

# San Luis Obispo County Sheriff's Office

## San Luis Obispo County SO Custody Manual

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### **MISSION**

The mission of the San Luis Obispo County Sheriff's Office is to protect all life and property and to provide service, security and safety to our community.

# San Luis Obispo County Sheriff's Office

## San Luis Obispo County SO Custody Manual

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### **VISION**

Our vision is to be the most progressive and creative leaders within the law enforcement community and ensure our county remains one of the safest places to live and visit.

# San Luis Obispo County Sheriff's Office

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### **PHILOSOPHY AND GOALS**

(Agency Philosophy and Goals statement)

# San Luis Obispo County Sheriff's Office

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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

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## Organizational Structure and Responsibility

### 100.1 PURPOSE AND SCOPE

The organizational structure of the Sheriff's 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.

### 100.2 DIVISIONAL RESPONSIBILITY

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

- Investigative Services Bureau
- Field Operations Bureau
- Custody Bureau
- Administrative Bureau

#### 100.2.1 CUSTODY DIVISION

The Custody Division is commanded by a Captain, whose primary responsibility is to function as the Facility Manager to provide general management direction and control for the jail. The Custody Division consists of Custody Operations, Personnel and Services. The scope of those divisions is as follows:

- (a) Custody Jail Operations
  1. Classification Unit
  2. Scheduling Unit
  3. Services Unit
  4. Admin Sergeant
  5. Jail Sergeants
- (b) Custody Support Services
  1. Male and Female Honor Farm
  2. Food services/Commissary
  3. Alternative Sentencing Unit
  4. Honor Farm Projects Deputy
  5. Programs Unit and Volunteers
  6. GAP Program
  7. Court Services
- (c) Custody Personnel
  1. Training Unit
  2. Correctional Technicians

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#### *Organizational Structure and Responsibility*

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#### **100.3 CHAIN OF COMMAND**

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

To maintain continuity, order and effectiveness in the Sheriff's 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.

Communication within the Sheriff's Office shall follow the chain of command. Each echelon shall forward communications via the chain of command to the addressee, with recommendations if appropriate. In the absence of a staff position, the communication will be forwarded to the next higher echelon.

##### **100.3.1 COMMAND LEVELS**

Command levels for the Custody Bureau are as follows:

- (a) Sheriff
- (b) Undersheriff
- (c) Correctional Captain
- (d) Correctional Lieutenant
- (e) Correctional Sergeant, Food Service Supervisor and Supervising Correctional Technician
- (f) Senior Correctional Deputy
- (g) Correctional Deputy
- (h) Correctional Technician I/II/III
- (i) Cook I/II
- (j) Storekeeper (commissary clerk).

## Authority and Legal Assistance

### 102.1 PURPOSE AND SCOPE

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

### 102.2 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.

### 102.3 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 San Luis Obispo County Sheriff's Office recognizes and respects the value of all human life and the expectation of dignity without prejudice toward anyone. It is also understood that vesting law enforcement personnel with the authority to incarcerate suspected law violators to protect the public and prevent individuals from fleeing justice requires a careful balancing of individual rights and legitimate government interests.

### 102.4 LEGAL ASSISTANCE

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

- (a) Analyze and alert the jail executive and 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 office and the Sheriff.

#### 102.4.1 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.

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#### *Authority and Legal Assistance*

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The liaison officer will arrange for regularly scheduled meetings in order to provide an ongoing status report of facility issues to the legal counsel. The liaison officer 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 Sheriff's Office.

#### **102.5 CORRECTIONAL DEPUTY AUTHORITY**

The San Luis Obispo County Sheriff's Office grants its duly appointed Correctional Deputies the authority under Penal Code §830.1(c). In addition to general custodial duties Correctional Deputies are authorized to perform the following actions while on-duty:

- (a) Arrest persons on local warrants when the person is on Sheriff's Office property.
- (b) Investigate and document inmate suicide attempts at the Jail when no criminal activity is suspected.
  - 1. In the case that criminal activity is suspected, the Correctional Sergeant will contact the Watch Commander to have a Patrol Deputy respond.
- (c) Approve and conduct strip searches in accordance with our *Searches Policy*.
- (d) Complete found property reports in accordance with our *Disposition of Evidence Policy*.

##### 102.5.1 LIMITATIONS

While on-duty, Correctional Deputies shall not perform the following actions:

- (a) Arrest persons on new criminal charges.
- (b) Arrest persons who have been **NARG** by the courts or make a re-arrest.
- (c) Arrest or re-arrest persons on Penal Code §1551 warrants.
- (d) Write or re-write **Probable Cause Statements**.
- (e) Perform any actions under Penal Code §830.1(c) that will result in the District Attorney's Office filing or criminal prosecution ensuing from new criminal charges.

Correctional Deputies shall not perform any action under Penal Code §830.1(c) while off-duty.

# Annual Review and Performance-Based Goals and Objectives

## 104.1 PURPOSE AND SCOPE

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

## 104.2 POLICY

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

## 104.3 ANNUAL REVIEW

The Facility Manager 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.

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

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7. Juveniles in custody.
  8. Felony inmates in custody.
  9. Misdemeanor inmates in custody.
  10. Pretrial population.
  11. Sentenced population.
  12. Medical beds.
  13. Mental health beds.
  14. Meal counts (regular, medical, court meals).
  15. Early releases.
  16. Alternative-to-incarceration participants.
  17. Special needs inmates.
  18. Classification issues.
  19. Inmate grievances (founded/denied).
  20. Demographics (age, race, gang affiliation).
  21. 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.

#### **104.4 CRITERIA TO MEASURE PERFORMANCE**

The following items will be used to measure and evaluate the level of success in achieving the office's stated goals:

- (a) Fiscal year budget surpluses or successful operations even with budget reduction
- (b) Findings from independent financial audits
- (c) Inmate grievances



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

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- (d) Documentation that office investigators have completed the required specialized training in conducting sexual abuse investigations (28 CFR 115.34)
- (e) Documented training hours received by staff
- (f) Completed audits of the policy and procedures manuals

#### **104.5 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 office 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 Facility Manager 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.

#### **104.6 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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# Custody Manual

## 106.1 PURPOSE AND SCOPE

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

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

## 106.2 POLICY

The manual of the San Luis Obispo County Sheriff's Office Jail is hereby established and shall be referred to as the Custody Manual (15 CCR 1029).

### 106.2.1 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 San Luis Obispo County Sheriff's Office and shall not be construed to create a higher standard or duty of care for civil or criminal liability against the county, its officials or members. Violations of any provision of any policy contained within this manual shall only form the basis for office administrative action, training or discipline. The San Luis Obispo County Sheriff's Office reserves the right to revise any policy content, in whole or in part.

## 106.3 RESPONSIBILITIES

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

The Facility Manager 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 San Luis Obispo County Sheriff's Office (15 CCR 1029). The review shall be documented in written form sufficient to indicate that policies and procedures have been reviewed and amended as appropriate to facility changes.

### 106.3.1 CUSTODY COMMAND STAFF

The custody command staff should consist of the following:

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### *Custody Manual*

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- Sheriff
- UnderSheriff
- Correctional Captain
- Correctional Lieutenant

#### 106.3.2 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 supervisor 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 suggestion, in writing, through the chain of command to the Facility Manager, who will consider the recommendation.

#### 106.3.3 INTERNAL AND EXTERNAL SECURITY MEASURE REVIEW

The Facility Manager 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).

#### 106.4 DEFINITIONS

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

**Adult** - Any person 18 years of age or older.

**Office** - The San Luis Obispo County Sheriff's Office

**Custody Manual** - The Office Custody Division Manual

**Facility Manager** - The Correctional Captain

**Facility Administrator** - The elected Sheriff of San Luis Obispo County

**PREA Coordinator** - Operations Correctional Lieutenant

**PREA Trainer** - The Correctional Sergeant assigned to Programs Coordination

**Juvenile** - Any person under the age of 18.

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

**Member** - This term applies to all persons who are employed by the San Luis Obispo County Sheriff's Office or who are appointed to serve as volunteers. This includes Correctional Deputies, reserve Correctional Deputies, general services staff, contractors and volunteers.

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

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**On-duty employee** - Status during the period when he/she is actually engaged in the performance of his/her 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.

#### **106.5 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 office network (15 CCR 1029).

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

#### **106.6 MANUAL ACCEPTANCE**

As a condition of employment, all members are required to read and obtain necessary clarification of this office's policies. All members are required to sign a statement of receipt acknowledging that they have received a copy or have been provided access to the Custody Manual. Each member shall complete Daily Training Bulletins for each month. The release of the Daily Training Bulletins will be made at the beginning of each month. The Daily Training Bulletins shall be completed by the last day of the corresponding month. Failure to complete the Daily Training Bulletins may result in progressive discipline.

#### **106.7 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 Office intranet and an e-mail will be sent out as a reminder for each member to review prior to implementation. The designated employee will forward revisions to the Custody Manual as needed to all personnel via electronic mail. Each member shall acknowledge receipt by return e-mail 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

### 108.1 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 office are governed by the following policy (15 CCR 1029(a)(1)).

### 108.2 CORRESPONDENCE

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

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

### 108.3 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.

#### 108.3.1 SIGNATURES

Whenever a signature and/or initials are required, it is to be legible or the name printed legibly adjacent to the signature. Additionally, the employee's body number should be listed as well.

#### 108.3.2 SURVEYS

All surveys made in the name of the Sheriff's Office shall be authorized by the Sheriff, Undersheriff, or a Bureau Chief/Captain.

### 108.4 INTER-OFFICE MEMORANDUMS

Inter-Office memorandums are typed communication between Sheriff's Office employees. Memorandums may be used for, but are not limited to, the following:

- (a) Correctional Deputy safety risks
- (b) Special assignment requests
- (c) Jail security issues

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- (d) Special requests
- (e) General intelligence

#### **108.5 POLICY**

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

## Operational Directives

### 110.1 PURPOSE AND SCOPE

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

### 110.2 OPERATIONAL DIRECTIVES PROTOCOL

Operational Directives will be incorporated into the manual as required upon approval of the Sheriff. Operational 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 Operational 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.

### 110.3 RESPONSIBILITIES

#### 110.3.1 AGENCYHEAD

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

#### 110.3.2 MANAGERS AND SUPERVISORS

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

An acknowledgement form shall be signed by all staff and retained by the Training Coordinator..

### 110.4 POLICY

Operational 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. Operational Directives will immediately modify or change and supersede the sections of this manual to which they pertain.

## Insignia, Duty Gear and Patches

### 111.1 CUSTODY INSIGNIA, DUTY GEAR AND PATCHES

- (a) Shoulder Patches - The authorized shoulder patch supplied by the Sheriff's Office shall be machine stitched to the sleeves of all uniform shirts and jackets, three-quarters of an inch below the shoulder seam of the shirt and be bisected by the crease in the sleeve.
- (b) Service stripes for length of service may be worn on long sleeved shirts and jackets. Each stripe will represent 4 years of law enforcement service. They are to be machine stitched onto the uniform. The bottom of the service stripe shall be sewn the width of one and one-half inches above the cuff seam with the rear of the service stripes sewn on the dress of the sleeve. The stripes are to be worn on the left sleeve only.
- (c) The regulation nameplate, or an authorized sewn on cloth nameplate, shall be worn at all times while in uniform. The nameplate shall display the employee's first name initial and last name. The nameplate shall be worn and placed above the right pocket located in the middle, bisected by the pressed shirt seam, with equal distance from both sides of the nameplate to the outer edge of the pocket.
- (d) When a jacket is worn, the nameplate or an authorized sewn on cloth nameplate shall be affixed to the jacket in the same manner as the uniform.
- (e) Assignment Insignias - Assignment insignias, (CERT, Dive, etc.) may be worn as designated by the Sheriff.
- (f) Badge - The Sheriff's Office issued badge, or an authorized sewn on cloth replica, must be worn and visible at all times while in uniform.
- (g) Rank Insignia - The designated insignia indicating the employee's rank must be worn at all times while in uniform. The Sheriff may authorize exceptions.
- (h) Medal of Valor Pin- Shall be centered above the nameplate above the right breast pocket of the Class A Inspection jacket or the Class A and Class B uniform shirt.
- (i) Life Saving Award Pin - Shall be centered above the nameplate above the right breast pocket of the Class A Inspection jacket or the Class A and Class B uniform shirt.
- (j) Medal of Valor and Life Saving Pin- When worn together, They shall be centered above the nameplate, above the right breast pocket, with the Medal of Valor located above the right side of the nameplate and the Life Saving Medal located to the left side of the nameplate,
- (k) Shooting Qualification Medal- Shall be centered between the button and the left edge of the right breast pocket of the Class A Inspection jacket or the Class A and Class B uniform shirt.
- (l) Crisis Intervention Training Pin (CIT)- Shall be centered above the button of the right breast pocket of the Class A Inspection jacket or the the Class A and Class B uniform shirt.



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- (m) Jail Training Officer Pin (JTO)- Shall be centered above the nameplate, above the button of the right breast pocket of the Class A Inspection jacket of the Class A and B uniform shirt.
- (n) Other approved pins or medals- Shall be centered between the button and the left edge of the right breast pocket of the Class A Inspection jacket or the Class A and Class B uniform shirt.
- (o) All sworn staff working in the Custody Bureau shall have a rescue tool on their person. A Gerber Strap Cutter will be provided by this Office or staff may purchase their personal approved rescue tool. Knives are not permitted in the facility and all rescue tools shall comply with the Gerber Strap Cutter's specifications.
- (p) Modified duty uniform - Staff assigned to modified duty may wear a black polo style shirt, embroidered with the Sheriff's Office badge and the employee's name. Class C pants will be worn in conjunction with the polo style uniform shirt. Staff choosing this uniform are responsible for purchasing and appropriately embroidering the polo shirt.

## Annual Facility Inspection

### 112.1 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.

#### 112.1.1 POLICY

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

### 112.2 FACILITY MANAGER RESPONSIBILITY

The Facility Manager or authorized designee is responsible for collecting performance indicators and other relevant data to generate and provide an annual inspection of all custody facilities. The Facility Manager or authorized designee 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 agencies, such as the Health Department or Board of State and Community Corrections.

### 112.3 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 Facility Manager, 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. The pre-assessment briefing may be conducted through face-to-face or electronic communication.
- (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 and best practices.
- (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 Sheriff's Office stated goals and objectives should be discussed with the Facility Manager, 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 Facility Manager or authorized desingee should ensure that approved recommendations are being instituted by the responsible program providers.

#### **112.4 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
- 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
- Standard bedding and linen use

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- Mattresses

## Special Assignments and Promotions

### 113.1 PURPOSE AND SCOPE

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

### 113.2 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

#### 113.2.1 DISQUALIFICATION

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

- (a) Engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution as defined in 42 USC § 1997.
- (b) Been convicted of engaging in or attempting to engage in sexual activity 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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Employees who may have contact with inmates shall disclose any conduct described above in written applications or interviews for promotion or specialized assignment.

#### **113.3 CORRECTIONAL DEPUTY SPECIALIZED ASSIGNMENTS**

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

- (a) Custody special enforcement team member
  - 1. Custody Emergency Response Team (CERT)
- (b) Classification Unit
  - 1. Classification Sergeant
  - 2. Classification Deputy
- (c) Training Deputy
  - 1. Training Coordinator
  - 2. Defensive Tactics Instructor
  - 3. Rangemaster/Firearms/Control Devices Instructor
  - 4. In-house Instructor
- (d) Court Deputy
- (e) Honor Farm Deputy
  - 1. Special Projects Deputy
  - 2. GAP Deputy
- (f) Alternative Sentencing Unit
  - 1. Home Detention Deputy
  - 2. Alternative Work Program Deputy
  - 3. ASU Programs Coordinator Deputy
- (g) Administrative Services
  - 1. Administration Sergeant
  - 2. Inmate Programs Coordinator
  - 3. Scheduling Sergeant
- (h) Services Unit
  - 1. BHU Sergeant
  - 2. Kansas Max Deputy
  - 3. BHU/MPU Deputy
  - 4. JBCT Deputy

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#### 113.3.1 DESIRABLE QUALIFICATIONS

Qualifications that will be considered for a specialized assignment include:

- (a) Two years experience with the Sheriff's Office
- (b) Off probation
- (c) Has shown an expressed interest in the position applied for education, training and demonstrated abilities in related areas; such as, enforcement activities, investigative techniques, report writing, public relations, etc.
- (d) Complete any training required by POST or STC

#### 113.3.2 DISQUALIFICATION

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

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

#### **113.4 SPECIALIZED ASSIGNMENT SELECTION PROCESS**

The following criteria apply to specialized assignments:

- (a) Submission of a memorandum of interest to the Facility Manager or Unit Lieutenant.
- (b) 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.
- (c) The supervisor recommendations may be submitted to the Facility Manager or Unit Lieutenant for whom the candidate will work. The Facility Manager or Unit Lieutenant may schedule interviews and/or a performance evaluation for each candidate.
- (d) Based on supervisor recommendations and those of the Unit Lieutenant after the interview and/or performance evaluation, the Facility Manager will submit his/her recommendation to the Sheriff.
- (e) Appointments will be made by the Sheriff or his/her appointed designee.

The policy and procedures for all positions may be waived for temporary assignments, emergency situations or lack of applications in a specialized assignment. This policy may also be waived to allow selected candidates to attend requisite training programs.

#### **113.5 PROMOTIONAL REQUIREMENTS**

Requirements and information regarding any promotional process are available at San Luis Obispo Department of Human Resources.



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##### **113.6 POLICY**

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

## Standards of Conduct

### 115.1 PURPOSE AND SCOPE

This policy provides employees with guidelines for conduct in order that they may participate in meeting the goals of this office in serving the community. This policy shall apply to all sworn, general service staff, volunteer and contractor members of this office (including part-time and reserve employees). This policy is intended for internal use only and shall not be construed to increase or establish an employee's civil or criminal liability. Nor shall it be construed to create or establish a higher standard of safety or care. A violation of any portion of this policy may only serve as the basis for internal disciplinary and/or administrative action.

### 115.2 POLICY

The continued employment of every employee of this Office shall be based on conduct that reasonably conforms to the guidelines set forth herein. Failure of any employee to meet the guidelines set forth in this policy whether on-duty or off-duty may be cause for disciplinary action.

An employee's off-duty conduct shall be governed by this policy to the extent that it is related to acts that may materially affect or arise from the employee's ability to perform official duties or to the extent that it may be indicative of an employee being unfit for his/her position.

### 115.3 CONDUCT THAT MAY RESULT IN DISCIPLINE

The following list of causes for disciplinary action constitutes a portion of the disciplinary standards of this Office. This list is not intended to cover every possible type of misconduct and does not preclude the recommendation of disciplinary action for specific action or inaction that is detrimental to efficient Office service:

#### 115.3.1 ATTENDANCE

- (a) Leaving the assignment during duty hours without reasonable excuse and proper permission and approval.
- (b) Unexcused or unauthorized absence or tardiness on scheduled days of work.
- (c) Failure to report to assigned duty post at the time specified and fully prepared to perform duties without a reasonable excuse.
- (d) Failure to notify the Office within 24 hours of any change in residence address, home telephone number or marital status.

#### 115.3.2 CONDUCT

- (a) Unauthorized or unlawful fighting, threatening or attempting to inflict unlawful bodily injury on another.
- (b) Initiating any civil action for recovery of any damages or injuries incurred in the course and scope of employment without first notifying the Sheriff of such action.

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- (c) Using Office resources in association with any portion of an independent civil action. These resources include, but are not limited to, personnel, vehicles, equipment and confidential records.
- (d) Engaging in horseplay that results in injury or property damage or the reasonable possibility thereof.
- (e) Unauthorized possession of, loss of, or damage to Office property or the property of others or endangering it through unreasonable carelessness or maliciousness.
- (f) Failure of any employee to promptly and fully report activities on their own part or the part of any other employee where such activities may result in criminal prosecution or discipline under this policy.
- (g) Failure of any employee to promptly and fully report activities that have resulted in official contact by any other law enforcement agency.
- (h) Using or disclosing one's status as an employee with the Office in any way that could reasonably be perceived as an attempt to gain influence or authority for non-Office business or activity.
- (i) The use of any confidential data, information, photograph, video or other recording obtained or accessed as a result of employment with the Office for personal or financial gain or without the express authorization of the Sheriff or the authorized designee may result in discipline under this policy.
- (j) Seeking restraining orders against individuals encountered in the line of duty without the express permission of the Sheriff.
- (k) Discourteous, disrespectful or discriminatory treatment of any member of the public or any member of this Office.
- (l) Unwelcome solicitation of a personal or sexual relationship while on-duty or through the use of official capacity.
- (m) Engaging in sexual abuse.
- (n) Any history of sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution (28 CFR 115.17).
- (o) Conviction or civil or administrative adjudication for engaging or attempting to engage in sexual activity that was facilitated by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse (28 CFR 115.17).
- (p) Engaging in on-duty sexual relations including, but not limited to, sexual intercourse, excessive displays of public affection or other sexual contact.
- (q) Engaging in personal associations with inmates. In instances where the relationship existed prior to the inmate's incarceration, staff shall submit notification of such relationship in writing to their supervisor, who will notify the Facility Manager.

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- (r) Divulging home telephone numbers, addresses, e-mail addresses, work schedules or other confidential data regarding themselves or other employees to current inmates, former inmates or their families or the general public.
- (s) Accepting gifts of any value or favors from current or former inmates or their families. Attempts on the part of a current inmate, former inmate or his/her family to send gifts or offer favors to employees or their families must be immediately reported to the employee's supervisor.
- (t) Allowing contraband articles, including, but not limited to, weapons, clothing, food, illegal drugs, or tobacco in any jail facility.
- (u) Receiving from an inmate any articles to deliver outside the facility.

#### 115.3.3 DISCRIMINATION

Discrimination against any person because of age, race, color, creed, religion, gender, sexual orientation, national origin, ancestry, marital status, physical or mental disability or medical condition will not be tolerated.

#### 115.3.4 INTOXICANTS

- (a) Reporting for work or being at work following the use of intoxicants where such use may impair the employee's ability to perform assigned duties or where there is an immediate suspicion of ineffectiveness during public contact resulting from the use of intoxicants.
- (b) Unauthorized possession or use of, or attempting to bring intoxicants to the work site.
- (c) Reporting for work or being at work following the use of a controlled substance or any drug (whether legally prescribed or otherwise) where such use may impair the employee's ability to perform assigned duties without prior authorization from a supervisor.
- (d) Unauthorized possession or use of a controlled substance or other illegal drug.

#### 115.3.5 PERFORMANCE

- (a) Sleeping during on-duty time or assignments.
- (b) Careless workmanship resulting in spoilage or waste of materials or work of an unacceptable nature as applicable to the nature of the work assigned.
- (c) Unsatisfactory work performance including, but not limited to, failure, incompetence, inefficiency or delay in performing and/or carrying out proper orders, work assignments or instructions of supervisors without a reasonable and bona fide excuse.
- (d) Concealing, attempting to conceal, removing or destroying defective or incompetent work.

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- (e) Disobedience or insubordination to constituted authorities, including refusal or deliberate failure to carry out or follow lawful directives and orders from any supervisor or person in a position of authority.
- (f) The wrongful or unlawful exercise of authority on the part of any employee for malicious purpose, personal gain, willful deceit or any other improper purpose.
- (g) Disparaging remarks or conduct concerning duly constituted authority to the extent that such conduct disrupts the efficiency of the Office or subverts the good order, efficiency and discipline of the Office or that would tend to discredit any member thereof.
- (h) Knowingly making false, misleading or malicious statements that are reasonably calculated to harm or destroy the reputation, authority or official standing of the Office or members thereof.
- (i) The falsification of any work-related records, the making of misleading entries or statements with the intent to deceive, or the willful and unauthorized destruction and/or mutilation of any Office record, book, paper or document.
- (j) Wrongfully loaning, selling, giving away or appropriating any Office property for the personal use of the employee or any unauthorized person.
- (k) The unauthorized use of any badge, uniform, identification card or other Office equipment or property for personal gain or any other improper purpose.
- (l) The receipt or acceptance of a reward, fee or gift from any person for service incident to the performance of the employee's duties (lawful subpoena fees and authorized work permits excepted).
- (m) Any knowing or negligent violation of the provisions of the Office manual, operating procedures or other written directive of an authorized supervisor that the Office has made available to the employees.
- (n) Dishonesty, including attempted or actual theft of Office property, services or the property of others, or the unauthorized removal or possession of Office property or the property of another person.
- (o) Criminal, dishonest, infamous or disgraceful conduct adversely affecting the employee/employer relationship, whether on-duty or off-duty.
- (p) Failure to disclose or misrepresenting material facts, or the making of any false or misleading statement on any application, examination form or other official document, report or form, or during the course of any work-related investigation.
- (q) Failure to take reasonable action while on-duty and when required by law, statute, resolution or approved Office practices or procedures.

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- (r) Substantiated, active, continuing association with or membership in organized crime or criminal syndicates or a criminal gang with knowledge thereof, except as specifically directed and authorized by the Office.
- (s) Offer or acceptance of a bribe or gratuity.
- (t) Misappropriation or misuse of public funds.
- (u) Exceeding lawful peace officer powers by unreasonable, unlawful or excessive conduct.
- (v) Unlawful gambling or unlawful betting on Office premises or at any work site.
- (w) Substantiated, active, continuing association on a personal rather than official basis with a person or persons who engage in or are continuing to engage in serious violations of state or federal laws, where the employee has or reasonably should have knowledge of such criminal activities, except where specifically directed and authorized by the Office.
- (x) Solicitations, speeches or distribution of campaign literature for or against any political candidate or position while on-duty, on Office property or while in any way representing him/herself as a member of this Office, without the express authorization of the Sheriff.
- (y) Engaging in political activities during assigned working hours without the express authorization of the Sheriff.
- (z) Violating any misdemeanor or felony statute.
- (aa) Any other on-duty or off-duty conduct which any employee knows or reasonably should know is unbecoming a member of the Office or which is contrary to good order, efficiency or morale, or which tends to reflect unfavorably upon the Office or its members.
- (ab) Any failure or refusal of an employee to properly perform the function and duties of an assigned position.
- (ac) Failure to maintain required and current licenses (e.g., driver license) and certifications (e.g., first aid).
- (ad) Giving false or misleading statements, or misrepresenting or omitting material information to a supervisor or other person in a position of authority, in connection with any investigation or in the reporting of any Office-related business.

#### 115.3.6 SAFETY

- (a) Failure to observe posted rules, signs and written or oral safety instructions while on-duty and/or within office facilities or to use required protective clothing or equipment.
- (b) Knowingly failing to report any on-the-job or work-related accident or injury within 24 hours.

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- (c) Substantiated employee record of unsafe or improper driving habits or actions in the course of employment.
- (d) Failure to maintain good physical condition sufficient to adequately and safely perform law enforcement duties.
- (e) Any personal action contributing to involvement in a preventable traffic collision, or other unsafe or improper driving habits or actions in the course of employment.
- (f) Violating office safety standards or safe working practices.

