 STORAGE OF CLEANING SUPPLIES AND MATERIALS

The storage of soaps, detergents, waxes, cleaning compounds, insect spray and any other toxic or poisonous materials are kept in a separate, locked storage area to prevent cross contamination with food and other kitchen supplies.

908.6 WASTE MANAGEMENT

The food 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

909.1 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.

909.2 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).

909.3 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

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- (c) Housing location or dining location where the meals will be delivered
- (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.

909.4 THERAPEUTIC AND RELIGIOUS MEAL RECORDS

Inmates receiving prescribed therapeutic diet meals and/or authorized religious diet meals must have a separate notation in the daily activity log.

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.

Any inmate refusing to eat a religious or therapeutic diet meal shall have the refusal documented in the daily log and a jail supervisor shall be notified.

The Jail supervisor shall advise the responsible physician of all therapeutic meal refusals.

Disciplinary Separation Diet

910.1 PURPOSE AND SCOPE

This policy establishes the requirement for providing inmates disciplinary separation diets when they are ordered for disciplinary reasons. The disciplinary separation diet will only be utilized after all of the provisions of the Disciplinary Separation section of the Disciplinary Separation Policy are implemented.

910.2 PROCEDURE

The food services manager shall prepare the disciplinary separation diet after receiving directions from the 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)).

910.3 DISCIPLINARY SEPARATION DIET RECIPE

The disciplinary separation diet shall consist of the following (15 CCR 1247(b)) :

- (a) 2 ½ oz. nonfat dry milk
- (b) 4 ½ oz. raw grated potato
- (c) 3 oz. raw carrots, chopped or grated fine
- (d) 1 ½ oz. tomato juice or puree
- (e) 4 ½ oz. raw cabbage, chopped fine
- (f) 7 oz. lean ground beef, turkey, or rehydrated, canned, or frozen Textured Vegetable Protein (TVP)
- (g) 2 ½ fl. oz. oil
- (h) 1 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.

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Disciplinary Separation Diet

910.4 POLICY

It is the policy of this department 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.

1000.2 POLICY

The Mono County Sheriff's Department 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 SECURITY

All programs and services offered to benefit inmates shall adhere to the security and classification requirements of this facility.

1000.4 DISCLAIMER

Inmate programs are provided at the sole discretion of the Mono County Sheriff's Department in keeping with security interests, available resources and best practices.

Nothing in this policy is intended to confer a legal right for inmates to participate in any program offered other than what is required by law or that which is medically required.

Inmate Welfare Fund

1001.1 PURPOSE AND SCOPE

The Office is authorized to maintain a fund derived from proceeds from the commissary, vending machines, telephones and other inmate-related commerce activities to be used primarily to provide welfare and education programs for the benefit of the inmate population.

1001.2 INMATE WELFARE FUND

The Jail Supervisor, in cooperation with the Department of Finance, will establish and maintain an Inmate Welfare Fund where proceeds derived from inmate telephones, commissary profits, vending machines and other income intended for the support of inmate programs are deposited.

The Inmate Welfare Fund is allocated to support a variety of programs, services and activities benefiting the general inmate population and enhancing inmate activities and programs. This includes capital construction and improvement projects in support of such programs, services and activities (Penal Code § 4025).

1001.3 INMATE WELFARE FUNDING SOURCES

Revenues and funding from the following sources shall be deposited into the Inmate Welfare Fund account:

- (a) All proceeds from commissary and canteen operations
- (b) Proceeds from vending machines made available for inmate use
- (c) Proceeds from the operation of inmate telephones
- (d) Proceeds from the sale of inmates' arts-and-crafts projects
- (e) Donations
- (f) Interest income earned by the Inmate Welfare Fund

1001.4 EXPENDITURE OF INMATE WELFARE FUNDS

The Inmate Welfare Fund shall be used solely for the welfare and benefit of the inmate population or as otherwise permitted by law.