#### 115.3.7 SECURITY

- (a) Unauthorized, intentional release of designated confidential information, materials, data, forms or reports.

#### 115.3.8 SUPERVISION RESPONSIBILITY

- (a) Failure of a supervisor to take appropriate action to ensure that employees adhere to the policies and procedures of this Office and the actions of all personnel comply with all laws.
- (b) Failure of a supervisor to report in a timely manner any known misconduct of an employee to his/her immediate supervisor or to document such misconduct appropriately or as required by policy.
- (c) The unequal or disparate exercise of authority on the part of a supervisor toward any employee for malicious or other improper purpose.

#### 115.3.9 PRISON RAPE ELIMINATION ACT (PREA) DISCLOSURE

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

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

#### **115.4 GENERAL STANDARDS**

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

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

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

#### **115.5 POST-INVESTIGATION PROCEDURES**

##### **115.5.1 LAWS, RULES, AND ORDERS**

- (a) Violation of, or ordering or instructing a subordinate to violate, any policy, procedure, rule, order, directive or requirement, or failure to follow instructions contained in office or county manuals.
- (b) Disobedience of any legal directive or order issued by any office member of a higher rank.
- (c) Violation of federal, state, local or administrative laws, rules, or regulations.

##### **115.5.2 RESPONSIBILITIES OF THE SHERIFF**

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 Undersheriff and/or Facility Manager for further investigation or action.

Once the Sheriff is satisfied that no further investigation or action is required by staff, the Undersheriff shall determine the amount of discipline, if any, to be recommended.

In the event disciplinary action is recommended, the Sheriff shall provide the employee with written (Skelly) notice of the following information within one year of the date of the discovery of the alleged misconduct (absent an exception set forth in Government Code § 3304(d) or 3508.1):

- (a) Specific charges set forth in separate counts, describing the conduct underlying each count.
- (b) A separate recommendation of proposed discipline..
- (c) A statement that the employee has been provided with or given access to all of the materials considered by the Sheriff in recommending the proposed discipline.
- (d) An opportunity to respond orally or in writing to the Sheriff within five days of receiving the Skelly notice.
  - 1. Upon a showing of good cause by the employee, the Sheriff may grant a reasonable extension of time for the employee to respond.
  - 2. If the employee elects to respond orally, the presentation shall be recorded by the Department. Upon request, the employee shall be provided with a copy of the recording.



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##### 115.5.3 EFFICIENCY

- (a) Neglect of duty.
- (b) Unsatisfactory work performance including, but not limited to, failure, incompetence, inefficiency or delay in performing and/or carrying out proper orders, work assignments or the instructions of supervisors without a reasonable and bona fide excuse.
- (c) Concealing, attempting to conceal, removing or destroying defective or incompetent work.
- (d) Unauthorized sleeping during on-duty time or assignments.
- (e) Failure to notify the Office within 24 hours of any change in residence address or contact numbers.
- (f) Failure to notify the Department of Human Resources of changes in relevant personal information (e.g., information associated with benefits determination) in a timely fashion.
- (g) Failure to properly supervise a housing unit, including but not limited to, leaving assigned duty post unattended, leaving a post out of sight and/or sound of inmates or excess time away from duty post without supervisor permission.

##### **115.6 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) This 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 cause further investigation to be conducted, the employee shall be provided with the results of such subsequent investigation 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.
- (f) Once the employee has completed his/her response or, if the employee has elected to waive any such response, the Sheriff shall consider all information received in regard to the recommended discipline. The Sheriff shall thereafter render a timely written decision to the employee imposing, modifying or rejecting the recommended

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discipline. In the event of a termination, the final notice of discipline shall also inform the employee of the reason for termination and the process to receive all remaining fringe and retirement benefits.

- (g) Once the Sheriff has issued a written decision, the discipline shall become effective.

#### **115.7 RESIGNATIONS/RETIREMENTS PRIOR TO DISCIPLINE**

In the event that an employee tenders a written retirement or resignation prior to the imposition of discipline, it shall be noted in the file.

The tender of a retirement or resignation by itself shall not serve as grounds for the termination of pending discipline.

#### **115.8 POST-RESPONSE PROCEDURE**

In situations resulting in the imposition of a suspension, punitive transfer, demotion or termination of a non-probationary employee, the employee shall have the right to an evidentiary appeal of the Sheriff's imposition of discipline pursuant to the operative collective bargaining agreement and personnel rules.

## **Discriminatory Harassment**

### **117.1 PURPOSE AND SCOPE**

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

### **117.2 POLICY**

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

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

### **117.3 DEFINITIONS**

Definitions related to this policy include:

#### **117.3.1 DISCRIMINATION**

The Office prohibits all forms of discrimination, including any employment-related action by a member that adversely affects an applicant or member and is based on actual or perceived race, ethnicity, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, pregnancy, genetic information, veteran status, marital status, and any other classification or status protected by law.

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

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

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#### 117.3.2 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.

#### 117.3.3 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.

#### 117.3.4 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 office rules or regulations, or any other appropriate work-related communication between supervisor and member.

### **117.4 RESPONSIBILITIES**

This policy applies to all office members, who shall follow the intent of these guidelines in a manner that reflects office policy, professional 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 Personnel Manager, 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 retaliation, is encouraged to promptly report such conduct in accordance with the procedures set forth in this policy.

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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.

##### 117.4.1 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 Personnel Manager, the County Administrator, or the California Civil Rights Department for further information, direction, or clarification (Government Code § 12950).

##### 117.4.2 SUPERVISOR RESPONSIBILITIES

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

- (a) Continually monitoring the work environment and striving to ensure that it is free from all types of unlawful discrimination, including harassment or retaliation.
- (b) Taking prompt, appropriate action within their work units to avoid and minimize the incidence of any form of discrimination, harassment, or retaliation.
- (c) Ensuring that their subordinates understand their responsibilities under this policy.
- (d) Ensuring that members who make complaints or who oppose any unlawful employment practices are protected from retaliation and that such matters are kept confidential to the extent possible.
- (e) Making a timely determination regarding the substance of any allegation based upon all available facts.
- (f) Notifying the Sheriff or Personnel Manager in writing of the circumstances surrounding any reported allegations or observed acts of discrimination, harassment or retaliation no later than the next business day.

##### 117.4.3 SUPERVISOR'S ROLE

Supervisors and managers shall be aware of the following:

- (a) Behavior of supervisors and managers should represent the values of the Office and professional custodial standards.
- (b) False or mistaken accusations of discrimination, harassment, or retaliation can have negative effects on the careers of innocent members.

Nothing in this section shall be construed to prevent supervisors or managers from discharging supervisory or management responsibilities, such as determining duty assignments, evaluating or counseling members, or issuing discipline in a manner that is consistent with established procedures.

##### 117.5 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

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discrimination, retaliation, or harassment shall be fully documented and promptly and thoroughly investigated.

#### 117.5.1 SUPERVISORY 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 their 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.

#### 117.5.2 FORMAL INVESTIGATION

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

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

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

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

#### 117.5.3 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.

### **117.6 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:

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

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##### 117.6.1 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.

##### **117.7 TRAINING**

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

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

##### 117.7.1 STATE-REQUIRED TRAINING

The Training Coordinator 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 Coordinator should ensure that employees are provided the following website address to the training course: <https://calcivilrights.ca.gov/> (Government Code § 12950; 2 CCR 11023).

##### 117.7.2 TRAINING RECORDS

The Training Coordinator 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).

##### **117.8 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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#### **117.9 WORKING CONDITIONS**

The 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 or City employees who are similarly tasked (2 CCR 11034).



## Grievances

### 119.1 PURPOSE AND SCOPE

The purpose and scope of the employee grievance process, along with procedures and appeals, for the Sheriff's Office is enforced in accordance with County Civil Service Rule 4.

## Post Orders

### 120.1 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.

### 120.2 POLICY

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

### 120.3 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.

### 120.4 REVIEW AND UPDATE

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

### 120.5 TRAINING

The Jail Training Officers 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 Facility Manager. The Training Coordinator will be responsible for specialized training; 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

### 121.1 PURPOSE AND SCOPE

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

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

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

### 121.2 POLICY

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

### 121.3 RETALIATION PROHIBITED

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

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

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

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##### 121.3.1 RETALIATION PROHIBITED FOR REPORTING VIOLATIONS

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

##### **121.4 COMPLAINTS OF RETALIATION**

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

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

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

##### **121.5 SUPERVISOR RESPONSIBILITIES**

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

The responsibilities of supervisors include but are not limited to:

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

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

#### **121.6 COMMAND STAFF RESPONSIBILITIES**

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

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

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

#### **121.7 WHISTLE-BLOWING**

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

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

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

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

##### **121.7.1 DISPLAY OF WHISTLE-BLOWER LAWS**

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

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#### **121.8 RECORDS RETENTION AND RELEASE**

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

#### **121.9 TRAINING**

This policy should be reviewed with each new member.

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

## **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 office time can endanger the health and safety of office members and the public.

Members who have consumed an amount of an alcoholic beverage or taken any medication, or combination thereof, that would tend to adversely affect their mental or physical abilities shall not report for duty. Affected members shall notify the Shift Commander 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.

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

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

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

### 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



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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 REQUESTING SCREENING TESTS**

The Sheriff's Office may order an employee to submit to a screening test if the Office:

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

(b) Informs the employee of the specific facts supporting its belief and prepares a written record of those facts, and:

1. Informs the employee in writing whether the test will be for alcohol or drugs or both.
2. Informs the employee that the result of the test is not admissible in any criminal proceeding against him/her.
3. The sample shall be taken by the Professional Standards Unit Commander or his/her designee.
4. A split sample shall be obtained.

#### **200.7 SCREENING TESTS**

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

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

##### **200.7.1 SUPERVISOR RESPONSIBILITIES**

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

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

#### 200.7.2 DISCIPLINE

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

- (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.

#### **200.8 WORK RESTRICTIONS**

If any personnel inform a supervisor that he/she has consumed any alcohol, drug or medication that could interfere with the safe and efficient performance of his/her duties, the employee may be required to obtain clearance from his/her physician before he/she continues to work.

If a supervisor reasonably believes, based upon objective facts, that any person's ability to perform his/her duties safely and efficiently may be impaired by the consumption of alcohol or other drugs, the supervisor may ask the person whether he/she has consumed any alcohol or other drugs and, if so the amount and type of alcohol or other drug consumed and the time of consumption, and the name of the person who prescribed the controlled substance.

If the supervisor reasonably believes, based on objective facts, that a person is impaired by the consumption of alcohol or other drugs, the supervisor shall prevent the person from continuing work and shall transport him/her or cause him/her to be transported safely away from the Sheriff's Office.

#### **200.9 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).

#### **200.10 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

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separately in the member's confidential medical file in accordance with the Personnel Records Policy.

## Financial Practices

### 202.1 PURPOSE AND SCOPE

The Sheriff shall prepare and present an annual budget request that ensures an adequate allocation of resources for facility operations and programming. Budget requests shall be prepared in the manner and detail prescribed by the Office. Service goals and objectives should be delineated in the budget plan.

### 202.2 POLICY

The Office's responsibilities include the development of a budget plan, submitting the plan to the County Administrator, and monitoring the facility's progress toward meeting its budget objectives throughout the fiscal year.

A fiscal system has been established that accounts for all income and expenditures on an ongoing basis. Methods for collecting, safeguarding and disbursing monies shall comply with established accounting procedures.

### 202.3 BUDGET PLAN

The Facility Manager and their designees receive quarterly projections of expenditures for personnel, operating expenses, equipment and capital projects from Fiscal Services. A record of a historical pattern of expenditures along with a justification for new expenditures should be used as the supporting documentation in the development of the budget plan.

Once completed, the budget plan will be submitted to the Administrative Office for review and approval and/or returned to the Office for additional development. Once the budget plan has been approved by the Administrative Office or the authorized designee, the Office may initiate expenditures in accordance with the plan.

### 202.4 FISCAL ACCOUNTING AND MANAGEMENT OF APPROVED BUDGET

The Administrative Office is responsible for monitoring the facility's progress toward meeting its budget objectives throughout the fiscal year. Data on key performance measures should be collected and evaluated biannually and reviewed by the Sheriff, the Facility Manager and the Department Administrator. Reports should contain at a minimum the following information:

- The budget amount
- The amount expended for the month
- The year-to-date amount expended
- The cumulative total year-to-date expenditures plus outstanding encumbrances

When the Facility Manager or their designee receives the quarterly budget report, he/she should review all of the expenditure accounts for risk indicators, such as:

- Significant variations in expenditures in an account used consistently, where the amounts charged are expected to vary little, if any, from month to month.

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- Expenditures that are significantly beyond the forecasted amounts or whether the year-to-date percentages expended are significantly higher than the percentage of time elapsed.

Fiscal data collected during the year should be used to formulate a budget for the following year.

#### **202.5 TRANSFERRING FUNDS AMONG BUDGET CATEGORIES**

Unless otherwise specified, the transfer of funds among budget categories may require the approval of the Administrative Office.

#### **202.7 STAFFING PLAN**

The Facility Manager or their designee should maintain an up-to-date staffing plan for the purpose of exercising positional control. The staffing plan should include a comprehensive list of all positions in this facility. Each position has a descriptive job title that is associated with a description of the position's duties and responsibilities. Each position will have a written job description for all position classifications and post assignments that define responsibilities, duties and qualifications.

The Facility Manager or their designee should adhere to the following strategies for the management of position control and personnel costs:

- (a) Ensure that this facility is staffed with the appropriate number and type of staff. The proper allocation and deployment of staff across shifts and functional units is essential. In addition, the availability of the right classification of staff (e.g., custody staff supervising inmates, maintenance staff performing maintenance, food service staff preparing meals) with the appropriate job skills and training enhances efficiency.
- (b) Strategically time the filling of newly authorized positions or vacancies in current positions. Strategic timing is important throughout the budget year to create vacancy savings that can be used to address current budget year shortfalls.
- (c) Manage the use of overtime carefully. The historical use of overtime should be tracked to make the case for additional staff and/or to provide sufficient funding in an overtime line item. The use of overtime should also be monitored at regular intervals to verify that it is being used within projected levels.
- (d) Manage the use of part-time staff. The number of hours worked by part-time staff should be monitored to ensure that part-time employees are not working in excess of what has been authorized (e.g., a part-time employee should be working no more than an average of 20 hours per week).
- (e) Establish and maintain procedures to ensure the accuracy and integrity of payroll documentation. Time cards, time sheets and related documentation should reflect actual hours worked.
- (f) Consider the impact of position upgrades on the entire job classification. An upgrade for one position may set the stage for upgrades of similar positions within the same job classification.

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##### 202.7.1 INSURANCE REQUIREMENTS

The Office shall ensure, by way of office risk managers, the procurement of adequate liability coverage of the jail operations. Coverage shall include, at minimum, workers' compensation, civil liability and the public employee blanket bond.

## Supervision of Incarcerated Persons

### **204.1 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.

### **204.2 POLICY**

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

### **204.3 SUPERVISION OF INCARCERATED PERSONS**

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

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

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

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

The Facility Manager 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).

### **204.4 SEPARATION OF DUTIES**

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

## Prohibition on Incarcerated Person Control

### **206.1 PURPOSE AND SCOPE**

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

### **206.2 POLICY**

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

### **206.3 EDUCATION, DRUG, OR ALCOHOL PROGRAM ASSISTANTS**

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



## Equipment Inventory and Supplies

### 208.1 PURPOSE AND SCOPE

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

### 208.2 POLICY

With the exception of medical supplies, which are ordered by the medical staff, Finance Department is responsible for the purchasing or authorizing and acquisition of materials and equipment for this facility. Supplies and equipment that are not needed for immediate use should be stored in a secure storage area.

Requisition forms bearing the signature of the Facility Manager or an authorized designee should be completed and received by the Finance Department before any supplies or equipment are purchased and distributed to the facility. Any encumbrance to this facility's budget requires review and approval by the Facility Manager or an authorized designee.

The Office of Finance Department, in conformance with established policies, is responsible for negotiating all other purchases.

### 208.3 PURCHASING

The Facility Manager or authorized designee is responsible for managing the purchasing process to ensure that amounts and types of purchases fall within budget parameters. The Facility Manager or authorized designee must also ensure that this facility's purchasing process complies with applicable laws, regulations and office policies.

With approval of the Facility Manager or an authorized designee, small purchases of under \$100 that are a critical need may be procured by way of a petty cash voucher.

Personnel with spending authority should adhere to the following strategies:

- (a) Be knowledgeable about the county's requirements and procedures for purchasing goods and services.
- (b) Establish a working relationship with this facility's purchasing agent.
- (c) Provide the purchasing agent with information describing the types of goods and services required to operate the facility.
- (d) Ensure that staff with spending authority follow procedures that outline the process for submission and approval of purchase requisitions.
- (e) Review purchase requisitions to verify the need, urgency and priority.
- (f) Monitor service contracts to ensure that this facility is receiving the scope and quality of services specified in the contract.

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- (g) Regularly monitor expenditures to make certain the purchase of goods and services is charged to the appropriate accounts and within budget limits.
- (h) Keep purchase records to maintain the integrity and availability of purchasing documents, including requisitions, purchase orders, receiving reports and invoices.

## Tool and Culinary Equipment

### 209.1 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 incarcerated person population. While there are times that specific incarcerated person 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)).

### 209.2 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)).

### 209.3 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.

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 incarcerated persons are present, the incarcerated persons shall be locked down by staff supervising the area.

When the person has finished working in the area, a deputy will ensure that all tools are accounted for by completing a thorough search of the work area. 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 incarcerated persons may be released from lockdown.

### 209.4 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 incarcerated person workers who are classified to work outside the secure perimeter of the facility will be allowed to possess exterior-use tools. The deputy responsible for supervising incarcerated person workers on outside work crews will assign all tools for this purpose at the beginning of the shift.

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When an incarcerated person worker is finished with that tool, the responsible staff member shall ensure all tools are returned. Incarcerated person workers shall not be permitted to pass tools between each other except under the direct supervision of a deputy.

All tools will be returned to the tool storage area at the end of each shift. Until all tools are accounted for, incarcerated person workers should not be released from the work assignment.

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

#### **209.5 KITCHEN EQUIPMENT**

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

All kitchen shall be stored in a locked cabinet. All knives shall be returned to the secure cabinet when not in use.

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

Incarcerated person workers shall not be permitted to pass knives between each other except under the direct supervision of a staff member.

All knives will be returned to the locked kitchen knife cabinet at the end of each shift and must be accounted for prior to any incarcerated person worker being released from the work assignment.

In the event that a kitchen knife is missing, the cook shall immediately notify the on-duty supervisor or Correctional Deputy, who shall initiate immediate action to locate or account for the missing knife. A thorough search for the knife will be undertaken and an incident report shall be completed by the cook responsible for the supervision of the use of the tool. The incident report with all relevant information shall be forwarded to the Correctional Lieutenant.

- All kitchen knives are engraved with a number 1-10 and *SLO Sheriff's Office* on the blade.
- Kitchen Cooks inventory the knives at the beginning and end on their shift.
- Incarcerated persons requesting a knife must fill out the *Knife Log Sheet* with the proper date, purpose, time and incarcerated person ID. The Kitchen Cooks will issue the knife and cutting glove with the log time, in/out, and initial the log sheet.

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##### **209.6 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 incarcerated persons 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)). incarcerated persons who are assigned tasks that require these tools shall be closely supervised.

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 incarcerated person who had access to the tool.
- (b) Conducting a thorough search of the immediate area for the missing item.
- (c) Initiating a facility-wide search.

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

## Disposition of Evidence

### 212.1 PURPOSE AND SCOPE

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

### 212.2 POLICY

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

### 212.3 INITIAL SEIZURE OF EVIDENCE

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

- (a) Unload any firearm located in the approved loading/unloading area outside of the facility. If it is a revolver, the cylinder should be left open. If it is a semi-automatic pistol, the magazine shall be removed and the slide locked back in an open position. The cartridges and/or magazine will be packaged separately and booked with the firearm.
- (b) Sheath any knife or other stabbing instrument in its holster (if any), or attach (tape) stiff cardboard to completely cover the blade.
- (c) Place needles, such as syringes, into a hard plastic container that cannot be punctured by the needle.
- (d) If the contraband is a suspected "home brew" alcoholic beverage, the handling deputy shall place a sample of the liquid in a plastic container that can be safely sealed. The remainder of the liquid will be treated as a biohazard and carefully disposed of as recommended by the environmental health official.

#### 212.3.1 PACKAGING CONTAINER

Employees shall package all property, except narcotics and dangerous drugs in a suitable container available for its size. Knife boxes should be used to package knives, and syringe tubes should be used to package syringes and needles.

A property bar code labels shall be securely attached to the outside of all items or group of items packaged together.

#### 212.3.2 PACKAGING NARCOTICS

The deputy seizing narcotics and dangerous drugs shall retain such property in their possession until it is properly weighed, packaged, tagged, and placed in the designated narcotics locker.

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Prior to packaging and if the quantity allows, a presumptive test should be made on all suspected narcotics. If conducted, the results of this test shall be included in the deputy's report.

Narcotics and dangerous drugs shall be packaged in an envelope of appropriate size available in the report room. The booking deputy shall initial the sealed envelope and the initials covered with cellophane/evidence tape. Narcotics and dangerous drugs shall not be packaged with other property. A completed bar code label shall be attached to the outside of the container.

#### **212.4 PROPERTY BOOKING PROCEDURE**

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

- (a) Complete the property form describing each item of property separately, listing all serial numbers, owner's name, finder's name and other identifying information or markings.
- (b) Mark each item of evidence with the booking employee's initials and the date booked using the appropriate method to prevent defacing or damaging the value of the property.
- (c) Complete an evidence/property tag and attach it to each package or envelope in which the property is stored.
- (d) Place the case number in the upper right corner of the bag or in the appropriate field of the evidence/property tag.
- (e) The original property form shall be submitted with the case report. A copy shall be placed with the property in the temporary property locker or with the property if it is stored somewhere other than a property locker.
- (f) When the property is too large to be placed in a locker, the item may be retained in the secure supply room or another area that can be secured from unauthorized entry. Place the completed property form into a numbered locker indicating the location of the property.

##### **212.4.1 NARCOTICS AND DANGEROUS DRUGS**

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

##### **212.4.2 EXCEPTIONAL HANDLING**

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

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##### 212.4.3 RECORDING OF PROPERTY

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

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

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

##### 212.4.4 PROPERTY CONTROL

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

Deputies desiring property for court shall contact the property officer at least one day prior to the court day.

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

##### 212.4.5 TRANSFER OF EVIDENCE TO CRIME LABORATORY

The transporting employee will check the evidence out of property, indicating the date and time on the property control card, and complete a request for laboratory analysis.

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

##### 212.4.6 STATUS OF PROPERTY

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

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

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



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##### **212.5 RELEASE OR DISPOSITION OF UNCLAIMED FUNDS AND PROPERTY**

The employee managing the case or a supervisor shall authorize the disposition or release of all evidence and property coming into the care and custody of the Office.

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

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

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

The Property supervisor or the authorized designee shall submit a report of presumed abandoned property or funds once a year to the Sheriff and the Finance Department, or more frequently as directed. The Property supervisor may dispose of property in compliance with existing laws upon receipt of proper authorization from the Sheriff.

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

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

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

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

##### **212.6 DISPOSITION OF PROPERTY**

All property not held for evidence in a pending criminal investigation or proceeding, and held for three months or longer because the owner has not been located or has failed to claim the property,

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may be disposed of in compliance with existing laws, upon receipt of proper authorization for disposal.

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

#### **212.7 UNCLAIMED MONEY**

Except as otherwise provided by law, money, excluding restitution to victims, that is in the custody of this office and is no longer needed as evidence, and that remains unclaimed after three years, will be transferred to the general fund after proper notice has been given. Before transferring the money to the general fund, the Office shall publish a notice each week for a period of two consecutive weeks in a local newspaper of general circulation, in accordance with all laws, ordinances and regulations (Government Code § 50050 et seq.). Such notice shall state the amount of money, the fund in which it is held and that the money will become the property of the office on a designated date, between 45 days and 60 days after the first publication of the notice (Government Code § 50051).

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

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

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## Records and Data Practices

### 214.1 PURPOSE AND SCOPE

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

### 214.2 ACCESS TO CRIMINAL RECORDS

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

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

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

### 214.3 STAFF TRAINING

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

## Research Involving Incarcerated Persons

### 216.1 PURPOSE AND SCOPE

The purpose of this policy is to establish safeguards and guidelines to protect incarcerated persons from being used as research subjects in medical and other research experiments based only on their status as incarcerated persons and without proper approval, review or informed consent.

### 216.2 POLICY

The San Luis Obispo County Sheriff's Office will conduct and support research that improves operations, enhances professional knowledge, decreases recidivism and advances the office's mission in accordance with existing laws and with appropriate protection of all incarcerated persons. However, the use of incarcerated persons for medical, pharmaceutical, or cosmetic experiments is prohibited.

### 216.3 AUTHORIZATION REQUIREMENTS

Prior to initiating any approved research, all persons conducting research in this facility must agree to abide by all office policies relating to the security and confidentiality of incarcerated person 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 incarcerated persons 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 Facility Manager 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 incarcerated persons. The Sheriff should consult and seek guidance from the legal counsel serving the Office or other legal expert in these matters.

Incarcerated persons are not precluded from individual treatment based on the need for a specific medical procedure that is not generally available. An incarcerated persons's treatment with a new

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medical procedure by the incarcerated person's own physician shall be undertaken only after the incarcerated person has received a full explanation of the positive and negative features of the treatment, and only with the incarcerated person's informed consent.

#### **216.4 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.

##### **216.4.1 BIOMEDICAL RESEARCH**

Research relating to or involving biological, medical or physical science shall not be conducted on any incarcerated person. 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 incarcerated persons routinely participate (Penal Code § 3502).

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

#### **216.5 INCARCERATED PERSONS IN COMMUNITY-BASED RESEARCH**

When incarcerated persons who are participants in a community-based research protocol are booked into the facility, the following shall occur:

- (a) Upon intake, the facility 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 incarcerated person.

#### **216.6 HUMAN RESEARCH STUDIES**

This office does not endorse enrolling incarcerated persons into human research studies. Requests to enroll inmates in human research studies will not ordinarily be approved. However, any request to enroll an incarcerated person 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.

## Incarcerated Persons Records

### 218.1 PURPOSE AND SCOPE

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

### 218.2 POLICY

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

#### 218.2.1 RECORD MAINTENANCE

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

- (a) Booking Unit:
  - 1. Information gathered during the admission process
  - 2. Photographs and fingerprints cross referenced to the booking number
  - 3. Duration of confinement
  - 4. Court-generated background information
  - 5. Cash and property receipts
  - 6. Special visit forms/Visitation records
  - 7. Court appearances, documents and the disposition of hearings
- (b) Classification Unit:
  - 1. Housing history records
  - 2. Reports of disciplinary events and dispositions
  - 3. Grievances and dispositions
  - 4. Reports of incidents or crimes committed during confinement
  - 5. Request forms
  - 6. Work assignments
  - 7. Classification records, including incarcerated person classification levels and housing restrictions
- (c) Medical/Mental Health Unit
  - 1. Medical, dental, mental health, drug and alcohol screenings, assessments, treatments, medications

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The incarcerated person records shall be identified and separated according to a format developed and approved by the Facility Manager or the authorized designee.

#### **218.2.2 RELEASE OF INCARCERATED PERSON RECORDS**

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

#### **218.2.3 ELECTRONIC RECORD MAINTENANCE**

All incarcerated person records and data maintained in an electronic format shall be accessible only through a login/password-protected system capable of documenting by name, date and time any person who has accessed the information. The Facility Manager 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.

#### **218.2.4 RECORDS RETENTION**

Incarcerated person records shall be maintained consistent with the established records retention schedule.

#### **218.2.5 ARCHIVED INCARCERATED PERSON RECORD MAINTENANCE**

Upon release from custody, all incarcerated person records listed under Policy Section C 218.2.1, sub heading: Booking Unit, shall be archived in an electronic version. All hard copy/paper format will be disposed of in such a way as to maintain the security and confidentiality of the records.

Archived incarcerated person records under sub heading: Classification Unit and Medical/Mental Health unit will be stored in either a hard copy/paper format or electronic version. If records are kept in a hard copy/paper format, they will be kept in a locked storage area as to maintain security and confidentiality of the records.

### **218.3 INFORMATION SHARING REGARDING IMMIGRATION STATUS**

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

- (a) Sending information to, or requesting or receiving such information from federal immigration officials
- (b) Maintaining such information in office records
- (c) Exchanging such information with any other federal, state or local government entity

Nothing in this policy restricts sharing information permissible under the California Values Act.

## Report Preparation

### 220.1 PURPOSE AND SCOPE

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

### 220.2 REPORT PREPARATION

Employees should ensure that reports are sufficiently detailed for their purpose and free from errors prior to submission. Reports shall be prepared by the staff assigned to investigate or document an incident, approved by a supervisor and submitted to the Facility Manager 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 incarcerated person, escape, a major disturbance, a facility emergency or an unsafe condition at the facility shall be submitted to the Facility Manager 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.

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.

### 220.3 REQUIRED REPORTING

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

#### 220.3.1 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.

#### 220.3.2 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):



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- (a) Non-criminal incidents of rule violations by incarcerated persons.
- (b) Attempted suicide or suicidal ideation on the part of an incarcerated person, 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 incarcerated persons or their housing areas.
- (g) Detaining or handcuffing any visitor at the facility.
- (h) Traffic collisions involving office vehicles.
- (i) Risk management incidents to include injuries to incarcerated persons and lost or damaged property.
- (j) Accidental injuries of staff, incarcerated persons or the general public.

#### **220.3.3 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 incarcerated persons 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.

#### **220.3.4 INJURY OR DAMAGE BY OFFICE PERSONNEL**

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

#### **220.3.5 USE OF FORCE**

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

#### **220.4 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.

#### **220.5 REPORT CHANGES OR ALTERATIONS**

Reports that have been approved by a supervisor and submitted 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 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.

## Key and Electronic Access Device Control

### 221.1 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 incarcerated persons, 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.

### 221.2 POLICY

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

#### 221.2.1 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. The identifying numbers or code on keys shall not correspond to numbers/codes on locks.

A separate secure document identifying all keys will be maintained by the employee who's collateral assignment is Key Control.

#### 221.2.2 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 be stored in a locked enclosure in Central Control or issued to a supervisor. Exterior door keys shall not be permitted inside the facility except during an emergency requiring access to the exterior doors.

#### 221.2.3 KEY CONTROL

All facility keys shall be maintained in a locked key box within the Central Control room. This room shall have controlled access for staff only. Each person assigned to the facility shall be issued key tags bearing his/her employee number. Keysets will be exchanged for key tags to maintain a record of which employee has which set. At the end of a shift, employees shall exchange all keys for their key tags.

Under no circumstances shall an employee pass a key or keyset to another employee, unless otherwise exchanged with the appropriate key tag. All keys and key tags must be checked out through the control process. Employees shall not possess any key for which they have not been authorized.

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

Deputies assigned to Central Control shall, at the beginning and end of their respective shifts, inventory the key box and its contents. All keys must be accounted for before the deputy may end his/her shift.

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

#### 221.2.4 LOCK POLICY

All security perimeter entrances, Central Control doors and cell doors shall be kept locked, except when used for admission or exit of employees, incarcerated persons 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.

#### 221.2.5 TESTING

Locks to security doors or gates shall be tested randomly for proper function and operation.

#### 221.2.6 EXTERIOR DOOR AND ARMORY KEYS

Keys for exterior doors to the facility shall be kept in a locked cabinet in a secure location, outside of the facility's secure perimeter. The Correctional Deputy assigned to Central Control shall, at the beginning and end of their respective shifts, inventory and account for these keys.

#### 221.2.7 MISSING KEYS

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

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

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

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

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##### **221.2.8 DAMAGED KEYS OR LOCK**

Damaged keys or locks shall be promptly reported to a supervisor. No part of a broken key shall be left in the lock. All portions of the damaged key must be turned in to the on-duty 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 incarcerated person shall be secured in a cell, detention room or area that has inoperable locks.

##### **221.3 KEY CONTROL RECORDS**

A shift roster will be maintained for the accounting and security of all keysets. Each shift is responsible for reporting any key malfunctions or missing keysets to the employee who's collateral assignment is Key Control.

##### **221.4 ELECTRONIC ACCESS DEVICES**

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

# Daily Activity Logs and Electronic Safety Check Logs

## 223.1 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.

### 223.1.1 DEFINITIONS

ATIMS - A software system where electronic daily activity logs are recorded and stored.

Unit Innovations Premises System - An automated logging system using handheld devices to record safety checks by scanning sensors throughout the facility.

Unit Premises Devices (UPD) - A handheld mobile phone device used to record safety checks.

Unit Premises Sensors (UPS) - Fixed markers mounted throughout the facility that are scanned by Unit Premises Devices to record safety checks.

## 223.2 POLICY

This policy establishes the requirement for the preparation, maintenance and retention of daily activity logs and permanent electronic safety check logs to provide a record of both routine activities and unusual events such as emergencies or other notable occurrences. Electronic logs will be maintained through the use of the Unit Premises System.

## 223.3 PROCEDURES

All members assigned to a security post shall use a Unit Premises Device (UPD) while conducting safety checks. This system will record all safety checks and maintain a permanent electronic record. All members assigned to a security post shall also prepare an accurate daily activity log. The daily activity log 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:

- (a) Black or blue 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/initials and ID 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.

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- (f) Handwritten log entries requiring modification shall be crossed out with one line, initialed with ID number, and a new entry made, noting that it is a correction.

#### **223.4 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
- Informal Counts
- Formal Counts
- Inspections and routine activities
- All searches/shakedowns
- Incarcerated person 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 incarcerated person complaint of illness or injury and the action taken
- Incarcerated persons use of exercise yard and dayroom
- Cleaning supplies distributed
- Haircuts
- Disciplinary actions
- Supervisor rounds to the housing area and/or to specific incarcerated person
- Unusual incarcerated person behavior
- Discovered contraband
- Activities and programs offered and the attendees
- Unusual occurrences
- Use of emergency equipment
- Any use of force

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

#### **223.6 ELECTRONIC SAFETY CHECK LOG**

The Unit Premises System will automatically record all safety checks when a Unit Premises Device scans a Unit Premises Sensor. In the event the Unit Premises System malfunctions entries

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of safety checks shall be made on the daily activity log until they have been repaired on fully operational.

#### **223.7 SUPERVISOR RESPONSIBILITIES**

Supervisors shall review the daily activity logs during the course of each shift. Supervisors shall sign and include the date and time of review on each paper log. When appropriate, supervisors should include comments in the Correctional Sergeant's log 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, identified as a scribe, 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

### 225.1 PURPOSE AND SCOPE

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

### 225.2 POLICY

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

### 225.3 REQUESTS FOR DISCLOSURE

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

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

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

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

#### 225.3.1 SUBPOENAS

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

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

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

#### 225.3.2 RELEASE OF PERSONNEL INFORMATION

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

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

The Office may release any factual information concerning a disciplinary investigation if the member who is the subject of the investigation (or the member's representative) publicly makes a statement that is published in the media and that the member (or representative) knows to be



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false. The disclosure of such information, if any, shall be limited to facts that refute any such false statement (Penal Code § 832.7).

#### 225.3.3 REQUESTS FOR DISCLOSURE OF FORMER EMPLOYEE FILES

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

#### 225.3.4 RELEASE OF LAW ENFORCEMENT GANG INFORMATION

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

#### **225.4 MEMBERS' ACCESS TO THEIR PERSONNEL RECORDS**

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

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

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

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- (h) Records relevant to any other pending claim between the Office and the member that may be discovered in a judicial proceeding

#### **225.5 SLO SHERIFF'S FILE**

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

- (a) Personal data, including photographs, marital status, names of family members, educational and employment history, or similar information. A photograph of the member should be permanently retained.
- (b) Election of employee benefits.
- (c) Personnel action reports reflecting assignments, promotions, and other changes in employment/appointment status. These should be permanently retained.
- (d) Original performance evaluations. These should be permanently retained.
- (e) Discipline records including copies of sustained personnel complaints (see the Personnel Complaints Policy).
  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 office file after the member has had the opportunity to read and initial the comment (Government Code § 3305).
  1. Once a member has had an opportunity to read and initial any adverse comment, the member shall be given the opportunity to respond in writing to the adverse comment within 30 days (Government Code § 3306).
  2. Any member response shall be attached to and retained with the original adverse comment (Government Code § 3306).
  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.

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#### **225.6 EVALUATION FILE**

The Evaluation File should contain, but is not limited to:

- (a) Supervisor log entries, notices to correct and other materials intended to serve as a foundation for the completion of timely performance evaluations.
  - 1. All materials intended for this interim file shall be provided to the employee prior to being placed in the file.
  - 2. Duplicate copies of items that will also be included in the employee's office file may be placed in this interim file in anticipation of completing any upcoming performance evaluation.
  - 3. Once the permanent performance evaluation form has been finalized the underlying foundation material and/or duplicate copies may be purged in accordance with this policy
  - 4. The evaluation file may be in electronic or written form
- (b) All rules of confidentiality and disclosure shall apply equally to the evaluation file.

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.

#### **225.7 TRAINING FILE**

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

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

#### **225.8 PROFESSIONAL STANDARDS UNIT FILE**

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

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(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).

#### **225.9 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.
- (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.

#### **225.10 RETENTION AND PURGING**

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

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

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#### **225.11 BRADY MATERIAL IN PERSONNEL FILES**

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

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

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

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

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

#### **225.12 CONFIDENTIALITY OF ALL PERSONNEL FILES**

All of the above-defined personnel records shall be deemed confidential and shall not be subject to disclosure except pursuant to the discovery procedures set forth in Evidence Code § 1043, et seq. and pursuant to Penal Code § 832.7 or in accordance with applicable federal discovery laws. Nothing in this section is intended to preclude review of personnel files by the County Administrator, County Counsel or other attorneys or representatives of the County in connection with official business.

#### **225.13 RELEASE OF PERSONNEL RECORDS AND RECORDS RELATED TO CERTAIN INCIDENTS, COMPLAINTS, AND INVESTIGATIONS OF DEPUTIES**

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

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

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

- All investigation reports.
- Photographic, audio, and video evidence.
- Transcripts or recordings of interviews.
- Autopsy reports.
- All materials compiled and presented for review to the District Attorney or to any person or body charged with determining whether to file criminal charges against a deputy in

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connection with an incident, whether the deputy's action was consistent with law and office policy for purposes of discipline or administrative action, or what discipline to impose or corrective action to take.

- Documents setting forth findings or recommending findings.
- Copies of disciplinary records relating to the incident, including any letters of intent to impose discipline, any documents reflecting modifications of discipline due to the *Skelly* or grievance process, and letters indicating final imposition of discipline or other documentation reflecting implementation of corrective action.

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

- (a) Records relating to the report, investigation, or findings of:
  1. The discharge of a firearm at another person by a deputy.
  2. The use of force against a person resulting in death or in great bodily injury (as defined by Penal Code § 243(f)(4)) by a deputy.
  3. A sustained finding involving a complaint that alleges unreasonable or excessive force.
  4. A sustained finding that a deputy failed to intervene against another deputy using force that is clearly unreasonable or excessive.
- (b) Records relating to an incident where a sustained finding was made by the Office or oversight agency regarding:
  1. A deputy engaged in sexual assault of a member of the public (as defined by Penal Code § 832.7(b)).
  2. Dishonesty of a deputy relating to the reporting, investigation, or prosecution of a crime, or directly relating to the reporting of, or investigation of misconduct by another deputy, including but not limited to any false statements, filing false reports, destruction, falsifying, or concealing of evidence, or perjury.
  3. A deputy engaged in conduct including but not limited to verbal statements, writings, online posts, recordings, and gestures involving prejudice or discrimination against a person on the basis of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran status.
  4. A deputy made an unlawful arrest or conducted an unlawful search.

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

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

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

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

#### 225.13.1 REDACTION

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

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

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)).

#### 225.13.2 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 deputy or against someone other than a deputy who engaged in misconduct or used the force.
- (b) Filed criminal charges

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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 office policy, but no longer than 180 days after the date of the office's discovery of the misconduct or use of force or allegation of misconduct or use of force.

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

In cases where an action to compel disclosure is brought pursuant to Government Code § 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)).

#### **225.14 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.



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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.

## Employee Compensation

### **227.1 PURPOSE AND SCOPE**

The purpose of this policy is to establish a process for reviewing compensation and benefit levels for all facility personnel when a labor organization process, Memorandum of Understanding (MOU ) or other methodology does not exist. The goal of a compensation and benefit package should be to establish competitive salary and benefits to ensure the ability to recruit, hire and retain qualified staff.

### **227.2 POLICY**

It shall be the policy of this Office to strive for parity of compensation and benefits with similar occupational groups in the state or region, whenever fiscal conditions permit, to ensure the ability to recruit, hire and retain qualified staff. Compensation and benefits for deputies should be equal to those for law enforcement officers working in the same organization or at the same level of government.

All compensation actions shall be in accordance with civil service rules, labor codes and MOUs for pay and benefits, and subject to fiscal conditions.

## Administrative and Supervisory Inspections

### 229.1 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 incarcerated persons 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.

### 229.2 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, incarcerated persons and the visiting public.

### 229.3 INSPECTIONS

The Facility Manager 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 incarcerated persons.
- (c) Communication between administrators, managers, supervisors, staff, incarcerated persons and the visiting public.
- (d) Compliance with policies.
- (e) Safety, security and sanitation concerns.
- (f) Incarcerated person concerns.
- (g) Meal services.

#### 229.3.1 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:

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

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#### **229.4 INSPECTIONS OF SECURITY EQUIPMENT**

The Facility Manager shall be responsible for designating a qualified person to conduct periodic inspections of all security devices, identifying those in need of repair or maintenance and providing a written report of the results of the inspection. The Facility Manager shall document all action taken to correct identified deficiencies, including maintenance records, and shall retain those records in accordance with established records retention schedules.

#### **229.5 DOCUMENTATION AND REPORTING**

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

The Shift Commander shall review the supervisor 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.

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## Perimeter Security

### 231.1 PURPOSE AND SCOPE

The purpose of this policy is to establish this facility's perimeters, to ensure that incarcerated persons 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)).

### 231.2 POLICY

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

#### 231.2.1 VISITORS

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

### 231.3 PROCEDURE

The secure perimeter shall be maintained by assigned staff. The Facility Manager 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 on-duty supervisor and the Central Control. The Central Control Deputy shall initiate an appropriate law enforcement response.

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

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

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

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

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

The vehicle sallyport are to be used for the transfer of inmates.

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

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

#### **231.4 PERIMETER CHECKS**

The Correctional Sergeant on-duty will ensure that a Correctional Deputy is assigned to conduct a perimeter security check once per shift and a roof check once per day, unless inclement weather does not allow. These checks should be at random and irregular intervals from the previous perimeter security check.

At a minimum Correctional Deputies should be alert for and report:

- Unsecured locks and doors
- Fire hazards
- Any type of tampering or damage to county property
- Suspicious individuals or activities
- Sanitation concerns
- Perimeter lighting
- Adequate fencing or walls to maintain a secure perimeter

## Accessibility - Facility and Equipment

### 233.1 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).

#### 233.1.1 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.

### 233.2 POLICY

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

### 233.3 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.
- 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.

#### 233.3.1 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.

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Members becoming aware of any potential ADA violation should document the issue in a memorandum and forward the memorandum to the Support Services Lieutenant 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.

#### **233.4 ADA COORDINATOR**

The Facility Manager should appoint a staff member to serve as the ADA coordinator, whose primary responsibilities include, but are not limited to, coordinating compliance with ADA requirements. The ADA coordinator should be knowledgeable and experienced in a variety of areas, including:

- (a) The office's structure, activities and employees, including special issues relating to the requirements of the jail.
- (b) The ADA and other laws that address the rights of people with disabilities, such as Section 504 of the Rehabilitation Act (29 USC § 794).
- (c) The accommodation needs of people with a broad range of disabilities.
- (d) Alternative formats and technologies that enable 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 incarcerated persons and the public with disabilities, as well as with local disability advocacy groups or other disability groups.
- (g) Negotiation and mediation.

##### **233.4.1 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.

#### **233.5 TRAINING**

The ADA coordinator should work with the Training Coordinator 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

### 235.1 PURPOSE AND SCOPE

This policy provides guidelines for media releases and media access to this facility's incidents and general public information.

### 235.2 POLICY

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

#### 235.2.1 MEDIA REQUEST

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

- (a) At no time shall any employee of this office make any comment or release any official information to the media without prior approval from a supervisor or the designated Public Information Officer.
- (b) In any situation involving a law enforcement agency, reasonable efforts shall be made to coordinate media releases with the authorized representative of each involved agency prior to the release of any information by this office.
- (c) Under no circumstance should any member of this office make any comment to the media regarding any law enforcement or corrections-related incident that does not involve this office without prior approval of the Sheriff or the authorized designee.

### 235.3 MEDIA ACCESS

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

- (a) The media representative shall produce valid press credentials that shall be prominently displayed at all times.
- (b) Media representatives may be prevented from interfering with emergency operations and investigations.
  - 1. In situations where media access would reasonably appear to interfere with the facility's security, emergency operations and/or an investigation, every reasonable effort should be made to provide media representatives with information regarding the incident in such a manner that does not compromise the safety and security of the incarcerated persons, staff or the facility itself.

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All data released to the media should be coordinated through the office Public Information Officer or other designated spokesperson.

- (c) No member of this office shall be subjected to media visits or interviews without the consent of the involved employee.
- (d) Media interviews with individuals who are in custody shall not be permitted without the approval of the Sheriff and the express consent of the person in custody. The supervisor shall obtain a signed waiver from the incarcerated person prior to being interviewed, photographed or videotaped.

#### **235.3.1 PROVIDING ADVANCE INFORMATION**

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

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

#### **235.4 SCOPE OF INFORMATION SUBJECT TO RELEASE**

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

- (a) The full name and occupation of the incarcerated person
- (b) The incarcerated person's physical description, including date of birth
- (c) Date and time of arrest
- (d) Date and time of booking
- (e) Location of arrest
- (f) The factual circumstances surrounding the incarcerated person's arrest
- (g) All charges the incarcerated person is being held on, including outstanding warrants, probation/parole holds
- (h) Amount of bail
- (i) The time and manner of the incarcerated person's release or the location where the incarcerated person is currently being held
- (j) Arresting agency

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

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

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

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

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

#### 235.4.1 RESTRICTED INFORMATION

It shall be the responsibility of the Facility Manager or the authorized designee to ensure that restricted information is not inappropriately released to the media by this office. When in doubt, authorized and available legal counsel should be consulted.

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

- (a) Confidential personnel information concerning staff and volunteers of the Office.
  - 1. The identities of custody personnel involved in major incidents may only be released to the media pursuant to consent of the involved personnel or upon a request processed in accordance with the Public Records Act.
- (b) Criminal history information.
- (c) Information that would tend to endanger the safety of any individual or jeopardize the successful completion of any ongoing investigation.
- (d) Information pertaining to pending litigation involving this office.
- (e) Information obtained in confidence.
- (f) Any information that is otherwise privileged or restricted under state or federal law.

## Community Relations and Public Information

### 237.1 PURPOSE AND SCOPE

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

### 237.2 RESPONSIBILITIES

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

- (a) The Board of State and Community Corrections Minimum Standards for Local Detention Facilities as found in Title 15 of the California Code of Regulations.
- (b) Facility rules and procedures affecting incarcerated persons as specified in 15 CCR sections:
  - 1. 1045, Public Information Plan
  - 2. 1061, Incarcerated Persons Education Plan
  - 3. 1062, Visiting
  - 4. 1063, Correspondence
  - 5. 1064, Library Service
  - 6. 1065, Exercise and Out of Cell Time
  - 7. 1066, Books, Newspapers, Periodicals, and Writings
  - 8. 1067, Access to Telephone
  - 9. 1068, Access to Courts and Counsel
  - 10. 1069, Incarcerated Persons Orientation
  - 11. 1070, Individual/Family Service Programs
  - 12. 1071, Voting
  - 13. 1072, Religious Observance
  - 14. 1073, Incarcerated Persons Grievance Procedure
  - 15. 1080, Rules and Disciplinary Action Penalties
  - 16. 1081, Plan for Discipline of Incarcerated Persons
  - 17. 1082, Forms of Discipline
  - 18. 1083, Limitations on Discipline
  - 19. 1200, Responsibility for Health Care Services

This information is to be made available at the facility's front desk and assembled into a binder or clearly posted for public viewing. Additionally, a copy should be made available in this facility's

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#### *Community Relations and Public Information*

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library or provided by other means for use by incarcerated persons. At the discretion of the Sheriff, the information may also be made available electronically. No information will be released on persons whose booking process is not completed.

#### **237.3 PROHIBITED MATERIALS**

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

#### **237.4 TOURS OF THE CUSTODY FACILITY**

Tours of this facility may be arranged through the Facility Manager, Correctional Lieutenant or Sergeant. 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 sign in form must be completed and a check for warrants may be conducted before an applicant is approved to participate in a tour.
- (c) Persons who tour this facility must display a Visitors Pass at all times or be part of a designated tour group.
- (d) Persons who tour this facility must be accompanied by custody personnel, at all times, while inside the secured perimeter of the facility.

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

#### **237.5 POLICY**

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

## Victim Notification of Inmate Release

### 239.1 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.

### 239.2 POLICY

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

### 239.3 PROCEDURE

The Facility Manager 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.

### 239.4 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.

#### 239.4.1 REQUIRED NOTIFICATIONS

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

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

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

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

If contact cannot be made and no means exist to leave a message with the person, the Shift Commander 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.

## Immigration Truth Act

### 240.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for compliance with the California Values Act, and related statutes, concerning responsibilities associated with immigration law, including cooperation with the Department of Homeland Security (DHS) and Immigration and Customs Enforcement (ICE), or other federal immigration officers, regarding persons arrested and booked into Sheriff's custody and other Office operations.

### 240.2 POLICY

It is the policy of this Office to comply with state law governing law enforcement's ability to interact and cooperate with federal immigration officers.

#### 240.2.1 INMATES PENDING RELEASE

Receipt of a DHS, Voluntary Notification of Release of Suspected Priority Alien (Form I-247N), or Immigration Detainer - Notice of Action (Form I-247A), provided by ICE, shall be treated as a request to inform DHS/ICE when a person is imminently going to be released from custody. Such information may be provided to DHS/ICE if made available to the public on the Office's web page and/or is public information. If the information has not been made publically available, the information may only be released to DHS/ICE if in compliance with the California Values Act, which requires a conviction for the crimes and under the criteria set forth in California Government Code section 7282.5.

Inmate release date information and/or other information requested by DHS/ICE may also be provided in cases in which the individual is arrested and taken before a magistrate on a charge involving a serious or violent felony, as identified in subdivision (c) of Section 1192.7 or subdivision (c) of Section 667.5 of the Penal Code, respectively, or a felony that is punishable by imprisonment in state prison, and the magistrate makes a finding of probable cause as to that charge pursuant to Section 872 of the Penal Code.

Requested information cannot be provided to DHS/ICE except in compliance with this policy. Information cannot be provided to DHS/ICE for individuals arrested, detained, or convicted of misdemeanors that were previously felonies, or were previously crimes punishable as either misdemeanors or felonies, prior to passage of the Safe Neighborhoods and Schools Act of 2014 as it amended the Penal Code, unless that information has been made available on the Office's web page and/or is public information.

### 240.3 PROCEDURES

Immigration and Custom Enforcement (ICE) Agent requirements:

- Prior to interviewing an inmate, an ICE Agent shall obtain a *San Luis Obispo County Jail ICE Interview Inmate's Rights* form from a Correctional Technician or authorized designee. The form shall be completely filled out prior to an interview.



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- After completion of the interview process, the *San Luis Obispo County Jail ICE Interview Inmate's Rights* form shall be turned over to booking for review, dissemination and filing.

#### Correctional Technician requirements:

- Responsible for providing any ICE agent who requests an interview with an inmate a *San Luis Obispo County Jail ICE Interview Inmate's Rights* form.
- Complete the form section designated "For Internal Office Use Only."
- Processing and placing of the completed form into the applicable inmate's *Booking Jacket*. A copy of the ICE "HOLD" or transfer request will be attached.

#### Correctional Deputy requirements:

- When requesting an inmate interview, ICE Agents must provide housing unit deputies with a completed *San Luis Obispo County Jail ICE Interview Inmate's Rights* form.
- Provide the form to the applicable inmate and confirm that the inmate understands the form and that it is voluntary.
- Ensure the appropriate sections are filled out correctly and that the inmate signs the form.
- Return the completed form to the ICE agent.

Procedural directions for data keeping are located on this Office's internal shared computer drive.

Members of this Office may not use immigration authorities as interpreters for law enforcement matters relating to individuals in Office Custody.

Members of this Office shall not consider citizenship and immigration status as a factor in determining a person's custodial classification level, including, but not limited to, whether the person is in removal proceedings, or whether immigration authorities have issued a hold request, transfer request, notification request, or civil immigration warrant against the individual.

Members of this Office shall not restrict access to any educational or rehabilitative programming, or credit-earning opportunity on the sole basis of citizenship or immigration status, including, but not limited to, whether the person is in removal proceedings, or immigration authorities have issued a hold request, transfer request, notification request, or civil immigration warrant against the individual.