Expenditures permitted from the Inmate Welfare Fund include, but are not limited to, the following:

- (a) Education programs
- (b) Recreational goods and services, such as:
 - 1. Recreational equipment, games and sporting goods
 - 2. Televisions and cable/satellite subscriptions, video players and content media
 - 3. Library books

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Inmate Welfare Fund

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

1001.4.1 PROHIBITED EXPENDITURES OF INMATE WELFARE FUND

Except as permitted by law, the Inmate Welfare Fund shall not be used to fund activities associated with any of the following:

- (a) Security-related functions, including staff, safety equipment, radios, weapons or control devices that are specifically designated for use by the custody staff in maintaining the security, safety and order in the facility

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Inmate Welfare Fund

- (b) Food service, staff costs, equipment and supplies
- (c) Medical/dental services, staff costs, equipment and supplies
- (d) Maintenance and upkeep of department facilities not otherwise permitted by law
- (e) Janitorial services and supplies
- (f) Transportation to court, medical appointments or other reasons not related to inmate programs
- (g) Any other normal operating expenses incurred by the day-to-day operation of the Office

1001.4.2 EXPENDITURE FOR REENTRY PROGRAMS

Expenditures from the Inmate Welfare Fund are also permitted for programs that assist indigent inmates with the reentry process within 30 days of release. These programs include work placement, counseling, obtaining proper identification, education and housing (Penal Code § 4025.5).

1001.5 POLICY

It is the policy of this department to maintain and administer an Inmate Welfare Fund that supports inmate programs.

Inmate Accounts

1002.1 PURPOSE AND SCOPE

This policy establishes guidelines and procedures for managing, handling and accounting of all money belonging to inmates that is held for their personal use while they are incarcerated in this facility.

1002.2 INMATE ACCOUNTS

POLICY:

In order to secure inmate cash and to have a permanent written record of all cash transactions, the following cash fund procedures are established.

PROCEDURES:

1. Inmate cash is defined as American currency and coin, only.
2. Checks will not be counted as part of the cash fund, but will be placed in a sealed envelope and stored with the inmate's personal property; these items will be inventoried on the booking sheet. Money orders are put in the bottom of the cash box and entered on the money order ledger.
3. The Duty Correctional Deputy will recover and accurately count ALL cash in the booking process. This should be conducted in front of the arrestee and on video.
4. The Duty Correctional Deputy will complete the Inmate Cash Ledger Form MCSO 102, on each detainee and enter the transaction in the jail computer.
5. Inmate Cash Ledgers will be kept in the cash drawer in the Control Center.
6. Inmate cash will be kept in the cash box in the cash drawer located in the Control Center.
7. At the beginning and end of his/her shifts, the Duty Correctional Deputy will count inmate cash, balance the total of the ledgers and enter the figures on the ledger book.
8. If the cash on hand does not balance with the ledger total, the Correctional Deputy will examine the transactions of the previous shift and make corrections, as necessary.
9. Any adjustments in ledger will be logged on the Jail log, explaining the adjustment.
10. Employees will not enter the inmates cash fund box except for official transactions such as release, commissary or bookings.
11. If the Duty Correctional Deputy becomes aware that a certain bill or coin is a keepsake, lucky piece or collector's item, that particular item will be placed in a sealed envelope to be stored in the inmate's personal property. Those items shall be inventoried on the booking sheet and WILL NOT be counted in the cash count.
12. When an inmate is released, his/her ledger sheet will be placed with all other release documents and given to Records Division Bureau personnel.

Inmate Exercise and Recreation

1003.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines and procedures ensuring that the Mono County Sheriff's Department facility will have sufficiently scheduled exercise and recreation periods and sufficient space for these activities, as required by law.

1003.1.1 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.

1003.2 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).

1003.3 ACCESS TO EXERCISE

Inmates shall have access to exercise opportunities and equipment, including access to physical exercise outside the cell and adjacent dayroom areas, and the opportunity to exercise outdoors when weather permits.

The Supervisor shall use the approved daily log sheet to document when inmates of like classification status are scheduled to exercise each day and shall record the exercise of an inmate, or that the inmate has declined outside exercise.

Daily log sheets should be collected monthly and forwarded to the Jail Commander. Log sheets shall be maintained in accordance with established records retention schedules.

1003.4 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, newspapers, 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.

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Inmate Exercise and Recreation

1003.4.1 USE OF THE INMATE WELFARE FUND

Monies derived from the Inmate Welfare Fund may be used to purchase and maintain recreational equipment and supplies.

1003.5 SECURITY AND SUPERVISION

The staff supervising the inmates during exercise and recreation time shall document when each inmate has the opportunity to exercise or recreate, and when each inmate actually participates.

Staff shall be responsible for inspecting exercise and recreational equipment to ensure it appears safe for use. Broken equipment or equipment that is in an unsafe condition shall not be used. Inmates will not be permitted to use equipment without supervision. All equipment shall be accounted for before inmates are returned to their housing unit.

The supervising staff may terminate the exercise or recreation period and escort back to the housing unit any inmate who continues to act 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 Supervisor will determine whether disciplinary action is warranted.