#### **240.4 DETENTION STATUS**

This Office shall not intentionally detain an individual beyond when they could otherwise be released. Members of this Office may not transfer an individual in Office custody to immigration authorities unless authorized by a judicial warrant or judicial probable cause determination, or as otherwise set forth herein.

## Vehicle Safety

### 242.1 PURPOSE AND SCOPE

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

#### 242.1.1 ASSIGNED VEHICLE AGREEMENT

County owned vehicles assigned to personnel for their use within their job assignment may be used to transport the employee to and from their residence for work-related purposes. The employee shall sign an agreement setting the standard for how the vehicle shall be used and where it shall be parked when the employee is not on duty.

The agreement states that the vehicle shall only be used for work-related purposes and shall not be used for personal errands, or transports, unless special circumstances exist and the employee's supervisor gives authorization. The agreement also requires the employee to be responsible for insuring the vehicle's care and maintenance is completed as directed by County General Services.

The assignment of vehicles is at the discretion of the Sheriff. Assigned vehicles may be changed at any time and/or permission to take home a vehicle may be withdrawn at any time.

### 242.2 USE AND SECURITY OF OFFICE VEHICLES

All staff members who operate office-owned or leased vehicles must comply with all applicable state laws and must possess a valid driver's license endorsed for the type of vehicle operated.

A list of individuals who are authorized to drive office vehicles shall be maintained by the Facility Manager. The list shall be updated monthly to ensure that only qualified personnel who are in possession of a current and appropriately endorsed operator's license are on the list.

#### 242.2.1 USE OF SEAT BELTS

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

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

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

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

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

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

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

#### **242.2.2 VEHICLE SECURITY**

Office vehicles will be locked and the keys will be secured when not in use. The staff will make every effort to ensure that the vehicles are parked in a secure location.

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

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

#### **242.2.3 AUTHORIZED PASSENGERS**

Personnel operating Sheriff's Office owned vehicles shall not permit persons other than County employees or persons required to be conveyed in the performance of duty or as otherwise authorized to ride as a passenger in their vehicle.

#### **242.3 VEHICLE INSPECTIONS**

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

#### **242.4 VEHICLE SAFETY REPAIRS**

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

Anyone authorized to drive office vehicles is responsible for inspecting the interior and exterior of any assigned vehicle before placing the vehicle into service and again at the conclusion of his/her shift. Any previously unreported damage, mechanical problems, unauthorized contents or

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other problems with the vehicle shall be promptly reported to a supervisor and documented as appropriate.

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

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

#### **242.5 COLLISION DAMAGE, ABUSE AND MISUSE**

When any office-owned or leased vehicle is involved in a traffic collision, the involved member shall promptly notify a supervisor. A traffic collision report shall be filed with the agency having jurisdiction. The member shall complete the office's vehicle collision form.

When a collision involves any office vehicle or when a member of this office is an involved driver in a collision that occurs in this jurisdiction, and the collision results in serious injury or death or potentially involves any criminal charge, an outside agency should be summoned to handle the investigation. If the member is incapable of completing the office's vehicle collision form, a supervisor shall complete the form.

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

#### **242.6 TOLL ROAD USE**

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

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

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

- (a) Members operating office-owned vehicles for any reason other than an initial response to an emergency shall stop and pay the appropriate toll charge.
- (b) Members may submit for reimbursement from the Office for any toll fees.
- (c) Members driving office-owned vehicles through a toll plaza or booth during a response to an emergency shall draft a memo to his/her supervisor within five working days, explaining the circumstances.

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## Fitness for Duty

### 244.1 PURPOSE AND SCOPE

All deputies are required to be free from any physical, emotional, or mental condition which might adversely affect the exercise of peace officer powers. The purpose of this policy is to ensure that all deputies of the Sheriff's Office remain fit for duty and able to perform their job functions (Government Code § 1031).

### 244.2 POLICY

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

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

### 244.3 SUPERVISOR RESPONSIBILITIES

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

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#### **244.4 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.

#### **244.5 WORK-RELATED CONDITIONS**

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

Upon the recommendation of the Shift Commander or supervisor, and with the concurrence of the Facility Manager, 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.

#### **244.6 PHYSICAL AND PSYCHOLOGICAL EXAMINATIONS**

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

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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.

#### **244.7 APPEALS**

An employee who is separated from paid employment or receives a reduction in salary resulting from a fitness for duty examination shall be entitled to an administrative appeal as outlined in the Conduct Policy.

## Staffing Plan

### 246.1 PURPOSE AND SCOPE

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

### 246.2 POLICY

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

### 246.3 STAFFING PLAN REQUIREMENTS

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

At minimum, the staffing plan will include the following:

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

### 246.4 STAFFING ANALYSIS

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

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

The Facility Manager, in conjunction with the PREA coordinator, should ensure that staffing levels are sufficient to consistently and adequately fill essential positions, as determined by the staffing plan (28 CFR 115.13). Relief factors for each classification and position should be calculated into the staffing analysis to ensure staffing levels will consistently meet requirements. Staff should be deployed in an efficient and cost-effective manner that provides for the safety and security of the staff, inmates and the public.

The staffing analysis should be used to identify whether required activities are being performed competently and in compliance with current laws and office policies. If deficiencies are noted, the



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staffing analysis should also include recommendations regarding what corrective measures may be needed, including the following:

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

#### **246.4.1 DATA COLLECTION FOR ANALYSIS**

The following data should be collected and included in the annual staffing analysis:

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

#### **246.5 REPORTING**

The facility staffing plan shall be made available for review to the Board of State and Community Corrections (BSCC) staff at the time of their biennial inspection. The Facility Manager shall report the results of the BSCC biennial review and recommendations to the officials with fiscal responsibility for the facility (15 CCR 1027).

# Employee Speech, Expression and Social Networking

## 248.1 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.

### 248.1.1 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.

## 248.2 POLICY

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

## 248.3 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 San Luis Obispo County Sheriff's Office employees, such as posting personal information in a public forum, can result in compromising an employee's home address or family ties. Employees should therefore not disseminate or post any information on any forum or medium that could reasonably be anticipated to compromise the safety of any employee, an employee's family or associates. Examples of the type of information that could reasonably be expected to compromise safety include:

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

#### **248.4 PROHIBITED SPEECH, EXPRESSION AND CONDUCT**

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

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

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personal or social networking or other website or web page, without the express authorization of the Sheriff.

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

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

#### 248.4.1 UNAUTHORIZED ENDORSEMENTS AND ADVERTISEMENTS

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

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

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

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

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##### **248.5 PRIVACY EXPECTATION**

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

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

It also 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 a department computer or network. However, the Department may not require an employee to disclose a personal user name or password or open a personal social website, except when access is reasonably believed to be relevant to the investigation of allegations of work related misconduct (Labor Code § 980).

##### **248.6 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.

##### **248.7 TRAINING**

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

## Scheduling

### 250.1 POLICY

Shift change will occur on the Sunday of the first two-week pay period, excluding a holiday weekend, in January, May and September of each year. When a holiday falls on the first Monday of the first two week pay period, shift change will occur the Sunday of the start of the following pay period, regardless of additional holidays.

Staff shall make shift selections based on the following criteria:

- 1) Sheriff's Office needs
- 2) Custody Division needs
- 3) Seniority
- 4) Special employee needs. Special employee needs will be considered with organizational and office needs.

#### 250.1.1 DEFINITION

Seniority: Seniority is based on the date of permanent employment within the current job classification. Breaks in full-time employment shall be deducted from the original hire date, should an employee be re-hired from the reinstatement list for the current job classification. Leave without pay (LWOP) shall be considered in accordance with County Ordinance 2.44.040.

### 250.2 PROCEDURE

A. A list of available shifts will be posted prior to shift change.

B. Senior Correctional Deputies will pick from a group of predesignated shifts and days off.

C, Generally, custody staff will be allowed to remain on night-shift or day-shift for a period of twelve months. After a period of twelve months, Custody staff will be required to select a different shift from the shift they are currently on; unless a different shift is not available. Custody staff not able to rotate off night-shift or day-shift after sixteen months, due to a lack of seniority, will be rotated. Extenuating circumstances may be taken into consideration on an individual basis.

D, Custody staff on extended absences including but not limited to Military, FMLA, Injury, Sickness, shall adhere to the following procedures for shift selection. Custody staff will be authorized to participate in selecting a shift if the employee has worked at least half of the shift prior to going out on extended leave. If the employee fails to work half of the shift, upon return to work the employee will be assigned a shift based on Sheriff's Office needs.

E. Staff who complete training and go to OJT (On The Job Training) will be assigned a shift by their supervisor. Sheriff's Office needs take precedence.

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#### **250.3 ALTERNATIVE ASSIGNMENTS**

Temporary assignments for staff. Selection for alternative assignments will consist of, memo of interest, evaluation worksheet, and input from Correctional Sergeants and Lieutenants. In some cases interviews may be conducted to assist with selection.

1. The Sheriff may extend or rescind any alternative assignments to meet organizational needs.
2. Correctional staff may volunteer for these alternative assignments by submitting a memorandum of interest to the Correctional Lieutenant overseeing the program. The memorandum shall be submitted electronically.
3. If no memorandum of interest is received, staff shall be assigned to a position according to seniority of those not having previously worked the assignment, the most senior first.
4. At the conclusion of any staff's alternative assignment, a staff member may resubmit for another rotation in their current assignment. The request will be considered along with all other staff requests for that assignment. If chosen the rotation will be for the full term specific to that assignment. The Sheriff has the right to extend an assignment at the need of the department.
5. Upon the conclusion of any alternative assignment, staff will make a shift selection based off of seniority. Any open day-shift or night-shifts may be chosen without restrictions. The twelve month consecutive rule will begin with the first pick selected upon completing an alternative assignment.
6. Staff rotating out of an alternative assignment will be given less consideration when selection is being made to fill current vacant positions in alternative assignments. It is optimal for staff to work 3 consecutive shifts in the jail before being considered for an alternative assignment. However, the Sheriff's Office needs are at the forefront and may trump this caveat.
7. Staff selected to fill a vacant alternative assignment mid-shift may request for a full rotation of that assignment at the next shift change.
8. Shift selection in alternative assignments such as Court, Classification, Honor Farm, Female Honor Farm, ASU, Kansas Max and Service Deputy or others shall be conducted at the discretion of the supervising Correctional Sergeant per Sheriff's Office needs. Seniority will not be the only factor in determining shifts in alternative assignments. Supervising Correctional Sergeants will outline for staff how shifts are selected within their units.

#### **250.3.1 ALTERNATIVE ASSIGNMENT TERMS**

1. An assignment at the Honor Farm is one (1) year for Correctional Deputies and two (2) years for the Senior Correctional Deputy and the Correctional Sergeant; the Female Honor Farm is one (1) year. The Senior Correctional Deputy on the Male Honor Farm will remain on dayshift.
2. An assignment at Court Services is one (1) year for Correctional Deputies and two (2) years for the Senior Correctional Deputy and the Correctional Sergeant. Two (2) positions at Court Services are designated for Correctional Deputies with Class B licenses, and are two (2) year assignments.
3. An assignment as a member of CERT is two (2) years for Correctional Sergeants, Senior Correctional Deputies and Correctional Deputies. Selection for the assignments will consist of a

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memo of interest and a physical agility test.. This assignment may be extended at the discretion of the Sheriff or their authorized designee. See Custody Manual Policy 402.

4. An assignment in Classification is four (4) years for Correctional Deputies or Senior Correctional Deputies. The Correctional Sergeant position is a four (4) year assignment.

5. Correctional Deputies assigned to the Alternative Sentencing Programs Unit (Home Detention Program and Alternative Work Program, regardless of seniority, will be rotated through the unit on a yearly basis, allowing for a three (3) year term.

6. The Scheduling Correctional Sergeant will be rotated every two (2) years.

7. The Training Coordinator will be rotated every three (3) years.

8. The Correctional Sergeant Program Coordinator will be rotated every four (4) years.

9. The Correctional Sergeant assigned to Kansas Jail Max will be rotated every four (4) years.

10. The Administrative Sergeant assignment will be rotated every four (4) years.

11. An assignment as a Service Deputy is two (2) years for Correctional Deputies and Senior Correctional Deputies. Five (5) total positions will be available for the Service Deputy position; three of the positions are designated for Medical Programs Unit and two of the positions are designated for JBCT.

12. An assignment in Kansas Max is two (2) years. Seven (7) Correctional Deputy positions and one (1) Senior Correctional Deputy position is designated for Kansas Max. The Senior Correctional Deputy position will remain on day-shift.

13. An assignment to the Graphic Arts Program is determined by staff knowledge, training and expertise in this program. The length of time on this assignment will be reviewed each year to determine if a rotation is feasible.

#### 250.3.2 DIVE TEAM

Correctional Sergeants, Senior Correctional Deputies and Correctional Deputies have the opportunity to participate on the Sheriff's Dive Team. If selected, approved personnel shall take into consideration the following rules when called out to help with an incident or attend training/ meetings.

1. Dive Team members when called out to an incident while on duty will only be allowed to leave the jail after receiving approval from the Correctional Sergeant.

2. The Correctional Sergeant will ensure staffing levels do not drop below minimum levels prior to approving the Dive Team member to leave.

3. The Correctional Sergeant can utilize other Correctional Deputies on overtime to relieve the Dive Team member and maintain the required minimum staffing levels.



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4. Dive Team members are not authorized to earn or generate overtime to attend Dive Team training or meetings. The Dive Team member shall notify the Scheduling Sergeant, in advance, to allow for schedule adjustments to attend training without generating overtime.
5. Dive Team members and Correctional Deputies covering on overtime shall use the proper coding on their time sheets.
6. Correctional Deputies relieving a Dive Team member on overtime shall use the proper coding to ensure that overtime is being tracked and billed to the appropriate patrol cost centers.
7. Dive Team members shall code their time sheet using the correct work code, either straight time or overtime, and the appropriate patrol cost centers associated with the area where the dive or training occurs.

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## Information Technology Use

### 252.1 PURPOSE AND SCOPE

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

#### 252.1.1 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 San Luis Obispo County Sheriff's Office that are provided for official use by its members. This includes all access to, and use of, Internet Service Providers (ISP) or other service providers provided by or through the Office or office funding.

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

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

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

### 252.2 POLICY

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

### 252.3 PRIVACY EXPECTATION

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

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

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#### **252.4 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 Correctional Sergeant.

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 Correctional Sergeant.

##### **252.4.1 SOFTWARE**

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

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

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

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

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

##### **252.4.2 HARDWARE**

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

##### **252.4.3 INTERNET USE**

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

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

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

#### **252.4.4 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 Correctional Lieutenant. This includes the use of telephones, cell phones, texting, e-mail or any other "off-the-clock" work-related activities.

#### **252.5 PROTECTIONS OF SYSTEMS AND FILES**

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

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

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 Correctional Sergeant.

#### **252.6 INSPECTION OR REVIEW**

The Correctional Lieutenant 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 their duties or based on cause.

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

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

## Temporary Modified-Duty Assignments

### 253.1 PURPOSE AND SCOPE

This policy establishes procedures for providing temporary modified-duty assignments. This policy is not intended to affect the rights or benefits of employees under federal or state law, county rules, and current memorandums of understanding or collective bargaining agreements. For example, nothing in this policy affects the obligation of the Office to engage in a good faith, interactive process to consider reasonable accommodations for any employee with a temporary or permanent disability that is protected under federal or state law.

### 253.2 POLICY

Subject to operational considerations, the San Luis Obispo County Sheriff's Office may identify temporary modified-duty assignments for employees who have an injury or medical condition resulting in temporary work limitations or restrictions. A temporary assignment allows the employee to work, while providing the Office with a productive employee during the temporary period.

### 253.3 GENERAL CONSIDERATIONS

Priority consideration for temporary modified-duty assignments will be given to employees with work-related injuries or illnesses that are temporary in nature. Employees having disabilities covered under the Americans with Disabilities Act (ADA) or the California Fair Employment and Housing Act (Government Code § 12940 et seq.) shall be treated equally, without regard to any preference for a work-related injury.

No position in the San Luis Obispo County Sheriff's Office shall be created or maintained as a temporary modified-duty assignment.

Temporary modified-duty assignments are a management prerogative and not an employee right. The availability of temporary modified-duty assignments will be determined on a case-by-case basis, consistent with the operational needs of the Office. Temporary modified-duty assignments are subject to continuous reassessment, with consideration given to operational needs and the employee's ability to perform in a modified-duty assignment.

The Sheriff or the authorized designee may restrict employees working in temporary modified-duty assignments from wearing a uniform, displaying a badge, carrying a firearm, operating an office-owned vehicle, or engaging in outside employment, or may otherwise limit them in employing their peace officer powers.

Temporary modified-duty assignments shall generally not exceed a cumulative total of 1,040 hours in any one-year period.

### 253.4 PROCEDURE

Employees may request a temporary modified-duty assignment for short-term injuries or illnesses.

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Employees seeking a temporary modified-duty assignment should submit a written request to the Facility Manager or the authorized designee. The request should, as applicable, include a certification from the treating medical professional containing:

- (a) An assessment of the nature and probable duration of the illness or injury.
- (b) The prognosis for recovery.
- (c) The nature and scope of limitations and/or work restrictions.
- (d) A statement regarding any required workplace accommodations, mobility aids, or medical devices.
- (e) A statement that the employee can safely perform the duties of the temporary modified-duty assignment.

The Facility Manager will make a recommendation through the chain of command to the Sheriff regarding temporary modified-duty assignments that may be available based on the needs of the Office and the limitations of the employee. The Sheriff or the authorized designee shall confer with the Department of Human Resources or the County Counsel as appropriate.

#### **253.5 ACCOUNTABILITY**

Written notification of assignments, work schedules, and any restrictions should be provided to employees assigned to temporary modified-duty assignments and their supervisors. Those assignments and schedules may be adjusted to accommodate office operations and the employee's medical appointments, as mutually agreed upon with the Facility Manager.

##### **253.5.1 EMPLOYEE RESPONSIBILITIES**

The responsibilities of employees assigned to temporary modified duty shall include but are not limited to:

- (a) Communicating and coordinating any required medical and physical therapy appointments in advance with their supervisors.
- (b) Promptly notifying their supervisors of any change in restrictions or limitations after each appointment with their treating medical professionals.
- (c) Communicating a status update to their supervisors no less than once every 30 days while assigned to temporary modified duty.
- (d) Submitting a written status report to the Facility Manager that contains a status update and anticipated date of return to full duty when a temporary modified-duty assignment extends beyond 60 days.

##### **253.5.2 SUPERVISOR RESPONSIBILITIES**

The employee's immediate supervisor shall monitor and manage the work schedule of those assigned to temporary modified duty.

The responsibilities of supervisors shall include but are not limited to:

- (a) Periodically apprising the Facility Manager of the status and performance of employees assigned to temporary modified duty.

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- (b) Notifying the Facility Manager and ensuring that the required documentation facilitating a return to full duty is received from the employee.
- (c) Ensuring that employees returning to full duty have completed any required training and certification.

#### **253.6 MEDICAL EXAMINATIONS**

Prior to returning to full-duty status, employees shall be required to provide certification from their treating medical professionals stating that they are medically cleared to perform the essential functions of their jobs without restrictions or limitations.

The Office may require a fitness-for-duty examination prior to returning an employee to full-duty status, in accordance with the Fitness for Duty Policy.

#### **253.7 PREGNANCY**

If an employee is temporarily unable to perform regular duties due to a pregnancy, childbirth, or a related medical condition, the employee will be treated the same as any other temporarily disabled employee (42 USC § 2000e(k)). A pregnant employee shall not be involuntarily transferred to a temporary modified-duty assignment. Nothing in this policy limits a pregnant employee's right to a temporary modified-duty assignment if required under Government Code § 12945.

##### **253.7.1 NOTIFICATION**

Pregnant employees should notify their immediate supervisors as soon as practicable and provide a statement from their medical providers identifying any pregnancy-related job restrictions or limitations. If at any point during the pregnancy it becomes necessary for the employee to take a leave of absence, such leave shall be granted in accordance with the county's personnel rules and regulations regarding family and medical care leave.

#### **253.8 PROBATIONARY EMPLOYEES**

Probationary employees who are assigned to a temporary modified-duty assignment shall have their probation extended by a period of time equal to their assignment to temporary modified duty.

#### **253.9 MAINTENANCE OF CERTIFICATION AND TRAINING**

Employees assigned to temporary modified duty shall maintain all certification, training, and qualifications appropriate to both their regular and temporary duties, provided that the certification, training, or qualifications are not in conflict with any medical limitations or restrictions. Employees who are assigned to temporary modified duty shall inform their supervisors of any inability to maintain any certification, training, or qualifications.

## Payroll Records

### 254.1 PURPOSE AND SCOPE

This policy provides the guidelines for completing and submitting payroll records of office members who are eligible for the payment of wages.

### 254.2 POLICY

The San Luis Obispo County Sheriff's Office maintains timely and accurate payroll records.

### 254.3 RESPONSIBILITIES

Members are responsible for the accurate completion and timely submission of their payroll records for the payment of wages. Members shall start their timesheets at the beginning of each pay period. Members are responsible for completion of their timecards at the end of each work week. Members who work overtime shall code the appropriate code on their timesheet under "Rec.FuncAr" area of their timecards. Members who do not complete their timesheets at the end of each work week shall submit a "*Payroll Change*" form, have their supervisor approve it, then forward to the Payroll Coordinator.

Supervisors are responsible for approving the payroll records at the end of their work weeks for those under their commands.

### 254.4 TIME REQUIREMENTS

Members who are eligible for the payment of wages are paid on a scheduled, periodic basis, generally on the same day or date each period, with certain exceptions, such as holidays. Payroll records shall be completed and submitted to Administration as established by the county payroll procedures.

### 254.5 RECORDS

The Facility Manager shall ensure that accurate and timely payroll records are maintained as required by 29 CFR 516.2 for a minimum of three years (29 CFR 516.5).



## Illness and Injury Prevention

### 255.1 PURPOSE AND SCOPE

The purpose of this policy is to establish an ongoing and effective plan to reduce the incidence of illness and injury for members of the San Luis Obispo County Sheriff's Office, in accordance with the requirements of 8 CCR 3203.

This policy specifically applies to illness and injury that results in lost time or that requires medical treatment beyond first aid. Although this policy provides the essential guidelines for a plan that reduces illness and injury, it may be supplemented by procedures outside the Custody Manual.

This policy does not supersede, but supplements any related county-wide safety efforts.

### 255.2 POLICY

The San Luis Obispo County Sheriff's Office is committed to providing a safe environment for its members and visitors and to minimizing the incidence of work-related illness and injuries. The Office will establish and maintain an Illness and Injury Prevention program and will provide tools, training, and safeguards designed to reduce the potential for accidents, illness, and injuries. It is the intent of the Office to comply with all laws and regulations related to occupational safety.

### 255.3 ILLNESS AND INJURY PREVENTION PLAN

The Investigative Services Chief Deputy is responsible for developing an illness and injury prevention plan that shall include:

- (a) Workplace safety and health training programs.
- (b) Regularly scheduled safety meetings.
- (c) Posted or distributed safety information.
- (d) A system for members to anonymously inform management about workplace hazards.
- (e) Establishment of a safety and health committee that will:
  1. Meet regularly.
  2. Prepare a written record of safety and health committee meetings.
  3. Review the results of periodic scheduled inspections.
  4. Review investigations of accidents and exposures.
  5. Make suggestions to command staff for the prevention of future incidents.
  6. Review investigations of alleged hazardous conditions.
  7. Submit recommendations to assist in the evaluation of member safety suggestions.
  8. Assess the effectiveness of efforts made by the Office to meet relevant standards.

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- (f) Establishment of a process to ensure serious illnesses or injuries and death are reported as required by the Division of Occupational Safety and Health Administration (Cal/OSHA) (8 CCR 342).

#### **255.4 RESPONSIBILITIES**

The responsibilities of the Facility Manager or their designee include but are not limited to:

- (a) Managing and implementing a plan to reduce the incidence of member illness and injury.
- (b) Ensuring that a system of communication is in place that facilitates a continuous flow of safety and health information between supervisors and members. This system shall include:
  - 1. New member orientation that includes a discussion of safety and health policies and procedures.
  - 2. Regular member review of the illness and injury prevention plan.
  - 3. Access to the injury and illness prevention plan to members or their representatives as set forth in 8 CCR 3203.
- (c) Ensuring that all safety and health policies and procedures are clearly communicated and understood by all members.
- (d) Taking reasonable steps to ensure that all members comply with safety rules in order to maintain a safe work environment. This includes but is not limited to:
  - 1. Informing members of the illness and injury prevention guidelines.
  - 2. Recognizing members who perform safe work practices.
  - 3. Ensuring that the member evaluation process includes member safety performance.
  - 4. Ensuring office compliance to meet standards regarding the following:
    - (a) Respiratory protection (8 CCR 5144)
    - (b) Bloodborne pathogens (8 CCR 5193)
    - (c) Aerosol transmissible diseases (8 CCR 5199)
    - (d) Heat illness (8 CCR 3395)
    - (e) Emergency Action Plan (8 CCR 3220). See the Fire Safety and Evacuation policies.
    - (f) Fire Prevention Plan (8 CCR 3221)
    - (g) Hazards associated with wildfire smoke (8 CCR 5141.1)
- (e) Making available the Identified Hazards and Correction Record form to document inspections, unsafe conditions, or unsafe work practices, and actions taken to correct unsafe conditions and work practices.
- (f) Making available the Investigation/Corrective Action Report to document individual incidents or accidents.

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- (g) Making available a form to document the safety and health training of each member. This form will include the member's name or other identifier, training dates, type of training, and training providers.
- (h) Conducting and documenting a regular review of the illness and injury prevention plan.

#### **255.5 SUPERVISOR RESPONSIBILITIES**

Supervisor responsibilities include but are not limited to:

- (a) Ensuring member compliance with illness and injury prevention guidelines and answering questions from members about this policy.
- (b) Training, counseling, instructing, or making informal verbal admonishments any time safety performance is deficient. Supervisors may also initiate discipline when it is reasonable and appropriate under the Standards of Conduct Policy.
- (c) Establishing and maintaining communication with members on health and safety issues. This is essential for an injury-free, productive workplace.
- (d) Completing required forms and reports relating to illness and injury prevention; such forms and reports shall be submitted to the Facility Manager.
- (e) Notifying the Facility Manager when:
  1. New substances, processes, procedures, or equipment that present potential new hazards are introduced into the work environment.
  2. New, previously unidentified hazards are recognized.
  3. Occupational illnesses and injuries occur.
  4. New and/or permanent or intermittent members are hired or reassigned to processes, operations, or tasks for which a hazard evaluation has not been previously conducted.
  5. Workplace conditions warrant an inspection.

#### **255.6 HAZARDS**

All members should report and/or take reasonable steps to correct unsafe or unhealthy work conditions, practices, or procedures in a timely manner. Members should make their reports to a supervisor (as a general rule, their own supervisors).

Supervisors should make reasonable efforts to correct unsafe or unhealthy work conditions in a timely manner, based on the severity of the hazard. These hazards should be corrected when observed or discovered, when it is reasonable to do so. When a hazard exists that cannot be immediately abated without endangering members or property, supervisors should protect or remove all exposed members from the area or item, except those necessary to correct the existing condition.

Members who are necessary to correct the hazardous condition shall be provided with the necessary protection.

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All significant actions taken and dates they are completed shall be documented on an Identified Hazards and Correction Record form. This form should be forwarded to the Facility Manager via the chain of command.

The Facility Manager will take appropriate action to ensure the illness and injury prevention plan addresses potential hazards upon such notification.

#### **255.7 INSPECTIONS**

Safety inspections are crucial to a safe work environment. These inspections identify and evaluate workplace hazards and permit mitigation of those hazards.

The Administration Under Sheriff for their shall ensure that the appropriate documentation is completed for each inspection in the Correctional Sergeants' Post Log.

##### **255.7.1 EQUIPMENT**

Members are charged with daily inspections of their assigned areas and of their PPE as described in the Sanitation Inspections and Daily Activity Logs and Shift Reports policies.

#### **255.8 INVESTIGATIONS**

Any member sustaining any work-related illness or injury, as well as any member who is involved in any accident or hazardous substance exposure while on-duty, shall report such event as soon as practicable to a supervisor. Members observing or learning of a potentially hazardous condition are to promptly report the condition to their immediate supervisors.

A supervisor receiving such a report should personally investigate the incident or ensure that an investigation is conducted. Investigative procedures for workplace accidents and hazardous substance exposures should include:

- (a) A visit to the accident scene as soon as possible.
- (b) An interview of the injured member and witnesses.
- (c) An examination of the workplace for factors associated with the accident/exposure.
- (d) Determination of the cause of the accident/exposure.
- (e) Corrective action to prevent the accident/exposure from reoccurring.
- (f) Documentation of the findings and corrective actions taken.
- (g)

Additionally, the supervisor should proceed with the steps to report an on-duty injury, as required under the Occupational Disease and Work-Related Illness and Injury Reporting Policy, in conjunction with this investigation to avoid duplication and ensure timely reporting.

#### **255.9 TRAINING**

The Facility Manager should work with the Training Coordinator to provide all members, including supervisors, with training on general and job-specific workplace safety and health practices. Training shall be provided:

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- (a) To supervisors to familiarize them with the safety and health hazards to which members under their immediate direction and control may be exposed.
- (b) To all members with respect to hazards specific to each member's job assignment.
- (c) To all members given new job assignments for which training has not previously been provided.
- (d) Whenever new substances, processes, procedures, or equipment are introduced to the workplace and represent a new hazard.
- (e) Whenever the Office is made aware of a new or previously unrecognized hazard.

#### **255.9.1 TRAINING TOPICS**

The Training Coordinator shall ensure that training includes:

- (a) Reporting unsafe conditions, work practices, and injuries, and informing a supervisor when additional instruction is needed.
- (b) Use of appropriate clothing, including gloves and footwear.
- (c) Use of respiratory equipment.
- (d) Availability of toilet, hand-washing, and drinking-water facilities.
- (e) Provisions for medical services and first aid.
- (f) Handling of bloodborne pathogens and other biological hazards.
- (g) Identification and handling of hazardous materials, including chemical hazards to which members could be exposed, and review of resources for identifying and mitigating hazards (e.g., hazard labels, Safety Data Sheets (SDS)).
- (h) Mitigation of physical hazards, such as ionizing and non-ionizing radiation.
- (i) Identification and mitigation of ergonomic hazards, including working on ladders or in a stooped posture for prolonged periods.
- (j) Other job-specific safety concerns.

#### **255.10 RECORDS**

Records and training documentation relating to illness and injury prevention will be maintained in accordance with the established records retention schedule.

# Occupational Disease and Work-Related Injury Reporting

## 256.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidance regarding the timely reporting of occupational diseases, mental health issues, and work-related injuries.

### 256.1.1 DEFINITIONS

Definitions related to this policy include:

**Occupational disease or work-related injury** - An injury, disease, or mental health issue arising out of employment (Labor Code § 3208; Labor Code § 3208.3; Labor Code § 3212 et seq.).

## 256.2 POLICY

The San Luis Obispo County Sheriff's Office will address occupational diseases and work-related injuries appropriately, and will comply with applicable state workers' compensation requirements (Labor Code § 3200 et seq.).

## 256.3 RESPONSIBILITIES

### 256.3.1 MEMBER RESPONSIBILITIES

Any member sustaining any occupational disease or work-related injury shall report such event as soon as practicable, but within 24 hours, to a supervisor, and shall seek medical care when appropriate (8 CCR 14300.35).

### 256.3.2 SUPERVISOR RESPONSIBILITIES

A supervisor learning of any occupational disease or work-related injury should ensure the member receives medical care as appropriate.

Supervisors shall ensure that required documents regarding workers' compensation are completed and forwarded promptly. Any related countywide disease- or injury-reporting protocol shall also be followed.

Supervisors shall determine whether the Illness and Injury Prevention Policy applies and take additional action as required.

### 256.3.3 FACILITYMANAGER RESPONSIBILITIES

The Facility Manager who receives a report of an occupational disease or work-related injury should review the report for accuracy and determine what additional action should be taken. The report shall then be forwarded to the Sheriff, the county's risk management entity, and the Administration Under Sheriff to ensure any required Division of Occupational Safety and Health (Cal/OSHA) reporting is made as required in the illness and injury prevention plan identified in the Illness and Injury Prevention Policy.

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##### **256.3.4 AGENCYHEAD RESPONSIBILITIES**

The Sheriff shall review and forward copies of the report to the Department of Human Resources. Copies of the report and related documents retained by the Office shall be filed in the member's confidential medical file.

##### **256.4 OTHER DISEASE OR INJURY**

Diseases and injuries caused or occurring on-duty that do not qualify for workers' compensation reporting shall be documented on the designated report of injury form, which shall be signed by a supervisor. A copy of the completed form shall be forwarded to the appropriate Division Lieutenant through the chain of command and a copy sent to the Investigative Services Chief Deputy.

Unless the injury is extremely minor, this report shall be signed by the affected member, indicating that he/she desired no medical attention at the time of the report. By signing, the member does not preclude his/her ability to later seek medical attention.

##### **256.5 SETTLEMENT OFFERS**

When a member sustains an occupational disease or work-related injury that is caused by another person and is subsequently contacted by that person, his/her agent, insurance company, or attorney and offered a settlement, the member shall take no action other than to submit a written report of this contact to his/her supervisor as soon as possible.

##### **256.5.1 NO SETTLEMENT WITHOUT PRIOR APPROVAL**

No less than 10 days prior to accepting and finalizing the settlement of any third-party claim arising out of or related to an occupational disease or work-related injury, the member shall provide the Sheriff with written notice of the proposed terms of such settlement. In no case shall the member accept a settlement without first providing written notice to the Sheriff. The purpose of such notice is to permit the county to determine whether the offered settlement will affect any claim the county may have regarding payment for damage to equipment or reimbursement for wages against the person who caused the disease or injury, and to protect the county's right of subrogation, while ensuring that the member's right to receive compensation is not affected.

## Evaluation of Employees

### 257.1 PURPOSE AND SCOPE

The Office's employee performance evaluation system is designed to record work performance for both the Office and the employee, providing recognition for good work and developing a guide for improvement.

### 257.2 POLICY

The San Luis Obispo County Sheriff's Office utilizes a performance evaluation report to measure performance and to use as a factor in making personnel decisions that relate to merit increases, promotion, reassignment, discipline, demotion, and termination. The evaluation report is intended to serve as a guide for work planning and review by the supervisor and employee. It gives supervisors a way to create an objective history of work performance based on job standards.

The Office evaluates employees in a nondiscriminatory manner based upon job-related factors specific to the employee's position, without regard to 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.

### 257.3 EVALUATION PROCESS

Evaluation reports will cover a specific period of time and should be based on documented performance during that period. Evaluation reports will be completed by each employee's immediate supervisor. Other supervisors directly familiar with the employee's performance during the rating period should be consulted by the immediate supervisor for their input.

All sworn and Non-sworn supervisory personnel shall attend an approved supervisory course that includes training on the completion of performance evaluations within one year of the supervisory appointment.

Each supervisor should discuss the tasks of the position, standards of performance expected and the evaluation criteria with each employee at the beginning of the rating period. Supervisors should document this discussion in the prescribed manner.

Assessment of an employee's job performance is an ongoing process. Continued coaching and feedback provides supervisors and employees with opportunities to correct performance issues as they arise.

Non-probationary employees demonstrating substandard performance shall be notified in writing as soon as possible in order to have an opportunity to remediate the issues. Such notification should occur at the earliest opportunity, with the goal being a minimum of 90 days' written notice prior to the end of the evaluation period.

Employees who disagree with their evaluation and who desire to provide a formal response or a rebuttal may do so in writing in the prescribed format and time period.



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#### **257.4 FULL-TIME PROBATIONARY PERSONNEL**

Non-sworn personnel are on probation for [12 months] before being eligible for certification as permanent employees. An evaluation is completed monthly for all full-time Non-sworn personnel during the probationary period.

Sworn personnel are on probation for [12 months] before being eligible for certification as permanent employees. Probationary deputies are evaluated daily, weekly, and monthly during the probationary period.

#### **257.5 FULL-TIME PERMANENT STATUS PERSONNEL**

Permanent employees are subject to three types of performance evaluations:

**Regular** - An Employee Performance Evaluation shall be completed once each year by the employee's immediate supervisor on the anniversary of the employee's date of hire except for employees who have been promoted in which case an Employee Performance Evaluation shall be completed on the anniversary of the employee's date of last promotion.

**Transfer** - If an employee is transferred from one assignment to another in the middle of an evaluation period and less than six months have transpired since the transfer, then an evaluation shall be completed by the current supervisor with input from the previous supervisor.

**Special** - A special evaluation may be completed any time the rater and the rater's supervisor feel one is necessary due to employee performance that is deemed less than standard. Generally, the special evaluation will be the tool used to demonstrate those areas of performance deemed less than standard when follow-up action is planned (action plan, remedial training, retraining). The evaluation form and the attached documentation shall be submitted as one package.

##### **257.5.1 RATINGS**

When completing the Employee Performance Evaluation, the rater will place a check mark in the column that best describes the employee's performance. The definition of each rating category is as follows:

**Exceptional** - Is the level of performance well beyond that required for the position. It is exceptional performance, definitely superior or extraordinary.

**Successful** - Is the level of performance of a fully competent employee. It means satisfactory performance that meets the standards required of the position.

**Needs improvement** - Is the level of performance less than that expected of a fully competent employee and less than standards required of the position. A needs improvement rating shall be thoroughly discussed with the employee.

Space for written comments is provided at the end of the evaluation in the rater comments section. This section allows the rater to document the employee's strengths, weaknesses, and suggestions for improvement. Any rating under any job dimension marked unsatisfactory or outstanding shall be substantiated in the rater comments section.

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#### **257.6 EVALUATION INTERVIEW**

When the supervisor has completed the preliminary evaluation, arrangements shall be made for a private discussion of the evaluation with the employee. The supervisor should discuss the results of the just completed rating period and clarify any questions the employee may have. If the employee has valid and reasonable protests of any of the ratings, the supervisor may make appropriate changes to the evaluation. Areas needing improvement and goals for reaching the expected level of performance should be identified and discussed. The supervisor should provide relevant counseling regarding advancement, specialty positions, and training opportunities. The supervisor and employee will sign and date the evaluation. Permanent employees may also write comments in the Employee Comments section of the performance evaluation report.

##### **257.6.1 DISCRIMINATORY HARASSMENT FORM**

At the time of each employee's annual evaluation, the reviewing supervisor shall require the employee to read the county and San Luis Obispo County Sheriff's Office harassment and discrimination policies. Following such policy review, the employee shall acknowledge electronically certifying the following:

- (a) That the employee understands the harassment and discrimination policies.
- (b) Whether any questions the employee has have been sufficiently addressed.
- (c) That the employee knows how and where to report harassment policy violations.
- (d) Whether the employee has been the subject of, or witness to, any conduct that violates the discrimination or harassment policy which has not been previously reported.
- (e) Information Security Policy
- (f) Vehicle Use

The employee's acknowledgement shall be electronically attached to the evaluation. If the employee has expressed any questions or concerns, the receiving supervisor or other authorized individual shall ensure that appropriate follow-up action is taken.

#### **257.7 EVALUATION REVIEW**

After the supervisor finishes the discussion with the employee, the signed performance evaluation is forwarded to the rater's supervisor. The Facility Manager shall review the evaluation for fairness, impartiality, uniformity, and consistency. The Facility Manager shall evaluate the supervisor on the quality of ratings given.

#### **257.8 EVALUATION DISTRIBUTION**

The original performance evaluation shall be maintained in the employee's personnel file in the office of the Office for the tenure of the employee's employment.

A copy will be given to the employee and a copy will be forwarded to the county Department of Human Resources.

## **Chapter 3 - Recruitment Selection and Planning**

## Qualifications of the Sheriff

### **300.1 PURPOSE AND SCOPE**

The purpose of this policy is to establish the minimum qualifications of the Sheriff and any other appointed or elected employee who is not covered by a merit system, civil service regulations or a union contract.

Specific rules governing employment practices for this office are maintained by the Department of Human Resources.

### **300.2 MINIMUM QUALIFICATIONS FOR SHERIFF**

Prior to filing for the office of Sheriff, any candidate shall at minimum meet the requirements of Government Code § 24004.3.

## Employee Orientation

### 302.1 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.

### 302.2 NEW EMPLOYEE ORIENTATION

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

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

### 302.3 EMPLOYEE ACKNOWLEDGEMENTS

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

A staff member will collect a signature page from the employee, acknowledging receipt, review and understanding of the documents. A copy of the signature page shall be retained in the employee's probationary training file.

## Continuing Professional Education

### **304.1 PURPOSE AND SCOPE**

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

#### **304.1.1 PHILOSOPHY**

The Office seeks to encourage continuing education whenever practical. All continuing education programs will be within the framework of negotiated employee agreements. Continuing education will be provided based on the availability of funding, staffing levels and legal mandates. The Office encourages all personnel to participate in formal education on a continuing basis.

### **304.2 REQUIRED TRAINING**

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

## Training for Managers and Supervisors

### 306.1 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.

### 306.2 POLICY

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

### 306.3 TRAINING OBJECTIVES

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

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

### 306.4 TRAINING FOR NEW MANAGERS AND SUPERVISORS

All Facility Managers 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).

#### 306.4.1 SUPERVISORY TRAINING

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

### 306.5 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 Coordinator to ensure that the following is maintained on file for all training provided by the Office:

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

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- 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 Coordinator with evidence of completed training or education in a timely manner. The Training Coordinator 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 Program

### 308.1 PURPOSE AND SCOPE

The jail training 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 office to assign all new correctional deputies 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.

### 308.2 TRAINING OFFICER

There are two classifications of training officers responsible for training new correctional deputies; Senior Correctional Deputy (SCD) and Jail Training Officer (JTO).

A SCD is an experienced correctional deputy with thorough knowledge of the Custody Bureau programs, policies and procedures. Furthermore, a SCD is promoted from the rank of Correctional Deputy. Selection for Senior Correctional Deputy is initiated after a candidate completes a series of performance, written and interview exams.

The Jail Training Officer (JTO) is an experienced officer holding the rank of Correctional Deputy. A JTO, like a SCD, is trained in the art and science of supervising, training and evaluating entry-level deputies in the application of their acquired knowledge and skills. However, a Jail Training Officer's selection and appointment differs from that of a SCD. The selection process for a Correctional Deputy becoming a JTO is outlined in the next section of this policy.

#### 308.2.1 SELECTION PROCESS

Jail Training Officers will be selected based on certain requirements, including:

- (a) A desire to perform the training mission.
- (b) A minimum of two years as a deputy or equivalent law enforcement service.
- (c) A demonstrated ability to be a positive role model.
- (d) Submission of a memorandum detailing qualities that would make them the best candidate.
- (e) Successfully passed both a written, which may be in memorandum form, and an internal oral interview selection process, where applicable.
- (f) New JTO applicants will be required to complete an oral interview selection process. JTOs wishing to continue the position annually will not be required to take an additional oral interview selection process, unless extenuating circumstances arise.
- (g) Evaluation by supervisors.
- (h) A certificate from the state's law enforcement certifying agency, where applicable.

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- (i) A formal review of each JTO shall be conducted on a yearly basis by the Training Officer Program Supervisor. A report generated by the Training Officer Program Supervisor shall include recommendations for the continued appointment of a JTO or the removal of a Correctional Deputy from JTO appointment. This report will detail reasons for both outcomes and be submitted to the Jail Operations Lieutenant.

#### 308.2.2 TRAINING

- SCDs and JTOs shall successfully complete an 8-hour STC Training Officer course of instruction within one year of appointment.
- SCDs and JTOs may be assigned to a 40-hour Training Officer course of instruction for additional training.
- SCDs and JTOs may be assigned to an 8-hour STC Training Officer update course every three years while assigned to the position of SCD or JTO.

#### 308.3 TRAINING OFFICER RESPONSIBILITIES

- (a) SCDs or JTOs shall complete and submit a written or electronic evaluation on the performance of their assigned trainee on a daily basis.
- (b) SCDs or JTOs shall review the performance evaluations with the trainee each day.
- (c) A detailed end-of-phase performance evaluation on the assigned trainee shall be completed by the SCD or JTO at the end of each phase of training.
- (d) SCDs or JTOs shall be responsible for signing off all completed topics contained in the Training Manual, noting the methods of learning and evaluating the performance of the assigned trainee.
- (e) Supervisors shall review and sign off on daily evaluations of trainees on a weekly basis.

#### 308.4 TRAINING OFFICER PROGRAM SUPERVISORS

Correctional Sergeants shall possess supervisory credentials from the state's law enforcement certifying agency, where applicable. The supervisor's responsibilities include the following:

- (a) Assignment of trainees to SCDs or JTOs.
- (b) Conduct SCD and JTO meetings.
- (c) Maintain and ensure SCD/JTO/trainee performance evaluations are completed in a timely manner.
- (d) Maintain, update and issue the training manual to each trainee.
- (e) Correctional Sergeants are assigned to monitor individual SCD and JTO performance.
- (f) Monitor the overall JTO program.
- (g) When assigned, conduct a yearly review of each appointed JTO which will be reflected in their annual evaluation.
- (h) Correctional Sergeants are responsible for completing Daily Observation Reports at the conclusion of their work week.

## Recruitment and Selection

### 310.1 PURPOSE AND SCOPE

This policy provides a framework for employee recruiting efforts and identifying job-related standards for the selection process. This policy supplements the rules that govern employment practices for the San Luis Obispo County Sheriff's Office and that are promulgated and maintained by the Department of Human Resources.

### 310.2 EMPLOYMENT STANDARDS

Employment standards shall be established for each job classification in order to define job responsibilities and requirements of a particular position, and shall include minimally, the equipment, tasks, abilities, knowledge and skills required to perform the duties of the job in a satisfactory manner. The Department of Human Resources maintains standards for all job classifications.

#### 310.2.1 CRIMINAL RECORD CHECK

Every person who may have inmate contact as a member or contractor shall, prior to service, undergo a thorough background investigation to verify their personal integrity and high ethical standards, and to identify any past behavior that may be indicative of the candidate's unsuitability to perform duties relevant to the operation of the San Luis Obispo County Sheriff's Office.

The Office shall either conduct follow-up criminal background records checks at least once every five years on members or contractors who may have contact with inmates or have in place a system for otherwise capturing such information (28 CFR 115.17).

#### 310.2.2 OPERATION OF A MOTOR VEHICLE

If operating a vehicle is a requirement for the job classification, the following should apply:

- (a) The ability to possess a valid California driver's license prior to appointment.
- (b) The ability to drive safely.
- (c) The ability to control a motor vehicle at high speeds.
- (d) The ability to operate a motor vehicle in all types of weather conditions.
- (e) Disqualifying factors may include:
  - 1. Receipt of three or more moving violations (or any single violation of a potential life-threatening violation, such as reckless driving, speed contest, suspect of a pursuit, etc.) within three years prior to the date of application. Moving violations for which there is a factual finding of innocence shall not be included.
  - 2. Involvement as a driver in two or more chargeable (at fault) collisions within three years prior to the date of application.
  - 3. A conviction for driving under the influence of alcohol and/or drugs within three years prior to the date of application, or any two convictions for driving under the influence of alcohol and/or drugs.

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##### 310.2.3 INTEGRITY

The conduct and behavior of Correctional Deputy, both on- and off-duty, should be established and maintained at standards high enough to support public confidence in and respect for the office. Circumstances that may be disqualifying during a background investigation include:

- (a) Accepting a bribe, gratuity or a payoff in exchange for special consideration.
- (b) Failure to report unethical or illegal conduct on the part of other custody employees.
- (c) Failure to consistently demonstrate strong moral character and integrity in dealing with the public.
- (d) Failure to be honest in any instance involving work or when questioned about non-work issues.
- (e) Any forgery, alteration or intentional omission of material facts on an official employment application or other official office document, or sustained episodes of academic cheating.
- (f) A prior felony conviction.
- (g) Conviction of any criminal offense classified as a misdemeanor under state law within three years prior to the date of application.
- (h) Conviction of two or more misdemeanor offenses under state law as an adult.
- (i) Conviction of any offense classified as a misdemeanor under state law while employed as a peace officer (including military police officers).
- (j) Admission of having committed any act amounting to a felony under state law within three years prior to the date of application or while employed as a deputy or peace officer (including military police officers).
- (k) Admission of administrative conviction of any act while employed as a deputy or peace officer (including military police officers) involving lying, falsification of any official report or document or theft.
- (l) Admission of any act of domestic violence as defined by law, committed as an adult.
- (m) Admission of any criminal acts committed against children, including, but not limited to, molesting or annoying children, child abduction, child abuse, lewd and lascivious acts with a child, indecent exposure, or acts of consensual unlawful intercourse between two minors where more than four years difference in age existed at the time of the acts.
- (n) Any history of actions resulting in civil lawsuits against the applicant or his/her employer may be disqualifying.

##### 310.2.4 DEPENDABILITY

- (a) A record of being motivated to perform well.
- (b) A record of dependability and follow through on assignments.
- (c) A history of taking the extra effort required for complete accuracy in all details of work.
- (d) A willingness to work the hours needed to complete a job.

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- (e) Disqualifying factors may include:
  - 1. Missing any scheduled appointment during the process without prior permission.
  - 2. Having been disciplined by any employer (including military) as an adult for abuse of leave, gross insubordination, dereliction of duty or persistent failure to follow established policies and regulations.
  - 3. Having been involuntarily dismissed (for any reason other than layoff) from two or more employers as an adult.
  - 4. Having held more than seven paid positions with different employers within the past four years, or more than 15 paid positions with different employers in the past 10 years (excluding military). Students who attend school away from their permanent legal residence may be excused from this requirement.
  - 5. Having undergone personal bankruptcy more than once, having current financial obligations for which legal judgments have not been satisfied, currently having wages garnished, or any other history of financial instability.
  - 6. Resigning from any paid position without notice shall be disqualifying, except where the presence of a hostile work environment is alleged.
  - 7. Having any outstanding warrant of arrest at time of application.

#### 310.2.5 LEARNING ABILITY

- (a) The ability to comprehend and retain information.
- (b) The ability to recall information pertaining to laws, statutes and codes.
- (c) The ability to learn and to apply what is learned.
- (d) The ability to learn and apply the material, tactics and procedures that are required of a deputy.
- (e) Disqualifying factors may include:
  - 1. Being under current academic dismissal from any college or university where such dismissal is still in effect and was initiated within the past two years prior to the date of application.
  - 2. Having been academically dismissed from any certified basic deputy or law enforcement academy, wherein no demonstrated effort has been made to improve in the deficient areas. Subsequent successful completion of another basic deputy or law enforcement academy shall rescind this requirement.

#### 310.2.6 PERSONAL SENSITIVITY

- (a) The ability to resolve problems in a way that shows sensitivity for the feelings of others.
- (b) Empathy
- (c) Discretion, not enforcing the law blindly.

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- (d) Effectiveness in dealing with people without arousing antagonism.
- (e) The ability to understand the motives of people and how they will react and interact.
- (f) Disqualifying factors may include:
  - 1. Having been disciplined by any employer (including the military and/or any deputy or law enforcement training facility) for acts constituting racial, ethnic or sexual harassment or discrimination.
  - 2. Uttering any epithet derogatory of another person's race, religion, gender, national origin or sexual orientation.
  - 3. Having been disciplined by any employer as an adult for fighting in the workplace.

#### 310.2.7 JUDGMENT UNDER PRESSURE

- (a) The ability to apply common sense during pressure situations.
- (b) The ability to make sound decisions on the spot.
- (c) The ability to use good judgment in dealing with potentially explosive situations.
- (d) The ability to make effective, logical decisions under pressure.
- (e) The following shall be disqualifying:
  - 1. Admission of administrative conviction or criminal convictions for any act amounting to assault under color of authority or any other violation of federal or state civil rights laws.
  - 2. Any admission of administrative conviction or criminal conviction for failure to properly report witnessed criminal conduct committed by another deputy or law enforcement officer.

#### 310.2.8 ILLEGAL USE OR POSSESSION OF DRUGS

- (a) Illegal drug use or possession may be considered disqualifiers for Correctional Deputies applicants.. Examples include:
  - 1. Any adult use or possession of a drug classified as a hallucinogenic within seven years prior to application for employment.
  - 2. Any adult use or possession of marijuana within one year prior to application for employment.
  - 3. Any other illegal adult use or possession of a drug not mentioned above (including cocaine) within three years prior to application for employment.
  - 4. Any illegal adult use or possession of a drug while employed in any correctional or law enforcement capacity, military police or as a student enrolled in college courses related to the criminal justice field.

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5. Any adult manufacture or cultivation of a drug or illegal substance.
  6. Failure to divulge to the Office any information about personal illegal use or possession of drugs.
  7. Any drug test of the applicant, during the course of the hiring process, where illegal drugs are detected.
- (b) Illegal drug use or possession will be considered in relationship to the overall background of an individual and may result in disqualification. Examples include:
1. Any illegal use or possession of a drug as a juvenile.
  2. Any illegal use or possession of a drug as an adult not previously described (e.g., marijuana or cocaine use longer than three years ago).
  3. Any illegal or unauthorized use of prescription medications.

#### 310.2.9 NOTICES

Background investigators shall ensure that investigations are conducted and notices provided in accordance with the requirements of the Fair Credit Reporting Act (FCRA) (15 USC § 1681d; 16 CFR 640.1 et seq.).