1003.6 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.

Inmate Educational, Vocational and Rehabilitation Programs

1004.1 PURPOSE AND SCOPE

This department 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 department to offer educational programs is dictated by available funding, ability to obtain qualified educators, inmate classification and other required inmate programs and routines.

1004.2 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).

1004.3 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.

1004.4 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.

1004.5 INMATE REQUESTS

Inmates should be given a form to request participation in the inmate education program. Inmate requests will be forwarded to the Jail Supervisor, who will assign someone to see if there are any adult education classes available at the time.

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1004.6 HIGH-SECURITY/ADMINISTRATIVE SEGREGATION INMATES

To the extent reasonably practicable, high-security inmates and those held in administrative segregation may receive individual instruction in the form of a correspondence course.

1004.7 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
- Making restitution to victims
- Paying court fines

1004.8 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.

It is also understood that do to Mono County Office of Educations difficulties recruiting and retaining qualified teachers, there are large time gaps that the jail and the community are without educational programs.

Commissary Services

1005.1 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.

1005.2 POLICY

It is the policy of this department 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).

1005.3 COMMISSARY 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.

1005.4 COMMISSARY ACCOUNTING

The 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

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Commissary Manager and the involved inmate cannot settle the discrepancy, the Jail Commander shall be notified and the Jail Commander will resolve the discrepancy.

1005.5 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)).

1005.6 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

1006.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for funding of library services and for providing inmates access to leisure and legal reading materials.

1006.2 RESPONSIBILITIES

The Jail Commander or the authorized designee is responsible for the administration of the library services and should appoint a capable member to serve as librarian to run the daily library operations. The library services shall include access to legal reference materials, current information on community services and resources, and religious, educational, and recreational reading material (15 CCR 1064).

The librarian shall ensure that reading materials are provided to the general housing units and that any member assigned to assist with the delivery of library services has received the appropriate training in facility safety and security practices.

1006.3 LIBRARY FUNDING AND MAINTENANCE

The Jail Commander should ensure that funding is available to operate the library. The Jail Commander may use monies from the Inmate Welfare Fund to offset the cost of salaries, services, and supplies. The librarian may enlist the assistance of the local public library system and other community organizations to maintain and update the library. Donated books and materials should be screened by the librarian for permissible content and safety prior to being distributed to inmates.

The Office may reject library materials that may compromise the safety, security, and orderly 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.

1006.4 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.

1006.5 LEGAL MATERIALS

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:

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- Criminal code sections.
- Copies of criminal and/or civil cases.
- Copies of relevant judicial forms.

Inmates desiring access to the library or legal publications shall submit a completed legal information request to the housing correctional deputy. Only one request per inmate per week is allowed unless the inmate is a court-ordered pro per.

The housing correctional 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 or security concerns. Records of access to legal materials and whether the requests were fulfilled or denied should be documented each day and maintained in the 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 they do not create a fire hazard or other safety or security concern.

1006.6 ALTERNATE MEANS OF ACCESS TO LEGAL RESOURCES

Nothing in this policy shall confer a right to access a law library. Unless it is specified by court order, the Sheriff may provide access to legal resources by a variety of means that may include public or private legal research services (e.g., web-based legal resources).

1006.7 POLICY

It is the policy of this facility to operate a library service that provides leisure and legal reading materials to inmates.

1006.8 ACCESS TO LIBRARY

Access to the inmate library or to library materials shall be based on inmate classification, housing location, and other factors that legitimately relate to maintaining the safety and security of the facility.

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.

Inmate Mail

1007.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines for the receipt, rejection, inspection and sending of inmate mail.

1007.2 POLICY

This department will provide ample opportunity for inmates to send and receive mail, subject to restriction only when there is a legitimate government interest.

1007.3 MAIL GENERALLY

Inmates may, at their own expense, send and receive mail without restrictions on quantity, provided it does not jeopardize the safety of staff, visitors, or other 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.

1007.4 CONFIDENTIAL CORRESPONDENCE

Inmates may correspond confidentially with courts, legal counsel, officials of this department, elected officials, the Department of Corrections, jail inspectors, government officials, or officers of the court. This facility will also accept and deliver a fax or interoffice mail from these entities.

Foreign nationals shall have access to the diplomatic representative of their country of citizenship. Staff shall assist in this process upon request.

Facility staff may inspect incoming confidential correspondence for contraband. Facility staff may inspect outgoing confidential correspondence for contraband before it is sealed, provided the inspection is completed in the presence of the 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)).

1007.5 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.

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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.

1007.6 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 correctional deputy 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.

Cash, government checks, and money orders contained in incoming inmate mail shall be removed and credited to the inmate's account. Personal checks may be returned to the sender or held in the inmate's property to be given to the inmate upon release.

1007.6.1 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

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government interests for reading and censoring mail and related legal requirements (15 CCR 1063).

1007.6.2 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.

Correspondence and material identified for censorship shall be delivered to the 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.

1007.6.3 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) Signature of the correctional deputy.
- (f) Notification to the inmate and sender (unless such notification jeopardizes any investigation or the security of the facility).

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1007.7 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)).

1007.8 REJECTION OF MAGAZINES AND PERIODICALS

The Office may reject magazines, periodicals, and other materials that may inhibit the reasonable safety, security, and discipline in the daily operation of this facility. Generally, books, newspapers, and magazines are accepted only if they are sent directly by the publisher. Materials that may be rejected include but are not limited to (15 CCR 1066(a)):

- Materials that advocate violence or a security breach.
- Literature that could incite racial unrest.
- Sexually explicit material, including pornographic magazines, nude pictures, or pictures or descriptions of sexually explicit activities.
- Obscene publications or writings and mail containing information concerning where or how such matter may be obtained; any material that would have a tendency to incite murder, arson, riot, violent racism, or any other form of violence; any material that would have a tendency to incite crimes against children; any material concerning unlawful gambling or an unlawful lottery; any material containing information on the manufacture or use of weapons, narcotics, or explosives or any other unlawful activity.
- Material that could lead to sexual aggression or an offensive environment for 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 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.

1007.9 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

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new address if it is reasonably known to the facility. Otherwise, legal mail should be returned to the sender.

1007.10 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 department, 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 Jail Supervisor. Inmates should not be permitted to maintain an excess supply of writing materials without the approval of a supervisor.

Inmate Telephone Access

1008.1 PURPOSE AND SCOPE

This policy establishes guidelines for permitting inmates to access and use telephones.

1008.2 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.

1008.3 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 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.

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1008.4 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.

1008.5 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.

1008.6 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.

Inmate Visitation

1009.1 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.

1009.1.1 DEFINITIONS

Definitions related to this policy include (Penal Code § 4032):

In-person visit - An on-site visit that may include barriers. In-person visits include interactions in which an 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.

1009.2 POLICY

It is the policy of the Mono County Sheriff's Department to allow inmate visitation, including video visitation when applicable, as required by law.

1009.3 PROCEDURES

The 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.

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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.

1009.3.1 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.

1009.3.2 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.

1009.4 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)).

1009.5 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.

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1009.6 DENIAL OR TERMINATION OF VISITING PRIVILEGES

The Jail Commander or the authorized designee is responsible for defining, in writing, the conditions under which visits may be denied.

Visitation may be denied or terminated by a supervisor if the visitor poses a danger to the security of the facility or there is other good cause, 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) 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.

1009.7 GENERAL VISITATION RULES

All visitors and inmates will be required to observe the following general rules during visitation:

- (a) A maximum of two adults and two children will be permitted to visit an inmate at any one time. Children visiting inmates must be deemed age appropriate by the parent or guardian accompanying the child. 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.

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Inmate Visitation

- (i) Inmates will be permitted to sign legal documents, vehicle release forms or any other items authorized by the Supervisor. Transactions of this nature will not constitute a regular visit.

1009.8 SPECIAL VISITS

The 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.

1009.9 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. 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).

Work Release Program

1010.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the guidelines and requirements for the Work Release Program. The Work Release Program allows inmates to maintain employment, support families and facilitate a successful return to the community.

1010.2 POLICY

It is the policy of this department to operate a voluntary Work Release Program to provide inmates with opportunities to secure or maintain employment, support families, assist in the payment of fines and penalties to the court and promote a successful return to the community (Penal Code § 4024.2(a)).

Release programs shall be conducted in accordance with state and local guidelines. In cases of pretrial release, the courts may have jurisdiction over release decisions.

1010.3 WORK RELEASE PROGRAM

Any inmate who has met the eligibility requirements and received approval may be granted permission to leave the facility to work at his/her place of employment in accordance with state and local guidelines, court orders and the provisions of this policy.

The Jail Commander or the authorized designee has sole authority to approve participation in the program and is responsible for the overall administration of the Work Release Program.