#### **310.3 DISQUALIFICATION GUIDELINES**

As a general rule, performance indicators, candidate information and records shall be evaluated by considering the candidate as a whole, and taking into consideration the following:

- Age at the time the behavior occurred
- Passage of time
- Patterns of past behavior
- Severity of behavior
- Probable consequences if past behavior is repeated or made public
- Likelihood of recurrence
- Relevance of past behavior to public safety employment
- Aggravating and mitigating factors
- Other relevant considerations

A candidate's qualifications will be assessed on a case-by-case basis, using a totality-of-the-circumstances framework.

No person shall be hired who 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).

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- (b) Been convicted of engaging or attempting to engage in sexual activity in the community 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 ask all candidates who may have contact with inmates to disclose any conduct described above in written applications or interviews. Material omissions regarding such misconduct, or the provision of materially false information, are grounds for termination.

#### **310.4 POLICY**

In accordance with applicable federal, state, and local law, the San Luis Obispo County Sheriff's Office provides equal opportunities for applicants and employees, regardless of 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. The Office does not show partiality or grant any special status to any applicant, employee, or group of employees unless otherwise required by law.

The Office will recruit and hire only those individuals who demonstrate a commitment to service and who possess the traits and characteristics that reflect personal integrity and high ethical standards.

#### **310.5 SELECTION PROCESS**

The Office shall actively strive to identify a diverse group of candidates who have in some manner distinguished themselves as being outstanding prospects.

Minimally, the Office should employ a comprehensive screening, background investigation, and selection process that assesses cognitive and physical abilities and includes review and verification of the following:

- (a) A comprehensive application for employment (including previous employment, references, current and prior addresses, education, military record)
  - 1. The personnel records of any applicant with prior peace officer experience in this state shall be requested from the appropriate law enforcement agency and reviewed prior to extending an offer of employment (Penal Code § 832.12).
  - 2. This includes review of prior law enforcement employment information maintained by the California Commission on Peace Officer Standards and Training (POST) (Penal Code § 13510.9).
- (b) Driving record
- (c) Reference checks
- (d) Employment eligibility, including U.S. Citizenship and Immigration Services (USCIS) Employment Eligibility Verification Form I-9 and acceptable identity and employment authorization documents consistent with Labor Code § 1019.1. This required



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documentation should not be requested until a candidate is hired. This does not prohibit obtaining documents required for other purposes.

- (e) Information obtained from public internet sites
- (f) Financial history consistent with the Fair Credit Reporting Act (FCRA) (15 USC § 1681 et seq.)
- (g) Local, state, and federal criminal history record checks
- (h) Lie detector test (when legally permissible) (Labor Code § 432.2)
- (i) Medical and psychological examination (may only be given after a conditional offer of employment)
- (j) Review board or selection committee assessment

#### **310.5.1 VETERAN'S PREFERENCE**

Qualifying veterans of the United States Armed Forces who receive a passing score on an entrance examination shall be ranked in the top rank of any resulting eligibility list. The veteran's preference shall also apply to a widow or widower of a veteran or a spouse of a 100 percent disabled veteran (Government Code § 18973.1).

#### **310.6 BACKGROUND INVESTIGATION**

Every candidate shall undergo a thorough background investigation to verify his/her personal integrity and high ethical standards, and to identify any past behavior that may be indicative of the candidate's unsuitability to perform duties relevant to the operation of the San Luis Obispo County Sheriff's Office (11 CCR 1953).

The narrative report and any other relevant background information shall be shared with the psychological evaluator. Information shall also be shared with others involved in the hiring process if it is relevant to their respective evaluations (11 CCR 1953).

##### **310.6.1 BACKGROUND INVESTIGATION UPDATE**

A background investigation update may, at the discretion of the Sheriff, be conducted in lieu of a complete new background investigation on a peace officer candidate who is reappointed within 180 days of voluntary separation from the San Luis Obispo County Sheriff's Office (11 CCR 1953(f)).

##### **310.6.2 NOTICES**

Background investigators shall ensure that investigations are conducted and notices provided in accordance with the requirements of the FCRA and the California Investigative Consumer Reporting Agencies Act (15 USC § 1681d; Civil Code § 1786.16).

##### **310.6.3 STATE NOTICES**

If information disclosed in a candidate's criminal offender record information (CORI) is the basis for an adverse employment decision, a copy of the CORI shall be provided to the applicant (Penal Code § 11105).

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##### **310.6.4 REVIEW OF SOCIAL MEDIA SITES**

Due to the potential for accessing unsubstantiated, private, or protected information, the Office shall not require candidates to provide passwords, account information, or access to password-protected social media accounts (Labor Code § 980).

The Administration Under Sheriff should consider utilizing the services of an appropriately trained and experienced third party to conduct open-source, internet-based searches and/or review information from social media sites to ensure that:

- (a) The legal rights of candidates are protected.
- (b) Material and information to be considered are verified, accurate, and validated.
- (c) The Office fully complies with applicable privacy protections and local, state, and federal law.

Regardless of whether a third party is used, the Office should ensure that potentially impermissible information is not available to any person involved in the candidate selection process.

##### **310.6.5 RECORDS RETENTION**

The background report and all supporting documentation shall be maintained for a minimum of four years and in accordance with the established records retention schedule (Government Code § 12946; 11 CCR 1953).

##### **310.6.6 DOCUMENTING AND REPORTING**

The background investigator shall summarize the results of the background investigation in a narrative report that includes sufficient information to allow the reviewing authority to decide whether to extend a conditional offer of employment. The report shall reference the Background Investigation Dimensions and include any findings of behaviors, traits, and/or attributes relevant to bias per the Bias Assessment Framework as described in the POST Background Investigation Manual: Guidelines for the Investigator. The report shall not include any information that is prohibited from use, including that from social media sites, in making employment decisions. The report and all supporting documentation shall be included in the candidate's background investigation file (11 CCR 1953).

The background investigator shall document proof of verification of qualification for peace officer appointment on the Verification of Qualification for Peace Officer Appointment form and forward it to the Administration Under Sheriff for final review and submission to POST (11 CCR 1953).

##### **310.6.7 INVESTIGATOR TRAINING**

Background investigators shall complete POST-certified background investigation training before conducting investigations (11 CCR 1953).

#### **310.7 EMPLOYMENT STANDARDS**

All candidates shall meet the minimum standards required by state law (Government Code § 1029; Government Code § 1031; Penal Code § 13510.1; 11 CCR 1950 et seq.). Candidates will be evaluated based on merit, ability, competence, and experience, in accordance with the

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high standards of integrity and ethics valued by the Office and the community. The California Commission on Peace Officer Standards and Training (POST) developed a Job Dimensions list, which is used as a professional standard in background investigations.

Validated, job-related, and nondiscriminatory employment standards shall be established for each job classification and shall minimally identify the training, abilities, knowledge, and skills required to perform the position's essential duties in a satisfactory manner. Each standard should include performance indicators for candidate evaluation. The Department of Human Resources should maintain validated standards for all positions.

#### 310.7.1 STANDARDS FOR DEPUTIES

Candidates shall meet the minimum standards established by POST or required by state law (Government Code § 1029; Government Code § 1031; 11 CCR 1950 et seq.):

- (a) Free of any felony convictions
- (b) Legally authorized to work in the United States under federal law
- (c) At least 21 years of age except as provided by Government Code § 1031.4
- (d) Fingerprinted for local, state, and national fingerprint check
- (e) Good moral character as determined by a thorough background investigation (11 CCR 1953)
- (f) High school graduate, passed the GED or other high school equivalency test, or obtained a two-year, four-year, or advanced degree from an accredited or approved institution
- (g) Free from any physical, emotional, or mental condition, including bias against race or ethnicity, gender, nationality, religion, disability, or sexual orientation, that might adversely affect the exercise of police powers (11 CCR 1954; 11 CCR 1955)
- (h) Free of hate group memberships, participation in hate group activities, or advocacy of public expressions of hate within the previous seven years and since age 18 as determined by a background investigation (Penal Code § 13681)
- (i) Candidates must also satisfy the POST selection requirements, including (11 CCR 1950 et seq.):
  - 1. Reading and writing ability assessment (11 CCR 1951)
  - 2. Oral interview to determine suitability for law enforcement service (11 CCR 1952)
- (j) POST certification that has not been revoked, denied, or voluntarily surrendered pursuant to Penal Code § 13510.8(f)
- (k) Not identified in the National Decertification Index of the International Association of Directors of Law Enforcement Standards and Training or similar federal government database that reflects revoked certification for misconduct or reflects misconduct that would result in a revoked certification in California

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In addition to the above minimum POST required standards, candidates may be subjected to additional standards established by the Office (Penal Code § 13510(d)).

## Training

### 312.1 PURPOSE AND SCOPE

It is the policy of this office to assign all new correctional deputies 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.

### 312.2 MINIMUM TRAINING REQUIREMENTS

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

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

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

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).

### 312.3 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.

#### 312.3.1 FIRST PHASE - FACILITY ORIENTATION

The trainee will be assigned to a Jail Training Officer (JTO) to whom the trainee is assigned. The JTO 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 Facility Manager and key supervisory, administrative and support personnel.

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##### 312.3.2 SECOND PHASE - SHADOWING

- (a) In this phase the trainee will be exposed to the many duties at each post, including transportation and special functions, by observing the JTO demonstrate how each task is to be performed. The JTO should provide instruction to the trainee and encourage the trainee to ask questions.
- (b) 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 JTO.
- (c) The JTO will monitor the trainee's progress by asking questions on the materials and demonstrations that have been provided to the trainee.
- (d) The work performance of the trainee will be evaluated and recorded daily by the JTO. Areas of deficiency will be discussed and remedial training provided if deemed necessary by the JTO.
- (e) A supervisor will review the daily observations of the JTO and complete a bi-weekly supervisors report, citing the trainee's strengths and weaknesses.

##### 312.3.3 THIRD PHASE - HANDS-ON WITH CLOSE SUPERVISION

- (a) During this phase the JTO 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 JTO.
- (b) The JTO will provide direction as needed to the trainee during the hands-on activities.
- (c) The work performance of the trainee will be evaluated and recorded daily by the JTO. Areas of deficiency will be discussed and remedial training provided if deemed necessary by the JTO.
- (d) A supervisor will review the daily observations of the JTO and complete a bi-weekly supervisors report, citing the trainee's strengths and weaknesses.

##### 312.3.4 FOURTH PHASE - SOLO WITH MONITORING

- (a) During this phase the trainee will be directed to work solo in each area that training has been provided.
- (b) The solo activities of the trainee will be monitored by the JTO and a supervisor.
- (c) The work performance of the trainee will be evaluated and recorded by the JTO. Areas of deficiency will be discussed and remedial training provided if deemed necessary by the JTO.
- (d) A supervisor will review the daily observations of the JTO and complete a weekly supervisors report, citing the trainee's strengths and weaknesses.

##### 312.3.5 FIFTH PHASE - WORKING INDEPENDENTLY WITH SUPERVISION

- (a) 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.

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- (b) A weekly On The Job Training Audit will be completed by an assigned JTO to monitor the trainee's status.
- (c) The supervisor, in consultation with the JTO and the Facility Manager, will make a recommendation to pass the trainee on to his/her assignment, to continue training or will recommend termination.

#### **312.4 PROBATIONARY PERIOD EVALUATION**

Prior to being permanently appointed, each probationary employee will receive a final evaluation. These evaluations shall be in writing and discussed with the employee by his/her supervisor. The final evaluation shall be made a part of the employee's personnel record.

## Specialized Training

### 314.1 PURPOSE AND SCOPE

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

### 314.2 QUALIFICATIONS

To be eligible for assignment to a specialized emergency unit, correctional deputies are required to be off probation and to have at least three years of experience as a correctional deputy. The three years of experience and probation eligibility qualifications can be waived by the Facility Manager or Undersheriff.

### 314.3 TRAINING

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

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

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



## Firearms Training

### 316.1 PURPOSE AND SCOPE

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

### 316.2 FIREARMS TRAINING

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

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

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

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

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

### 316.3 FIREARMS NON-QUALIFICATION

Each employee attending a range qualification day will be given two attempts to qualify on the qualification course.

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

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

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

- (a) Additional range assignments may be required until consistent weapon proficiency is demonstrated.

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- (b) Members shall be given credit for a range qualification after remedial training and a qualifying score is obtained.
- (c) No range credit will be given for the following:
  - 1. Unauthorized range makeup
  - 2. Failure to qualify after remedial training

## Chemical Agents Training

### 318.1 PURPOSE AND SCOPE

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

### 318.2 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.

### 318.3 CHEMICAL AGENT TRAINING

Only members trained and having shown adequate proficiency in the use of any chemical agent and the office's Use of Force Policy are authorized to carry the device.

- (a) The Training Coordinator shall ensure that appropriate training for all chemical agents occurs.
- (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 Coordinator 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.

### 318.4 PROFICIENCY TESTING

The Training Coordinator 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.

### 318.5 TRAINING RECORDS

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

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

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The Training Coordinator 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.

#### **318.6 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

### 320.1 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.).

### 320.2 POLICY

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

### 320.3 MEMBER TRAINING

All staff, volunteers and contractors who may have contact with inmates shall receive office-approved training on the prevention and detection of sexual abuse and sexual harassment within this facility. The Training Coordinator 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 Coordinator 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.
- (k) How to comply with relevant laws related to mandatory reporting of sexual abuse and sexual harassment to outside authorities.

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

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

#### **320.4 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 Coordinator shall maintain documentation that the facility's health care and mental health professionals have received the training referenced above, either from this office or elsewhere.

#### **320.5 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).

## Health Care Staff Orientation

### 322.1 PURPOSE AND SCOPE

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

### 322.2 NEW HEALTH CARE STAFF ORIENTATION

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

- (a) The purpose, goals, policies and procedures for the San Luis Obispo County Sheriff's Office
- (b) Security and contraband regulations
- (c) Access control to include use of keys
- (d) Appropriate conduct with inmates
- (e) Responsibilities and rights of facility employees and contractors
- (f) Universal and standard precautions
- (g) Occupational exposure
- (h) Personal protective equipment (PPE)
- (i) Biohazardous waste disposal
- (j) An overview of the correctional field as it relates to custody functions
- (k) Health care delivery protocols
- (l) Prison Rape Elimination Act (PREA)
- (m) Security during facility emergency
- (n) Qualified health care professional response during "officer down" incidents
- (o) Responding to critical facility emergencies
- (p) Facility Hostage Policy and medical response tactics
- (q) Medical emergency transportation procedures
- (r) Emergency evacuation routes and procedures
- (s) Proper use of facility issued radios
- (t) Techniques used by inmates to manipulate staff
- (u) Various inmate classifications inside the facility
- (v) Facility rules including appropriate dress attire

# San Luis Obispo County Sheriff's Office

## San Luis Obispo County SO Custody Manual

### San Luis Obispo County SO Custody Manual

#### *Health Care Staff Orientation*

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- (w) Dangers of working inside the facility
- (x) Basic jail operations
- (y) Procedures for routine facility lockdowns and emergency facility lockdowns
- (z) Provide a tour of the facility and an explanation of each unit inside the facility
- (aa) An explanation of inmate culture including how gangs play a role inside the facility.

#### **322.3 HEALTH CARE STAFF REFRESHER TRAINING**

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

#### **322.4 FACILITY-SPECIFIC TRAINING**

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#### **322.5 TESTING**



## Volunteer Program

### 324.1 PURPOSE AND SCOPE

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

#### 324.1.1 DEFINITION OF VOLUNTEER

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

### 324.2 VOLUNTEER PROGRAM MANAGEMENT

#### 324.2.1 PROGRAM MANAGER

The program manager shall be appointed by the Facility Manager or authorized designee. The function of the program manager is to provide a central coordinating point for effective program management within the Office, and to direct and assist staff and volunteer efforts to provide more productive services. The program manager should work with other Office staff on an ongoing basis to assist in the development and implementation of volunteer positions.

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

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

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#### *Volunteer Program*

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##### 324.2.2 RECRUITMENT

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

##### 324.2.3 SCREENING

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

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

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

A computer voice stress analysis exam may be required of each applicant depending on the type of assignment.

##### 324.2.4 SELECTION AND PLACEMENT

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

Volunteers should be placed only in assignments or programs that are consistent with their knowledge, skills, abilities and the needs of the facility.

##### 324.2.5 TRAINING

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

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

- (a) Office policies and procedures
- (b) Rules related to contraband in the facility

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#### *Volunteer Program*

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- (c) Prohibition on carrying weapons in the facility
- (d) Volunteer/offender relationship and general rules of conduct
- (e) Safety and emergency information

The program manager shall be responsible for creating and maintaining records of all volunteers.

Volunteers should be subject matter experts in their position to ensure they have adequate knowledge and skills to complete tasks required.

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

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

#### 324.2.6 FITNESS FOR DUTY

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

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

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

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

#### 324.2.7 DRESS CODE

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

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

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

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#### *Volunteer Program*

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#### **324.3 SUPERVISION OF VOLUNTEERS**

Each volunteer who is accepted to a position with the Office and assigned to the jail must have a clearly identified supervisor who is responsible for direct management of that volunteer. This supervisor will be responsible for day-to-day management and guidance of the work of the volunteer and should be available to the volunteer for consultation and assistance.

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

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

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

#### **324.4 CONFIDENTIALITY**

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

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

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

#### **324.5 PROPERTY AND EQUIPMENT**

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

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

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### *Volunteer Program*

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#### **324.5.1 TELECOMMUNICATION SYSTEMS USAGE**

Volunteers with access to law enforcement telecommunication systems shall successfully complete all mandated access training and radio procedures training prior to using any such equipment. Volunteers shall comply with all policies and procedures related to the use of such equipment. The program coordinator should ensure that appropriate training is provided for volunteers whenever necessary.

#### **324.6 DISCIPLINARY PROCEDURES/TERMINATION**

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

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

#### **324.6.1 EXIT INTERVIEWS**

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

#### **324.7 EVALUATION**

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

#### **324.8 VOLUNTEER REGISTRATION**

All volunteers shall be registered with the Office for insurance purposes, and each volunteer shall be. The facility shall maintain an identification record for each volunteer that may include a photograph, home address, current telephone numbers, background certification, training/orientation certifications, and list of special skills, languages spoken or volunteer specialty.

## Computer-Based Training

### 326.1 PURPOSE AND SCOPE

Computer-based training is generally conducted at the beginning of the correctional deputy's assigned shift or at a time deemed by the supervisor. Computer-based training provides an opportunity for an important exchange and application of this Office's policy and procedures.

### 326.2 COMPUTER-BASED TRAINING OPTIONS

The Lexipol Daily Training Bulletins (DTBs) is a web-based system that provides training on the San Luis Obispo County Sheriff's Office Custody Manual and other important topics. Generally, one training bulletin is available for each day of the month. However, the number of DTBs may be adjusted by the Training Coordinator.

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

Employees who are assigned to participate in the DTB program should complete each DTB at the beginning of their shift or as otherwise directed by their supervisor. Employees should not allow uncompleted DTBs to build up over time. Personnel may be required to complete DTBs missed during extended absences (e.g., vacation, medical leave) upon returning to duty. Although the DTB system can be accessed from any Internet-active computer, employees shall only take DTBs as part of their on-duty assignment as there will be no authorization for taking or viewing DTBs while off-duty.

Supervisors will be responsible for monitoring the progress of personnel under their command to ensure compliance with this policy. Supervisors will be provided a DTB compliance report every month by the Correctional Lieutenant in charge of Jail Operations. The report will show which employees are in compliance with the completion of DTBs. Employees shall complete DTBs by the end of each month. Failure to complete DTBs may result in discipline.

## Training Plan

### 328.1 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.

### 328.2 POLICY

- (a) The Training Coordinator 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.
- (b) A training plan shall be based on the assessment. It is the responsibility of the Training Coordinator to develop, maintain, review and update the training plan on an annual basis.
- (c) 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 Coordinator. The Training Coordinator shall coordinate with the budgeting office to develop a funding source for all mandatory training.
- (d) 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 Coordinator will execute the training plan on behalf of the Sheriff.

### 328.3 TRAINING COORDINATOR

- (a) A qualified individual shall be appointed by the Sheriff or the authorized designee to serve as the Training Coordinator, who shall report to the Sheriff or the authorized designee.
- (b) 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.
- (c) The Training Coordinator 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.

### 328.4 TRAINING RECORDS

- (a) An individual training file shall be maintained by the Training Coordinator 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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- (b) The maintenance of the training records shall be in sufficient detail as to comply with any outside audit requirements (28 CFR 115.34).
- (c) Whenever an employee obtains training that is not provided by this office, it shall be the responsibility of the employee to provide his/her immediate supervisor or the Training Coordinator evidence of completed training or education in a timely manner. The Training Coordinator or supervisor shall ensure that copies of such training records are placed in the employee's training file.
- (d) Training records shall contain the following information:
  - 1. Name of the employee
  - 2. Date of hire
  - 3. Education and training background (education and training received prior to hire)
  - 4. Type of training received Date the training was received and successfully completed
  - 5. Title of the training and name of the provider Test scores or training benchmarks
- (e) The Training Coordinator 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.

#### **328.5 COURSE CERTIFICATION/QUALITY ASSURANCE**

- (a) Training courses should be subject to a quality assurance process that, at minimum, provides:
  - 1. A complete description of the course, including the number of certified training hours achieved.
  - 2. A curriculum including job-related topics, and content and performance objectives.
- (b) Training should not be comprised only of the minimum number of hours required annually but also of instruction specific to tasks performed by employees in the facility. Courses should include a testing component that shows a measurable transfer of knowledge and a mastery of topics.

#### **328.6 TRAINING PROCEDURES**

- (a) All employees assigned to attend training shall attend as scheduled, unless previously excused by their immediate supervisor or the Training Coordinator. 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.



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5. Emergency situations.
  - (b) When an employee is unable to attend mandatory training, that employee shall:
    1. Notify his/her supervisor as soon as possible but no later than one hour prior to the start of training.
    2. Document his/her absence in a memorandum to the supervisor.
    3. Make arrangements through the supervisor and the Training Coordinator to attend the required training on an alternate date.

## Custody Division Chaplain Program

### 329.1 PURPOSE AND SCOPE

The San Luis Obispo County Sheriff's Office Chaplain Program is established for the purposes of providing spiritual and emotional support to all members of the Sheriff's Office and their families.

### 329.2 POLICY

It is the policy of the Sheriff's Office that the Chaplain Program shall be a non-denominational, ecumenical ministry provided by volunteer clergy without financial compensation.

### 329.3 GOALS

Members of the Chaplain Program shall fulfill the program's purpose in the following manner:

- (a) Serving as a resource for Custody Division personnel dealing with incidents such as accidental deaths, suicides, suicidal subjects, critical incidents, drug and alcohol abuse, and other situations that may arise.
- (b) Providing an additional link between other chaplain programs and the Sheriff's Office.
- (c) Providing counseling, spiritual guidance and insight for Custody Division personnel and their families.
- (d) Being alert to the spiritual and emotional needs of Custody Division personnel and their families.
- (e) Familiarizing themselves with the role of Correctional Deputies and support staff in the law enforcement community.

### 329.4 REQUIREMENTS

Candidates for the Chaplain Program shall meet the following requirements:

- (a) Must be above reproach, temperate, prudent, respectable, hospitable, able to teach, not be addicted to alcohol or other drugs, not contentious, and free from excessive debt.
- (b) Must manage their household, family, and personal affairs well.
- (c) Must have a good reputation with those outside the church.
- (d) Must be ecclesiastically certified and/or endorsed, ordained, licensed, or commissioned by a recognized religious body.
- (e) Must successfully complete an appropriate level background investigation.
- (f) Must have at least five years of successful ministry experience within a recognized church or religious denomination.
- (g) Membership in good standing with the International Conference of Police Chaplains (ICPC) is desired but is not required

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#### *Custody Division Chaplain Program*

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#### **329.5 SELECTION PROCESS**

Chaplain candidates are encouraged to participate in a sit-along before and during the selection process. Chaplain candidates shall successfully complete the following process prior to deployment as a chaplain:

- (a) Appropriate written application.
- (b) Recommendation from their church elders, board, or council.
- (c) Interview with Sheriff or his/her designee & Chaplain Supervisor
- (d) Successfully complete an appropriate background investigation.
- (e) Obtain a Jail clearance through the Custody Division Clerk
- (f) Participate in a Jail orientation with the Jail Programs Unit supervisor
- (g) Complete an appropriate probationary period as designated by the Sheriff.

#### **329.6 DUTIES AND RESPONSIBILITIES**

The duties of a chaplain include, but are not limited to, the following:

- (a) Assisting in making notification to families of department members who have been seriously injured or killed. After notification, responding to the hospital or home of the department member.
- (b) Visiting sick or injured law enforcement personnel in the hospital or at home.
- (c) Attending and participating, when requested, in funerals of active or retired members of the Department.
- (d) Responding to natural and accidental deaths, suicides and attempted suicides, and any other incident that in the judgment a Correctional Sergeant or higher ranking officer, their services could be needed.
- (e) Being on-call and if possible, on-duty during major incidents or any public function that requires the presence of a large number of department personnel.
- (f) Counseling deputies and other personnel with personal problems, when requested. Attending department and academy graduations, ceremonies and social events and offering invocations and benedictions, as requested.
- (g) Being responsible for the organization and development of spiritual organizations in the Custody Division.
- (h) Responding to all major disasters such as earthquakes, bombings and similar critical incidents in the jail.
- (i) Providing liaison with various religious leaders of the community.
- (j) Assisting public safety personnel and the community in any other function of the clergy profession, as requested.
- (k) Participating in in-service training classes.
- (l) Willing to train to enhance effectiveness.

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- (m) Promptly facilitating requests for representatives or ministers of various denominations.
- (n) Making referrals in cases where specialized attention is needed or in cases that are beyond the chaplain's ability to assist.

Chaplains may not proselytize or attempt to recruit members of the department into a religious affiliation while on-duty unless the receiving person has solicited spiritual guidance or teaching. If there is any question as to the receiving person's intent, chaplains should verify that the person is desirous of spiritual counseling or guidance before engaging in such discussion. Chaplains may not accept gratuities for any service or follow-up contacts that was provided while functioning as a chaplain for the San Luis Obispo County Sheriff's Office.

#### **329.7 CLERGY-PENITENT CONFIDENTIALITY**

No person who provides chaplain services to members of the department may work or volunteer for the San Luis Obispo County Sheriff's Office in any capacity other than that of chaplain. Department chaplains shall be familiar with state evidentiary laws and rules pertaining to the limits of the clergy-penitent privilege and shall inform department members when it appears reasonably likely that the member is discussing matters that are not subject to the clergy-penitent privilege. In such cases, the chaplain should consider referring the member to a non-department counseling resource. No chaplain shall provide counsel to or receive confidential communications from any San Luis Obispo County Sheriff's Office employees concerning an incident personally witnessed by the chaplain or concerning an incident involving the chaplain.