The Work Release Program participants are limited to geographic restrictions of the facility and must remain within state boundary lines unless otherwise ordered by the sentencing court.

1010.3.1 ELIGIBILITY

In order to be eligible for the Work Release Program, an inmate must meet the following requirements:

- Sentenced directly to work release programs by the court
- No documented disciplinary incidents
- No outstanding warrants, wants or detainers

Inmates who do not adhere to the rules of the program will be subject to removal from the program and to disciplinary and criminal action in accordance with the rules of the facility and applicable laws.

1010.3.2 STAFF RESPONSIBILITY

The Work Release Program staff is responsible for contacting the employer prior to authorizing the work assignment. The staff should inform the employer and the inmate of the rules and expectations for program participants.

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Work Release Program

The program staff shall provide each employer with the facility's contact information, including the contact person and telephone number, and instruct the employer to notify the contact person immediately if an inmate does not report to work, leaves prior to the scheduled departure time, or if any concerns arise during the work shift. The facility should provide a contact person who is available 24 hours a day, seven days a week, as some inmates will work evening or overnight shifts.

1010.3.3 HOUSING

Inmates participating in the Work Release Program should be housed in an area other than general population housing to reduce the possibility of contraband entering the facility.

Inmates in the program may either return to separate housing within the facility's secure perimeter or may be housed in a residential facility outside the secure perimeter. Factors to consider when determining appropriate housing for program participants include the following:

- Rated bed capacity of the facility
- Current occupancy
- Housing options and security capabilities outside the secure perimeter of the facility
- Number of inmates approved to participate in the program

1010.3.4 DAILY WORK ITINERARIES

Inmates must have an approved daily work itinerary prior to leaving the facility. The itinerary should include the following:

- Scheduled start and stop times for work
- Anticipated amount of travel time between the facility and the employer, each way
- Mode of transportation each way (e.g., bus, car, walk)
- Location of the workplace
- Contact name, address and telephone number of the employer
- Contact name, telephone number, driver's information of the transport person if the inmate does not have a valid license
- Contact name and telephone number of the on-duty program staff member

Any change to the itinerary (e.g., overtime, location of the workplace, transportation) must be approved in advance by the Jail Commander or the authorized designee.

1010.3.5 FINANCIAL MANAGEMENT

All inmates who participate in the Work Release Program shall ensure that the appropriate funds are deposited into their inmate accounts. Funds from the inmate accounts will be subtracted for room and board, program drug testing, booking fees, etc. Fines to the court, victim restitution, allowances to help pay family financial obligations, and funds for a savings account may also be taken from the account with the permission of the inmate or by order of the court.

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1010.3.6 EMPLOYER VERIFICATION

The Work Release Program staff shall make scheduled telephone calls and random site visits to the inmate's employer to ensure compliance with the rules of the program.

1010.3.7 PROGRAM CONFLICTS

The Work Release Program staff shall make every attempt to ensure the inmate's work schedule does not conflict with his/her required participation in treatment programs at the facility.

1010.3.8 DRUG TESTING

Random and scheduled drug testing shall be conducted on all inmates participating in the Work Release Program. Any positive results may cause the inmate's disqualification from the program, as well as disciplinary sanctions or criminal charges, if warranted.

1010.3.9 ADMINISTRATIVE REMOVAL

An inmate may be administratively removed from the program for the safety and well-being of the inmate, the staff, the program, the facility, and/or the general public. Such removal shall be subject to review by the Jail Commander or the authorized designee on the next business day (15 CCR 1054).

1010.4 RECORDS

The following records shall be maintained by the Jail Commander or the authorized designee on all inmates participating in the Work Release Program:

- (a) All payments and accounting associated with the Work Release Program
- (b) All contacts between the staff and employers prior to releasing inmates to work and confirming all employment information
- (c) All daily logs of time worked and payments received

Inmate Work Program

1011.1 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.

1011.2 POLICY

The Mono County Sheriff's Department 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.

1011.3 LEGAL REQUIREMENTS

1011.3.1 SENTENCED INMATE WORK REQUIREMENTS

All sentenced inmates who are physically and mentally able shall work if they are not assigned to other programs. Inmates shall not be required to perform work which exceeds their physical limitations. Inmates may be excused from work in order to maintain their participation in an educational, vocational or drug abuse treatment program. The Office will abide by all laws, ordinances and regulations when using inmates to work in the facility.

1011.3.2 PRETRIAL AND UNSENTENCED INMATE WORK REQUIREMENTS

Pretrial inmates and those awaiting sentencing may not be required to work, except to do personal housekeeping and to clean their housing area. However, they may volunteer for work assignments.

1011.4 INMATE WORKER SELECTION

The on duty correctional deputy shall be responsible for the selection and assignment of inmates to the various work assignments. The on duty correctional deputy should solicit input from other staff in assisting with inmate selection and assignment. The Staff also shall take into consideration the following eligibility criteria:

- (a) Inmates who have posed a threat in the past or have been charged with escape should be carefully screened for inmate work projects.
- (b) The inmate's charges and classification are such that the inmate will not pose a security risk to other inmates, staff or the public.
- (c) The inmate's capacity to perform physical tasks will match the job requirements.
- (d) The inmate is able to learn the necessary work routines.

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- (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.

1011.5 WORK ON PUBLIC PROJECTS

Sentenced inmates may be assigned to public works projects with state, municipal and local government agencies, or to community service projects, with the approval of the Jail sergeant and in accordance with all applicable laws and regulations.

1011.6 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.

1011.7 SUPERVISION OF INMATE WORKERS

Facility staff in charge of work programs or who provide supervision of inmates assigned to work crews should adhere to the following:

- (a) Inmate workers should be provided with safety equipment, clothing and footwear commensurate with the work performed. Safety equipment may include, but is not limited to, eye protection, gloves, hardhat or headwear and sunscreen for protection from sun exposure.
- (b) Work periods shall not exceed 10 hours per day.
- (c) Inmate workers should be provided with work breaks to allow them to take care of personal needs.
- (d) Inmate workers shall have access to nutritious meals and a reasonable amount of time to consume those meals during their work period.
- (e) The inmate workday approximates the workday in the community.
- (f) Inmate performance is regularly evaluated.
- (g) Inmates receive written recognition of the competencies they acquire.

Inmate workers shall be under the direct supervision of the facility staff or authorized public employees or authorized citizens at all times when they are on assignment through the Inmate Work Program.

Persons who are responsible for the supervision of inmates on work crews should receive training in basic areas of safety, security and reporting procedures.

Disciplinary action for inmate worker misconduct shall adhere to the Inmate Discipline Policy.

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1011.8 INMATE WORKER TRAINING

Inmates who are assigned to work in any area that may require the handling of any chemicals or the use of any equipment shall receive training from the respective department sergeant prior to using the chemicals or equipment. Public Safety Officers 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.

1011.9 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.

Religious Programs

1012.1 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).

1012.1.1 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.

1012.2 POLICY

It is the policy of this department 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.

1012.3 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.

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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 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.

1012.3.1 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.

1012.3.2 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.

1012.4 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.

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1012.4.1 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.

1012.5 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.

1012.6 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.

1012.7 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

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- (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

1012.8 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).

1012.9 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).

1012.10 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 department-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.

1012.11 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

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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.

1012.12 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.

1012.13 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.

1012.14 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.

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1012.15 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

Smoking and Tobacco Use

1100.1 PURPOSE AND SCOPE

This policy establishes limitations on the use of tobacco products by employees and others while on-duty or while in Mono County Sheriff's Department facilities or vehicles.

1100.2 POLICY

The Mono 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 Mono County Sheriff's Office to enforce the County's smoking ordinance regarding work place tobacco use.

1100.3 ADDITIONAL PROHIBITIONS

Smoking and use of other tobacco products is not permitted inside department facilities or any department 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 department 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

1101.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for a control center for monitoring and coordinating the facility security, safety and communications.

1101.2 POLICY

It is the policy of this department to maintain a control center, designated as Mono One, which shall be secure and staffed 24 hours each day to monitor and coordinate security, safety and communications.

1101.3 COMMUNICATIONS AND MONITORING CAPABILITIES

Mono One shall have multiple means of direct communication capabilities with all staff control stations in inmate housing areas, including telephone, intercom and radio.

The Mono One 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.

1101.4 SECURITY

Access into the Mono One should be through a sallyport entrance controlled by the staff inside the Mono One.

At no time should inmates be allowed to enter the Mono One.

Crowding

1102.1 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.

1102.2 POLICY

It is the policy of the Mono County Sheriff's Department to manage the inmate population to the extent as is reasonably possible to avoid exceeding the facility's approved bed capacity.

1102.3 DAILY INMATE POPULATION REPORT

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 and female 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 (see the Population Management Policy). 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).

1102.4 RESPONSIBILITIES

The Sheriff is responsible for ensuring that 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.

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