#### **329.8 COMMAND STRUCTURE**

- (a) Under the general direction of the Sheriff or his/her designee, chaplains shall report to the Senior Chaplain and/or the Jail Programs Unit Sergeant.
- (b) The Sheriff shall make all appointments to the Chaplain Program and will designate a Senior Chaplain.
- (c) The Senior Chaplain shall serve as the liaison between the Chaplain Unit and the Sheriff. He/she will arrange for regular monthly meetings, act as chairman of all chaplain meetings, prepare monthly schedules, maintain records on all activities of the Chaplain Unit, coordinate activities that may concern the members of the Chaplain Unit and arrange for training classes for chaplains.

#### **329.9 OPERATIONAL GUIDELINES**

- (a) Chaplains shall be permitted to sit along with officers during any shift and observe San Luis Obispo County Sheriff's Office operations, provided the on-duty Correctional Sergeant has been notified and approved of the activity.
- (b) Chaplains shall not be evaluators of employees and shall not be required to report on an employee's performance or conduct.
- (c) While in the jail, a Chaplain shall never function as an officer.

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- (d) During jail lock down situations, the Chaplain will be escorted out of the facility in the same manner as any other volunteer. If the incident is isolated to a particular housing unit, the Chaplain shall be instructed to go to an unaffected area of the jail.
- (e) Chaplains shall serve only within the jurisdiction of the San Luis Obispo County Sheriff's Office unless otherwise authorized by the Sheriff or his designee.
- (f) Each chaplain shall have access to current personnel rosters, addresses, telephone numbers, duty assignments and other information that may assist in their duties. Such Information will be considered confidential and each chaplain will exercise appropriate security measures to prevent distribution of the information.

#### **329.10 UNIFORM AND BADGES**

A distinct uniform will be acquired and maintained by each Chaplain. The uniform shall consist of:

##### **CLASS A:**

- (a) Jacket: Forest green, 55% polyester/45% wool, "Ike" style, to CHP specifications, with epaulets and gold buttons embossed with the letter "S". It shall have a single black stripe with gold piping worn on the outside half of both sleeves, 3 inches from the cuff. The jacket will have shoulder patches, badge, service stripes, insignia of rank, name plate, and medals as described in appropriate sections.
- (b) Shirt: White, 55% polyester/45% worsted wool blend, dry clean only, long sleeve, double stitched with epaulets. It shall have shoulder patches, badge, service stripes, insignia of rank, name tag and medals as described in the appropriate sections.
- (c) Necktie: Black polyester or polyester/wool blend, matte finish, break-away style.
- (d) Tie Bar: Shiny gold, ¼ inch in width, worn across the tie with the top edge in line with the top edge of the shirt pocket flaps. The bar length will be equal to tie width, and the bar will be free of ornaments, insignia, or engraving.
- (e) Trousers: Forest green, 55% polyester/45% worsted wool, dry clean only, with two front pockets, two rear pockets, and two "sap" pockets. Manufactured to Los Angeles County Sheriff's Office specifications. Trousers with additional cargo pockets are not authorized for wear.
- (f) Uniform Belt: Black, 1 ½ inches in width.
- (g) Footwear: Plain black leather, closed toe, regular or ankle high shoes with standard heel, or plain black leather, closed toe, slip-on boots with 9-inch vamps.
- (h) Socks: Black cloth-color optional when wearing authorized high-top boots.

##### **CLASS C:**

- (a) Shirt: Silver Tan, 5-11 Brand, Professional Polo, Short or Long Sleeve, Embroidered with the Chaplain Unit logo and the Chaplain name.
- (b) Trousers: TDU Green, 5-11 Brand, TDU 1.5" with black belt
- (c) Footwear: Black lace-up plain toe leather boots or shoes, with or without canvas panels.

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#### **329.11 TRAINING**

The Department will establish a minimum number of training hours and standards for department chaplains. The training may include stress management, death notifications, post-traumatic stress syndrome, burnout for officers and chaplains, legal liability and confidentiality, ethics, responding to crisis situations, the law enforcement family, substance abuse, suicide, deputy injury or death, and sensitivity and diversity, as approved by the Training Manager.

## Peer Support Program

### 330.1 PURPOSE AND SCOPE

The purpose of a Peer Support Program is to provide employees with the opportunity to receive peer support during times of personal and professional crisis. The assistance is confidential and will be a support network for employees wishing to participate in the program.

### 330.2 POLICY

It is the policy of this office that members of the Peer Support Program will provide an accessible support network for employees and willing to be of service to employees who express a need for assistance. Peer Support Members will promote trust, appropriate anonymity and confidentiality for employees participating in peer support efforts. Peer Support Members will provide services, upon request, to employees coping with stressors stemming from their professional

### 330.3 SELECTION REQUIREMENTS

Employees requesting to become Peer Support Team Members will submit a memorandum of interest and be subject to the following selection criteria:

- (a) Have no work restrictions involving psychological stress
- (b) Is not the subject of a serious investigation
- (c) Participate in an oral interview by a panel of current Peer Support Members
- (d) Receive a positive recommendation by the panel based upon a majority vote of those present
- (e) Receive an endorsement from both the Jail Operations Correctional Lieutenant and Correctional Captain
- (f) Agree to maintain confidentiality with the guidelines of the policy
- (g) Attend necessary on-going training

### 330.4 RESPONSIBILITIES

Any employee who requests and is assigned as a member of the Peer Support Program will be subject to the following responsibilities:

- (a) Shall work to develop a sincere rapport and maintain confidentiality as defined in the Program.
- (b) Shall maintain a reasonable attempt to remain available to the individual and offer additional support, if necessary.
- (c) Shall promote trust, anonymity and confidentiality for employees who seek the assistance of the Peer Support Program. Communications between a Peer Support Member and an employee shall be considered confidential by the Sheriff's Office with the following exceptions:
  - (a) When there is reason to believe that the employee intends to injure another person.

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- (b) When there is cause to believe the employee is or has been a participant in any crime.
  - (c) When there is a clear and present danger to self, citizens or co-workers.
  - (d) When there is cause to believe violations of directives or policies are violated.
  - (e) When the Peer Support Member has reason to fear the employee is not fit for duty.
- (d) Peer Support Members may need to speak to a co-worker off-duty. Any time spent off-duty is on a voluntary basis and both overtime or adjustment time will not be accrued. If a Peer Support Member responds to a critical incident while they are off-duty, it is on a voluntary basis.
- (e) Peer Support Member agree to be contacted and, if available, may need to respond at any hour.

#### **330.5 TRAINING**

Peer Support Members will be provided training consistent with the need to fulfill their responsibilities. It is the responsibility of the Training Coordinator to provide Peer Support Members with initial and continued training that covers the following subjects:

- (a) Initial Peer Support Seminar
- (b) Crisis identification
- (c) Crisis intervention and counseling
- (d) Listening skills
- (e) Assessment skills
- (f) Suicide assessment
- (g) Alcohol and substance abuse

#### **330.6 USE OF OFFICE EQUIPMENT AND FACILITIES**

Peer Support Members may seek the use of available office resources, including the officer facilities while assisting employees. Office facilities will be used with the knowledge and approval of the immediate supervisor responsible for the involved equipment or facility.

#### **330.7 INTERNAL OR CRIMINAL INVESTIGATIONS**

A Peer Support Member assisting an individual, who becomes the subject of a disciplinary or internal investigation, may not hamper or impede the actual investigation, nor may they attempt to shelter the individual from the investigation.

If a Peer Support Member has prior involvement or knowledge of an incident which would likely result in them being a witness in an internal or criminal investigation, the Peer Support Member shall not enter into a peer support relationship with the involved employee, but should refer the employee to an uninvolved Peer Support Member.



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The Peer Support Member's role in disciplinary situations should be one of support and assisting the employee through any stress faced after the disciplinary process.

## **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, incarcerated persons, and all others who enter the jail, while allowing the facility to fulfill its primary purpose.

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

### 400.2 POLICY

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

### 400.3 PROCEDURE

The Facility Manager 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, incarcerated persons, 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 incarcerated persons in the facility; the identification of alternative facilities outside the boundaries of the disaster or threat and the potential capacity of those facilities; incarcerated person 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 Central Control and the on-duty Correctional Sergeant. The Correctional Sergeant, or in his/her absence the next on-duty supervisor, may determine whether to order a partial or full lockdown of the facility and shall notify the Correctional Lieutenant as soon as practicable. The Sheriff will be notified via the chain of command.

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

A headcount shall be immediately conducted for all incarcerated persons, visitors, contractors and staff. The headcount shall be initiated in ATIMS. The Correctional Sergeant shall be immediately notified of the status of the headcount. If any person is unaccounted for the Correctional Sergeant shall direct an immediate search of the facility and notify the Correctional Lieutenant 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, the safety of staff or security of the facility.

#### **400.5 HUNGER STRIKE**

Upon being made aware that one or more incarcerated persons is engaging in a hunger strike, the staff will notify the Correctional Sergeant, who will notify the Correctional Lieutenant. The Correctional Lieutenant should evaluate the basis for the strike and seek an appropriate resolution.

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

##### **400.5.1 NOTIFICATION OF QUALIFIED HEALTH CARE PROFESSIONALS**

The Facility Manager 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 incarcerated persons involved in the hunger strike and make recommendations to the Correctional Lieutenant or the supervisory staff responsible for oversight of the incident.

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

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##### **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 Incarcerated Person Grievances Policy shall guide staff on resolving incarcerated person grievances.

If the hunger strike remains unresolved, the Facility Manager may direct the appropriate staff to examine the incarcerated person 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 incarcerated persons 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 Correctional Sergeant, Correctional Lieutenant or the Facility Manager of the incident. The Correctional Sergeant, Correctional Lieutenant or Facility Manager may direct additional staff as needed to resolve the disturbance (15 CCR 1029(a)(7)(B)).

If the disturbance can not be contained, the Watch Commander shall be notified to request additional assistance. The Watch Commander shall notify the CMC Watch Commander of the incident and will assemble the Mobile Field Force (MFF).

##### **400.6.1 NOTIFICATIONS**

The Correctional Sergeant should notify the Facility Manager, via the chain of command, of the disturbance as soon as practicable. Based on the seriousness of the event, the Facility Manager should notify the Sheriff.

##### **400.6.2 NOTIFICATION OF QUALIFIED HEALTH CARE PROFESSIONALS**

The Facility Manager 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 Correctional Lieutenant or Facility Manager 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 incarcerated persons forcibly and/or violently take control or attempt to take control of any area within the confines of the jail.

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

#### 400.7.1 RESPONSE TO RIOTS

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

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

All incarcerated persons who have participated in a riot shall be separated and secured as soon as practicable. If necessary, injured incarcerated persons shall receive a medical evaluation and treatment. If the injured incarcerated person is medically cleared to remain in the jail, the incarcerated person 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 Correctional Sergeant or a responsible staff member shall notify the Facility Manager, via the chain of command, who in turn, shall notify the Sheriff.

#### 400.7.4 REPORTING

The Facility Manager or authorized designee 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.

#### 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

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from the perspective of what worked, what actions were less than optimal, and how the response to a future incident might be improved.

If appropriate, the details of the incident will be used to develop a training course for responding to facility disturbances. The goal of any debriefing process is continuous improvement. The debriefing should be focused on the incident and an improved response. A moderator should be used to ensure that no individual or group involved in the response is publicly ridiculed.

#### **400.8 HOSTAGES**

The Office does not recognize the taking of hostages as a reason to relinquish control of the jail environment. All staff, incarcerated persons, 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 San Luis Obispo County Sheriff's Office to use all available resources necessary to bring about a successful end to a hostage situation (15 CCR 1029(a)(7)(B)).

##### **400.8.1 RESPONSE TO HOSTAGE INCIDENT**

Central Control and the Correctional Sergeant should immediately be notified at the earliest sign of a hostage incident. Central Control shall notify the Correctional Sergeant, Watch Commander and Correctional Lieutenant. The Facility Manager will notify the Sheriff as soon as practicable.

The Correctional Sergeant or Correctional Lieutenant shall make every effort to ensure that the hostage incident remains confined to the smallest area possible. All door controls accessible to the incarcerated person shall be disabled. Emergency exits that lead outside the secure perimeter shall be guarded.

##### **400.8.2 NOTIFICATION OF QUALIFIED HEALTH CARE PROFESSIONALS**

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

##### **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 Facility Manager 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 Facility Manager 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

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for continuous improvement and to identify additional training or systemic changes that may be required.

#### **400.9 ESCAPES**

Upon being made aware that an escape may have occurred, or did in fact occur, the staff member should immediately notify Central Control. Central Control should notify the Correctional Sergeant, Correctional Lieutenant or Facility Manager. As soon as practicable, the Facility Manager should notify the Sheriff.

Once the escape is verified and immediate actions taken inside the facility (lockdown, etc.), the Watch Commander should notify all local law enforcement agencies in accordance with Operational Directive E1.

##### **400.9.1 INCARCERATED PERSON COUNTS**

As soon as the facility is fully locked down, a full incarcerated person/wristband count should be taken and entered into ATIMS.

All incarcerated persons who are outside of the secure perimeter of the facility (e.g., court, work details) shall be located and identified. Any missing incarcerated person should have his/her identity disclosed and his/her facility record should be accessed by the Facility Manager (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 incarcerated person 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 incarcerated person'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 incarcerated person's last known address and a list of their associates.

##### **400.9.3 REPORTING**

The Correctional Sergeant or a designated staff member should submit an incident report to the Correctional Lieutenant and Facility Manager. 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 Correctional Lieutenant 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 Facility Manager should be notified via the chain of command. The Facility Manager should make the determination regarding the magnitude of the event and whether it warrants notification of the Sheriff.



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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 incarcerated persons, the Shift Commander 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 incarcerated persons.

In the event that the jail can no longer accept additional incarcerated persons without compromising the safety and security of the facility, mutual aid may be requested from allied counties. Title 15 CCR standards may be temporarily suspended. The Facility Manager 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 Facility Manager shall ensure that there is a review of emergency response plans at least annually. This review should be documented with reports submitted to the Facility Manager 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 coordinator is responsible for developing appropriate initial training and annual refresher training.

Emergency planning training can occur in several forms including but not limited to: classroom instruction, policy review and acknowledgement, mock practical exercises and drills. Each type of emergency covered in the emergency response plan must be included in the training.

A memorandum with the dates and the times training or drills should be provided, and proof of competency for each participant should be maintained by the Training Coordinator. The Training Coordinator shall forward an annual report to the Facility Manager on the status of emergency response plan training or drills. Any training deficiencies identified in this report should be rectified within 90 days of the report.

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Annually, each Correctional Sergeant on shift shall review the evacuation plan with the staff on their shift. The staff member shall sign the appropriate sign off sheet indicating they received training on evacuations. The Operations Lieutenant will ensure this training occurs annually and will retain the records of completion. The Operations Lieutenant shall ensure drills are completed every four months on both day and night shifts.

## **Custody Emergency Response Team (CERT)**

### **402.1 PURPOSE AND SCOPE**

It is the purpose of this Office to develop and establish a Custody Emergency Response Team to respond and resolve major inmate disturbances.

### **402.2 POLICY**

It is the policy of this Office that the Custody Emergency Response Team will be made up of Correctional Staff who were selected from a testing process and receive specialized training in resolving inmate disturbances.

### **402.3 SELECTION PROCESS**

Correctional Staff interested in becoming members of the Custody Emergency Response Team will submit a memorandum of interest via the Chain of Command to the CERT Correctional Lieutenant when position openings are posted.

Correctional Staff applying to become new CERT members will be subject to the following testing requirements:

- (a) An oral board panel interview. The panel shall consist of at least one active CERT member.
- (b) Timed physical agility testing.

CERT will consist of a max of 16 members. CERT will encompass Correctional Sergeants, Senior Correctional Deputies and Correctional Deputies. New members selected are not officially on CERT until they successfully complete the required 40 hour initial training.

#### **402.3.1 LENGTH OF ASSIGNMENT**

The designated time of assignment to the Custody Emergency Response Team will be two years. At the conclusion of each two year term CERT members are allowed to submit a memorandum to the CERT Correctional Lieutenant to renew for an additional two years. Management will evaluate each memorandum and make the decision to approve or deny the renewal based on the performance of each team member. There are no maximum renewals members may apply for.

#### **402.3.2 TEAM EVALUATION**

Continual evaluation of a team member's performance and efficiency as it relates to the positive operation of the unit shall be conducted by the CERT Correctional Lieutenant. The performance and efficiency level, as established by the team supervisor, will be met and maintained by all CERT members. Attendance, dependability, responsiveness to training and participation in CERT activities will all be requirements. Any member of CERT who performs or functions at a level less than satisfactory, as deemed by the CERT Correctional Lieutenant's evaluation, shall be subject to dismissal from the team.

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#### **402.4 TRAINING**

New members of the Custody Emergency Response Team will receive 40 hours of initial training including but not limited to: Room Removal and Clearing, Riot Response and High Risk Transports. Active members will receive sixteen hours of annual training. The Training Coordinator will find and schedule applicable specialized annual training for active CERT members.

Once a member has completed the 40 hours of initial training they will only need to attend the 16 hours of annual training for the remainder of their time on the team.

#### **402.5 ACTIVATION AND RESPONSE**

The on-duty Correctional Sergeant may activate the Custody Emergency Response Team if he/she feels an inmate disturbance is impacting the safety and security of the facility, inmates or staff. When the CERT is activated, the CERT Leader will become the incident Commander on-scene. The on-duty Correctional Sergeant will provide support needs at the request of the Incident Commander. The Incident Commander shall brief the Correctional Lieutenant if available of the situation. The incident Commander and the Correctional Lieutenant will work collaboratively to develop a tactical plan to resolve the situation.

The CERT Leader will be responsible for ensuring the team responds and follows all Office policies and specialized training received.. The CERT Leader in collaboration with the Correctional Lieutenant will determine whether an immediate or calculated use of force is needed to resolve a disturbance. In the event of immediate use of force the CERT will follow all guidelines set forth in our Office's Use of Force Policy. If a calculated use of force is determined the CERT Leader will follow our Office's Use of Force Policy-Confrontation Avoidance Procedure prior to initiating any use of force.

At any time the CERT Leader can determine that a calculated use of force situation has evolved to the need of an immediate use of force.

##### **402.5.1 TEAM MEMBERS**

During an activation, the Custody Emergency Response Team should be comprised of the following members:

- (a) CERT Leader
- (b) Shield Deputy
- (c) Arms Control Deputies (2)
- (d) Legs Control Deputy
- (e) Munitions Deputy
- (f) Camera Deputy
- (g) Support Deputy/Scribe

The CERT Leader has the discretion to change the assignments or personnel assigned to any position.

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##### **402.5.2 ARMORY AND MUNITIONS**

The Custody Emergency Response Team has access to an armory which contains specialized weapons and munitions for multiple force options. Only Custodial Staff who have received specialized training in the use of these weapons and munitions may deploy them.

##### **402.6 REPORTING**

At the conclusion of an activation, the Custody Emergency Response Team Leader will write a Jail Incident Report consistent with the Office's Report Preparation Policy. Each member of the team who utilized force will be required to write a supplemental report detailing their actions in regards to the use of force.

If a disturbance results in a crime scene, the on-duty Correctional Sergeant will notify the Watch Commander and secure the scene. The on-duty Correctional Sergeant will document and secure the scene in accordance with our Office's Report Preparation Policy and Disposition of Evidence Policy.

##### **402.7 CURRENT CERT TEAM MEMBERS ANNUAL REQUIREMENTS**

CERT Team Members shall annually pass a timed physical agility test. Any CERT member who fails to attain the minimum physical fitness qualification score will be notified of the requirement to retest and attain a qualifying score. Within 30 days of the previous physical fitness test date, the member required to qualify shall report to a team supervisor and complete the entire physical fitness test. Failure to qualify after a second attempt may result in dismissal from the team. Those members who are on vacation, ill, or are on modified duty status with a doctor's note of approval on the test date, shall be responsible for reporting to a team supervisor and taking the test within 30 days of their return to regular duty. Any member, who fails to arrange for and perform the physical fitness test within the 30-day period, shall be considered as having failed to attain a qualifying score and may result in dismissal from the team.

CERT Team Members shall also attend annual specialized training totaling 16 hours. Members who fail to attend the training may be dismissed from the team.

## Emergency Staffing

### 404.1 PURPOSE AND SCOPE

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

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

### 404.2 POLICY

It is the policy of this office to be prepared to operate a safe and secure facility in the event of a work staffing emergency. Staffing emergencies that could negatively affect the good order of 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, the Facility Manager, or the authorized designee shall be responsible for ensuring that an appropriate emergency staffing plan exists.

#### 404.2.1 EMERGENCY STAFFING

In the event the Facility Manager becomes aware that a staffing emergency exists or may occur, staff members who are present may be ordered to remain at their posts by the Correctional Sergeant. If the staffing emergency extends past one shift the Facility Manager will notify the Sheriff. Plans should include measures to achieve minimum staffing for the facility within four hours of a staffing emergency and may include the following operational adjustments:

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

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##### 404.2.2 LEGAL ASSISTANCE

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

##### 404.2.3 TRAINING

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

- (a) Establishing a distribution list for the contingency plan.
- (b) Establishing a periodic review and update of the plan.
- (c) Ensuring that all supervisors and managers are periodically trained on the plan.
- (d) Ensuring that all supervisors and managers are provided a copy of the plan and/or a means to access it in the event of an emergency.

The Training Coordinator should be responsible for:

- (a) Documenting all training.
- (b) Maintaining training records for each supervisor and manager and ensuring that those personnel periodically receive appropriate update training on the plan.

## Fire Safety

### 406.1 PURPOSE AND SCOPE

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

### 406.2 POLICY

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

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

#### 406.2.1 FIRE CODES

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

#### 406.2.2 FIRE PREVENTION RESPONSIBILITY

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

### 406.3 FIRE SUPPRESSION PRE-PLANNING

Pursuant to Penal Code § 6031.1, the Facility Manager 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 incarcerated persons 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.

#### **406.4 FIRE PREVENTION EQUIPMENT**

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

Should such a device become inoperative, the Facility Manager 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 incarcerated persons or staff.

#### **406.5 FIREFIGHTING EQUIPMENT**

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

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

##### **406.5.1 SELF-CONTAINED BREATHING APPARATUS**

The facility should maintain sufficient quantities of self-contained breathing apparatus (SCBA) for staff to initially respond to a fire with the purpose of facilitating the safety of the occupants, including evacuation, if necessary. The Facility Manager or the authorized designee is responsible for developing and implementing a written respiratory protection program that includes fit testing and training.

#### **406.6 FIRE TRAINING**

The Training Coordinator 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.

#### **406.7 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 (15 CCR 1032). 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

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equipment, and staff familiarity with prevention and suppression techniques, suppression pre-planning, SCBA use, emergency response, fire safety equipment use, and the evacuation plan.

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

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

#### **406.7.1 FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS**

The Facility Manager, 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 incarcerated persons under the direction of the staff.

#### **406.8 EMERGENCY HOUSING OF INCARCERATED PERSONS**

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

## Emergency Power and Communications

### 408.1 PURPOSE AND SCOPE

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

### 408.2 POLICY

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

#### 408.2.1 PREVENTIVE MAINTENANCE

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

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

#### 408.2.2 SAFETY AND SECURITY

All safety and security equipment will be repaired or replaced in an expedited manner by qualified personnel. In the event that safety and/or 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 incarcerated persons housed elsewhere. Or, staffing should be increased sufficiently for the area to remain safe and secure until the repair can be completed.

#### 408.2.3 INSPECTION AND TESTING

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

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

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

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

## Evacuation Plan

### 410.1 PURPOSE AND SCOPE

The purpose of this policy is to promote planning and to establish procedures, responsibilities and training requirements for the staff of the San Luis Obispo County Sheriff's Office Jail in case of fire and other emergency evacuations.

### 410.2 POLICY

The community, staff, volunteers, contractors and incarcerated persons 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 and storm) (15 CCR 1032(d)). All custody staff should be knowledgeable about the evacuation plan, policy and procedures.

### 410.3 EVACUATION PLAN

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

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

The Facility Manager shall ensure that the evacuation plan is maintained and updated as needed and is reviewed for accuracy at least annually in coordination with the local fire authority.

A current copy of the evacuation plan shall be maintained in the Administration office and in the Correctional Sergeant's Office.

#### 410.3.1 EXITS

All exits in this facility should be distinctly and permanently marked. Exit signs will be clearly visible and maintained in all public areas of the facility.

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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#### **410.3.2 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 incarcerated persons.

#### **410.3.3 EMERGENCY HOUSING OF INCARCERATED PERSONS**

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

#### **410.4 TRAINING DRILLS**

The Facility Manager should ensure that drills of the evacuation plan are conducted at least annually on each shift and for 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 incarcerated persons may participate. Violent and/or dangerous incarcerated persons 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, the on-duty supervisor will be required to complete a performance evaluation to document knowledge and to show proficiency.

## **Chapter 5 - Management of Incarcerated Persons**

## Population Management

### 500.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a system of incarcerated person 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 Facility Manager or the authorized designee is responsible for ensuring that detailed daily reports of the facility's incarcerated person population are completed and maintained by the staff. The reports shall reflect the average daily population of sentenced and non-sentenced incarcerated persons by categories of gender and juvenile status. The Facility Manager 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 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. Unsentenced incarcerated persons
  - 2. Sentenced incarcerated persons
- (c) Highest one-day incarcerated person population
- (d) Number and percentage of:
  - 1. Bookings
  - 2. Incarcerated persons by gender
  - 3. Non-sentenced incarcerated persons
  - 4. Felony incarcerated persons
  - 5. Pretrial incarcerated persons released
  - 6. Sentenced incarcerated persons released early due to lack of space
  - 7. Incarcerated persons receiving psychotropic medication



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The Facility Manager or the authorized designee is responsible for ensuring that all required information is supplied to the Board of State and Community Corrections as required in the Jail Profile Survey(15 CCR 1040).

#### **500.4 POLICY**

It is the policy of this facility that an incarcerated person population management system should be established and maintained to account for the admission, processing, transfer, and release of incarcerated persons.

## Counts

### **502.1 PURPOSE AND SCOPE**

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

### **502.2 POLICY**

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

### **502.3 PROCEDURE**

The Facility Manager or the authorized designee shall be responsible for creating and maintaining a written procedure establishing the process and frequency of counts. Incarcerated person counts shall be conducted at least once every twelve. Emergency counts may be conducted at the direction of the Correctional Lieutenant or Correctional Sergeant as needed.

All counts shall be documented on ATIMS and verified by the Correctional Sergeant. Counts shall include all incarcerated persons in custody, including those on work assignments, furlough, education release and those who are off-site, such as the hospital.

Any discrepancy in the count should immediately be reported to the Facility Manager and resolved prior to the release of the shift personnel responsible for the count. A formal count in which all incarcerated persons are personally identified by a deputy should be conducted at least once a day at a time established by the Facility Manager. 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 count, the Correctional Sergeant will initiate action to investigate the escape by promptly notifying law enforcement agencies and the Facility Manager, initiating a search, and complying with other procedures as needed in accordance with the Facility Emergencies Policy.

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

## Reception

### 504.1 PURPOSE AND SCOPE

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

### 504.2 POLICY

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

### 504.3 PRE-BOOKING SCREENING

All arrestees shall be screened prior to booking to ensure the arrestee is medically acceptable for admission and that all arrest or commitment paperwork is present to qualify the arrestee for booking. Required paperwork may include 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 Incarcerated Persons with Disabilities Policy)
- (g) Information regarding suicidal statements or actions

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

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

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

#### 504.3.1 IMMIGRATION DETAINERS

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

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

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

#### 504.3.2 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 their attorney or to one additional person whom the individual may designate (Government Code § 7283.1).

#### 504.3.3 ICE INTERVIEWS

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

#### 504.3.4 IMMIGRATION INQUIRIES PROHIBITED

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

### **504.4 SEARCHES BEFORE ADMISSION**

All arrestees and their property shall be searched for contraband by the arresting or transporting deputy/officer before being accepted for booking. The Correctional Deputy shall conduct a subsequent search of the arrestee in the Pre-Booking sallyport. All contraband items will be handled according to facility policy. Items of possible evidentiary value may be turned over to the arresting or transporting deputy/officer for processing or processed according to the facility's rules for handling evidence. Approved personal property and clothing will be accepted. Items not approved will be returned to the arresting or transporting deputy/officer prior to the arrestee being accepted for booking. A description of the items returned to the arresting or transporting deputy/

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officer shall be documented on the arrestee's property sheet. The arresting or transporting deputy/officer shall sign the property sheet for verification of returned items.

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

#### **504.5 ADMISSION PROCESS**

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

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

- Identifying information, including name and any known aliases or monikers
- Current or last known address and telephone number
- Date and time of arrest
- Date and time of admission
- Name, rank, agency, and signature of the arresting deputy and transporting deputy, if different
- Health insurance information
- Legal authority for confinement, including specific charges, arrest warrant information, and court of jurisdiction
- Gender
- 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 incarcerated person
- 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 incarcerated person, such as scars, birthmarks, deformities, or tattoos
- Medical, dental, and mental health screening records, including suicide risk

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- 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 incarcerated person shall be asked if they served in the U.S. military. The response shall be documented and made available to the incarcerated person, the person'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 incarcerated person's signature should be obtained on the booking record and on any forms used to record money and property.

#### **504.5.1 LEGAL BASIS FOR DETENTION**

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

#### **504.5.2 ADMISSION OF SEX OFFENDER REGISTRANTS**

The Records and Warrants shall inform the California Department of Justice when incarcerated persons 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).

#### **504.6 TRANSITION FROM RECEPTION TO GENERAL POPULATION**

The Classification Unit 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 Correctional Sergeant, to make telephone calls before being placed in general population.

#### **504.6.1 MONITORING FOR SIGNS OF INTOXICATION AND WITHDRAWAL**

Staff shall respond promptly to medical symptoms presented by incarcerated persons 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 incarcerated person may be suffering from overdose or experiencing withdrawal symptoms shall promptly notify the supervisor, who shall ensure that the appropriate medical staff is notified.

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##### 504.6.2 INCARCERATED PERSON SEPARATION

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

##### **504.7 INCARCERATED PERSON PROPERTY CONTROL**

All property received from incarcerated persons at the time of booking shall be inventoried. A receipt should be signed by the person and the booking deputy and referenced to the booking number before the admission is completed. The original copy of the property receipt will be retained and placed in the person's file and/or with the property. A second copy will be presented to the incarcerated person 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 incarcerated person's choosing, or stored in containers designed for this purpose.

##### 504.7.1 VERIFICATION OF INCARCERATED PERSON'S MONEY

All monies belonging to the incarcerated person and retained by the Correctional Deputy shall be verified in front of the incarcerated person, except those placed in the IRC Kiosk by the arresting/transporting officer. The monies will then be verified a second time by a Correctional Technician in the Reception area. The funds are placed on the incarcerated person's hot property. All monies processed in the kiosk will be placed on the incarcerated person's account.

Money can be released during the first 15 days of incarceration. A *Property Release* form which is signed by the incarcerated person will be placed with their Property Sheet. All funds are placed on inmate accounts.

##### 504.7.2 PROPERTY STORAGE

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

##### **504.8 TELEPHONE CALLS**

Every person detained in this facility shall be entitled to at least three completed telephone calls immediately upon being admitted and no later than three hours after arrest. Either the arresting or booking deputy must ask the incarcerated person if they are 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 person is a custodial parent with responsibility for a minor child, the person 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 incarcerated person to make necessary arrangements for matters that they may be unable to complete as a result of being arrested. The

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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 incarcerated person's behalf, for example in the case of a person who is so intoxicated that they cannot make a call. The custody staff is not required to wake an intoxicated person so that the person may complete a call. An intoxicated person should be provided the opportunity to make the telephone calls once the person awakes.

#### **504.8.1 TELEPHONE CALL PROCEDURES**

The Office will pay the cost of local calls. Long distance calls will be paid by the incarcerated person, by calling collect.

Calls between the incarcerated person and their 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 incarcerated persons make their booking telephone calls and within the custody facility.

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

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

#### **504.8.2 ONGOING TELEPHONE ACCESS**

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

#### **504.9 ABSENTEE BOOKING**

When Correctional Staff are made aware of an outside agency requesting an absentee booking the Jail Operations Correctional Lieutenant and Correctional Captain will be notified. The Undersheriff and Sheriff will be notified by the Correctional Captain or authorized designee of the request.

Outside agencies requesting to book an incarcerated person not physically in custody (e.g. admitted in hospital) must receive permission from the Sheriff or his authorized designee to do so.

#### **504.9.1 ABSENTEE BOOKING PROCEDURES**

If a subject is going to be booked absentee the following procedures will be followed;

- (a) The Correctional Technician will enter information in the automated system provided on the *Pre-Booking Form* by the arresting agency.
- (b) The location of the incarcerated person will be listed in the automated system as "outside location" (e.g. OLHO).
- (c) A *Booking Report* will be generated alerting, in the comments section, that the incarcerated person has not been processed for fingerprints and booking photograph.



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- (d) The Correctional Sergeant shall notify jail medical staff if the incarcerated person is confined in a medical facility.
- (e) If the incarcerated person will be hospitalized in excess of 48 hours, a court order will be obtained in order to maintain custody of the incarcerated person in the hospital (Penal Code 4011.5).
  - (a) The 48 hour time period will begin from time of admission in the hospital.
  - (b) If a *PC 4011.5 Form* for custody is not obtained from the courts, the incarcerated person will be released as "not arraigned" and the arresting agency will be notified.
- (f) It is the responsibility of the Correctional Sergeant to complete the *PC 4011.5 Form* and forward it to Court Services.
  - 1. The Court Services Sergeant or authorized designee will present the presiding judge hearing the case with the *PC4011.5 Form* for approval.
  - 2. Once the judge has signed the form it will be forwarded to the inmate's booking jacket and to the Jail Operations Correctional Lieutenant.
- (g) The booking report will be updated under the following conditions:
  - (a) The incarcerated person is physically received in our facility.
  - (b) Released from custody while still in custody in an outside location.
  - (c) Change in court disposition.

#### **504.10 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.

## Handbook and Orientation

### 506.1 PURPOSE AND SCOPE

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

### 506.2 POLICY

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

#### 506.2.1 INITIAL ORIENTATION

To assist with the inmate's transition into a custody environment, the orientation will include the following topics, supplemented by a more detailed inmate handbook that will be provided to each inmate (15 CCR 1069):

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

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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)
  - (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 Facility Manager 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).

Verbal instructions for initial orientation will be provided to the incarcerated person during the classification process and may be supplemented by the Housing Unit Correctional Deputy.

#### **506.2.2 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.

## Safety Checks

### 508.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a requirement for conducting visual safety checks at least every 30 minutes for all incarcerated persons, and for creating and maintaining a log to document all safety checks.

### 508.2 DEFINITIONS

Unit Innovations Premises System - An automated logging system using handheld devices to record inmate safety checks by scanning sensors throughout the facility.

Unit Premises Device (UPD) - A handheld mobile phone device used to record inmate safety checks.

Unit Premises Sensors (UPS) - Fixed markers mounted throughout the facility that are scanned by UPDs to record inmate safety checks. There are two types of UPS: *Critical* and *Non-critical*.

1. Critical - Shall be scanned on every safety check.
2. Non-critical - Shall be scanned on every safety check when inmates are present in that location. Examples include: MPU, BHU, exercise yards, inmate visiting areas, inmate program rooms.

Workflow - The location where each individual safety check occurred, such as a cell, module, dormitory or unit.

### 508.3 POLICY

It is the policy of the San Luis Obispo County Sheriff's Office that all correctional staff shall conduct safety checks at least every 30 minutes on all inmates, or more frequently as determined by incarcerated persons custody status and/or housing classification.

Safety checks shall be made through direct visual observation. Cameras and monitors may supplement the required visual observation safety checks but they shall not replace the need for direct visual observation. Safety checks will be clearly documented on permanent logs, either in electronic or written form, in accordance with the office Daily Activity Logs and Electronic Safety Check Logs policy (15 CCR 1027.5). Unit Innovations Premises System satisfies the cell check requirements in accordance with policy.

### 508.4 SAFETY CHECKS

The use of the Unit Innovations Premises System shall be used for all safety checks at the jail, Court Services and Honor Farm. The staff shall adhere to the following procedures when conducting safety checks (15 CCR 1027; 15 CCR 1027.5):

- (a) Safety checks shall be conducted at least once every 30 minutes and more frequently if necessary.
- (b) Safety checks shall be conducted on an irregular schedule (staggered) so that incarcerated persons cannot predict when the checks will occur.

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- (c) Safety checks shall be done by personal observation of the correctional deputy and shall be sufficient to determine the safety and well-being of each incarcerated person and security of the facility.
- (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, either written or electronically in the Unit Innovations Premises System, in accordance with the office Daily Activity Logs and Shift Reports Policy.
- (f) Actual times of the checks and notations should be recorded on the daily activity logs or will be recorded automatically through the Unit Innovations Premises System as a UPS is scanned or as entries are recorded..
- (g) Special management incarcerated persons shall be checked more frequently as detailed in the Special Management Incarcerated Persons Policy.
- (h) Staff shall strive to ensure all safety check are conducted at least once every 30 minutes. In cases of emergencies or other valid reasons why a safety check was not completed on time, staff shall create a note within the Unit Premises System as to explain why the safety check was late.
- (i) Prior to scanning a UPS with a UPD, staff will ensure they are logged into the UPD. Staff shall not scan a UPS with a UPD under another staff member's login.
- (j) When more than one staff are assigned to work an area where safety checks are required, all staff assigned to the area, shall work cooperatively as a team to complete safety checks during their shift.
- (k) Staff shall ensure each UPD is charged, when necessary, utilizing the proper charging mechanism, as to ensure there is no interruption to completing safety checks within the guidelines of this policy.
- (l) When completing a safety check staff shall place the UPD in front of the UPS until the UPD records scanning the sensor.
- (m) When a staff member scans a UPS to begin a workflow the staff member shall conduct the entire safety check of the workflow scanned. If for any reason that workflow is not completed entirely by the staff member who scanned the UPS workflow a notation shall be made in the daily activity log. The notation shall indicate the name and ID number of each staff member and what dorm, cell, unit, etc of the workflow each staff member checked.

#### **508.5 UPD DAMAGE OR MALFUNCTION**

If a UPD is damaged or malfunctions, staff from the respective area shall

- Immediately notify the on-duty Correctional Sergeant for a replacement UPD.
- Notate the damage or malfunction in the Daily Activity Log.
- Email the Unit Innovations Premises System Coordinator with the UPD # and describe the damage and/or malfunction.

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- Forward the UPD to the Unit Innovations Premises System Coordinator for repair and/or replacement.
- Record all safety checks in the Daily Activity Log.

#### **508.6 SUPERVISOR RESPONSIBILITIES**

- Supervisors shall periodically audit the Unit Innovations Premises System throughout each shift to monitor for safety check compliance.
- Supervisors shall periodically audit the Unit Innovations Premises System throughout each shift to ensure teamwork is being utilized by staff to complete safety checks.
- Ensure entries are being made in the Daily Activity Log when a UPS is damaged or malfunctions and deactivate the UPS from the Unit Innovations Premises System until it is fixed or replaced.

## Special Management Incarcerated Persons

### 510.1 PURPOSE AND SCOPE

Incarcerated persons who pose a heightened risk to themselves or others require special management, including frequent interaction and increased supervision by staff. Interaction with special management incarcerated persons is essential to maintaining a safe, secure, and humane environment. This policy establishes guidelines and procedures for interacting with special management incarcerated persons in the custody of the San Luis Obispo County Sheriff's Office.

#### 510.1.1 DEFINITIONS

Definitions related to this policy include:

**Administrative separation** - The physical separation of an incarcerated person who has (15 CCR 1053):

- (a) A documented history of activity or behavior, or promoting such activity or behavior, that is criminal in nature, disruptive to facility operations, or affects the safety of the facility, other incarcerated persons, and facility staff.
- (b) Influenced or participated in activity that is criminal in nature or disruptive to facility operations or affects the safety and security of the facility, other incarcerated persons, and facility staff.
- (c) A history of escape or recently attempted escape.
- (d) Committed assault, attempted assault, or participated in a conspiracy to assault or harm other incarcerated persons or facility staff.
- (e) A demonstrated need for protection from other incarcerated persons and facility staff.

This is a non-punitive classification process and must not adversely affect an incarcerated person's health (15 CCR 1053).

**Protective custody separation** - A level of custody either requested or required for an incarcerated person's protection from others.

**Two Deputy/Full Restraint inmate** - A level of custody that requires an incarcerated person to wear a special identification of clothing, have multiple Correctional Deputies for movement and be placed in restraints when out of their housing location.

**Special management incarcerated person** - An incarcerated person who is either classified as administrative separation or protective custody separation. Classification as a special management incarcerated person is a non-punitive classification.

### 510.2 POLICY

This office shall provide for the secure and restrictive housing of any special management incarcerated person but shall not impose more deprivation of privileges than is necessary to obtain the objective of protecting the incarcerated person, staff, or the public (15 CCR 1053).

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#### **510.3 SPECIAL MANAGEMENT INCARCERATED PERSONS HOUSING CRITERIA**

The safety and security of this facility is dependent on a classification system that identifies incarcerated persons who pose a risk to themselves or to others. Incarcerated persons who pose such a risk must be promptly and appropriately separated in order to protect other members of the population until such time that they no longer pose a risk. Staff must have the ability to promptly segregate these incarcerated persons pending further review.

Individuals who may be classified as special management incarcerated persons include but are not limited to incarcerated persons who are:

- In protective custody or court-imposed separation.
- Exhibiting dangerous behaviors.
- An escape threat.
- A serious violence threat.
- Known to have gang affiliation.
- A documented management problem.
- A suicide risk.
- Needs medical isolation or observation.
- At risk of victimization due to physical impairment

#### **510.4 CIRCUMSTANCES REQUIRING IMMEDIATE SEPARATION**

Incarcerated persons will generally be assigned to separation through the classification process. The Facility Manager, Shift Commander or Classification Sergeant has the authority to immediately place any incarcerated person into separation when it reasonably appears necessary to protect the incarcerated person or others (see the Disciplinary Separation Policy) (15 CCR 1081(d)). A Classification Deputy may place an incarcerated person into separation if the Facility Manager, Correctional Lieutenant or Classification Sergeant are not on-duty. The Classification Deputy shall notify the Classification Sergeant or Correctional Lieutenant of the incarcerated person's placement when practicable, but not to exceed 72 hours.

Reasons that an inmate may be placed into immediate separation include the following:

- (a) The incarcerated person requests protection or is under court-ordered protection, or the staff has determined that the incarcerated person requires protection.
- (b) There is reason to believe the incarcerated person poses a danger to him/herself or others.
- (c) The incarcerated person poses an escape risk.
- (d) The incarcerated person requires immediate mental health or medical intervention in housing separated from others..



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- (e) The incarcerated person is charged with a disciplinary infraction and is awaiting a disciplinary hearing. In the judgment of the staff, the incarcerated person may become disruptive or dangerous if left in general population.
- (f) The incarcerated person is in the process of being transferred to a higher security classification.
- (g) Other circumstances where, in the judgment of the staff, the incarcerated person may pose a threat to them, others or the security of the facility.

#### 510.4.1 REVIEW PROCESS

The Facility Manager shall be notified when any incarcerated person is placed into immediate separation and shall be informed of the circumstances leading to the order to separate. Within 72 hours of the incarcerated person being placed into restrictive housing, the Facility Manager or the authorized designee must review the circumstances surrounding the separation to determine which of the following actions shall be taken:

- (a) The incarcerated person is designated for administrative separation.
- (b) The incarcerated person is designated for protective custody.
- (c) The incarcerated person remains separated pending a disciplinary hearing.
- (d) The incarcerated person is returned to general incarcerated person population.

#### 510.5 PROTECTIVE CUSTODY

The deputy responsible for assigning classifications to incoming incarcerated persons shall clearly document the reason an incarcerated person should be placed into protective custody. Incarcerated persons in need of protective custody may be placed in a separation unit when there is documentation that the separation is the least restrictive alternative reasonably available.

Incarcerated persons who are in protective custody shall receive all services and programs that are available to incarcerated persons in general population and that are deemed a privilege. Any deviation from allowing usually authorized items or activities shall be documented on the incarcerated person's file.

#### 510.6 MAINTENANCE OF PROGRAMS AND SERVICES

Administrative separation 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 incarcerated person or staff (15 CCR 1053).

Incarcerated persons who are classified for housing in administrative separation or protective custody shall, at a minimum, be allowed access to programs and services including but not limited to:

- Incarcerated person telephones.
- Visitation.
- Educational programming appropriate to safety considerations.

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- 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 separated incarcerated persons in order to provide for the safety and security of other incarcerated persons and staff.

#### **510.7 REVIEW OF STATUS**

The Classification Sergeant or their designee shall review the status of all incarcerated persons who are housed in separation units and designated for administrative separation. This review shall occur at least once every 30 days after the initial separation review. The review should include information about these incarcerated persons to determine whether their status in administrative separation is still warranted. The review will be documented in the incarcerated persons classification file.

If other reasonable housing options exist that will provide for the safety of the incarcerated person, the incarcerated person should be moved out of separation. In reviewing an alternative housing decision, the safety of the incarcerated person shall receive the utmost consideration.

#### **510.8 HEALTH EVALUATION REQUIREMENTS**

After notification from staff that an incarcerated person is being placed in separation, the Classification Sergeant or their designee shall ensure that the following occurs:

- (a) A qualified health care professional shall review the incarcerated person's health record to determine whether existing medical, dental or mental health needs contraindicate the placement or require special accommodations.
- (b) If contraindications or special accommodations are noted, the qualified health care professional shall inform the Classification Sergeant and coordinate the appropriate plan for the incarcerated person based on the safety needs of the facility and the medical needs of the incarcerated person.

##### **510.8.1 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 incarcerated person's attitude and outlook.

- (a) Unless medical attention is needed more frequently, a qualified health care professional shall conduct weekly rounds at the housing unit for both a medical and mental health evaluation.

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When an incarcerated person is classified as a special management, due to the presence of a serious mental illness and is placed in a separation setting, the Classification Staff shall document this in the incarcerated persons classification file and notify the qualified mental health and health care professional. When an incarcerated person is expected to remain in separation for more than 30 days (based upon disciplinary decisions, protective needs or other factors), the qualified mental health and health care professional should be notified. Additionally, throughout the incarcerated person's separation period, the Behavioral Health Sergeant or their designee shall determine if the incarcerated person is suitable to move to the Kansas Max Housing Unit and participate in the incentive program.

Where reasonably practicable, a qualified mental health care professional should provide screening for suicide risk during the three days following admission to the separation unit.

#### **510.9 SAFETY CHECKS**

A staff member shall conduct a face-to-face safety check of all special management incarcerated persons, including those housed in administrative separation or protective custody, at least every 30 minutes on an irregular schedule.

Incarcerated persons housed in administrative separation will be offered yard or day room time beginning at 0800 hours. Yard and shower time will run consistently from 0800 – 2300 hours, with the exception of lockdown times, which means that incarcerated persons may be out of their cells multiple times throughout the day. If an incarcerated person refuses in the morning, they need to be asked again at a later time. The yards/dayrooms in those areas need to be utilized/occupied from 0800-2300 hours.

Incarcerated persons who are at risk of suicide shall be under continuous observation until seen by a qualified mental health care professional or placed in a safety cell by the on-duty Correctional Sergeant.

Special management incarcerated persons placed in a safety cell shall receive increased monitoring to include, at a minimum:

- (a) A visit by the the on-duty Correctional Sergeant, mental health and medical staff every 4 hours. The retention of placement in the safety cell will be reviewed every 4 hours.

All supervisor, mental health care and health care professional visits shall be documented in the Special Observation Log and retained in accordance with established records retention schedules.

#### **510.10 LOG PROCEDURES**

Handwritten logs should be completed in ink. If corrections or changes are needed they should be done by striking a single line through the content, the content shall still be legible. The Staff member will then cite the modification with both initials and identification number. Electronically captured logs will be maintained in a way that prevents entries from being deleted once they are entered. Corrections or changes must be done by way of supplemental entries. At a minimum the log will contain the following:

- Incarcerated person's name

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- Incarcerated person's identification number
- Housing location
- Date admitted
- Date and time of entry and exit from the cell
- Any special medical or psychiatric problems or needs

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 minimum, supervisors should enter the date and time of each review.

All safety checks shall 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 Correctional Sergeant at the conclusion of each shift. The Correctional Sergeant will review each log and retain them until the end of the month. At the conclusion of each month, the logs shall be forwarded to the Correctional Lieutenant or their designee for final review.

#### 510.10.1 LOG INSPECTION AND ARCHIVE OF LOGS

The Correctional Sergeant shall review and evaluate the logs and pass any significant incidents via the chain of command to the Facility Manager for review.

All documentation will be gathered and provided to the Correctional Sergeant at the conclusion of each shift. The Correctional Sergeant will review each log and retain them electronically in JMS.

## Civil Detainees

### 511.1 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 Incarcerated Persons Discipline Policy.

#### 511.1.1 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.

### 511.2 POLICY

It is the policy of the San Luis Obispo County Sheriff's Office that any restrictions placed on civil detainees must be for legitimate, non-punitive purposes that cannot be reasonably accomplished through less restrictive means.

### 511.3 LESS RESTRICTIVE CONDITIONS

The Facility Manager or the authorized designee is responsible for monitoring the accommodations of civil detainees. The Facility Manager or the authorized designee should, when then the physical plant of the facility allows, institute alternative and less harsh confinement methods for civil detainees, while still maintaining security and effective management of the facility.

### 511.4 SCREENING

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

The Facility Manager 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.

### 511.5 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.

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#### **511.6 CONDITIONS OF CONFINEMENT IN HOUSING**

All civil detainees should be housed separately from other inmates.

##### **511.6.1 ACCESS TO MAIL AND TELEPHONE**

Civil detainees shall have the same access to books, periodicals and magazines as any other general population incarcerated person, 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.

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.

Dependant on the physical layout of the facility and housing constraints, civil detainees may be provided with a minimum of 50 percent additional telephone access than non-sentenced incarcerated persons in the general population receive. Civil detainees may be provided with telephone privacy.

##### **511.6.2 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 an Office mental health professional.
- (b) A review of the reasonable options available to address the civil detainee's continued mental health care. The Office's mental health professional and the Facility Manager 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 as part of the civil detainee's treatment.
  - 2. Providing special access to mental health care professionals or other visitors.
- (c) Depending on the level of discipline, Classification in some instances may make notification to the civil detainee's mental health care provider or mental health staff prior to the decision to discipline the civil detainee.

#### **511.7 SEARCHES**

Strip searches of civil detainees must be justified by probable cause, unless the Facility Manager 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

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detainee has entered an environment where contraband or weapons may be accessed (see the Searches Policy).

Absent an enhanced security concern or reasonable suspicion where contraband may be found, there should be no unscheduled cell searches of a civil detainee's personal effects or a cell search when the civil detainee is not present. Non-invasive cell inspections for security purposes may still be conducted.

## Management of Weapons and Control Devices

### 514.1 PURPOSE AND SCOPE

This policy will address the availability and control of weapons.

### 514.2 POLICY

It is the policy of the San Luis Obispo County Sheriff's Office that the presence and the use of weapons in the jail will be tightly controlled and supervised to reduce the potential for injury. Staff will only carry and use those weapons for which they have been trained in and are qualified to use.

### 514.3 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, incarcerated persons, contractors, volunteers or the public.

Firearms shall only be allowed inside the secure perimeter with the approval of the Facility Manager or authorized designee and under the direct supervision of a supervisor.

### 514.4 OTHER WEAPONS, TOOLS AND CHEMICAL AGENTS

Office-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 office-authorized training and are qualified to use them.

Office-approved weapons, tools and chemical agents shall only be allowed inside the secure perimeter with the approval of the Facility Manager or the authorized designee. Office-approved weapons, tool and chemical agents can be authorized by the Custody Emergency Response Team (CERT) Leader without the authorization of the Facility Manager during an extraction event or major disturbance.

### 514.5 STORAGE OF WEAPONS, CHEMICAL AGENTS AND CONTROL DEVICES

The armory shall be located in a secure and readily accessible repository outside of inmate housing and activity areas. It shall be secured at all times. Access to the armory shall be limited to the Facility Manager, Shift Commander, on-duty Correctional Sergeant or any CERT members. Only personnel who have received office-approved training or maintenance of the stored equipment and who have been designated by the Facility Manager are authorized to be inside the armory.

The following equipment shall be stored and secured in the armory:

- (a) All office-approved weapons



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- (b) All office-approved control devices and associated supplies, with the exception of the TASER device
- (c) All security equipment, such as helmets, face shields, stab or protective vests and handheld shields
- (d) All office-approved chemical agents

Explosive materials will be stored in a safe approved by the Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF) and in compliance with 27 CFR 555.201 et seq.

#### 514.5.1 WEAPONS LOCKER

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

#### 514.5.2 INVENTORY

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

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

The Shift Commander and the Facility Manager 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.

#### 514.5.3 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 for ensuring replacement of outdated or unserviceable items.

## Inmate Classification

### 516.1 PURPOSE AND SCOPE

This policy describes the San Luis Obispo County Sheriff's Office's classification process, which is designed to identify security and health issues so that inmates may be held in such a way as to foster a safe and secure facility (15 CCR 1050).

#### 516.1.1 DEFINITIONS

Definitions related to this policy include:

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

### 516.2 POLICY

It is the policy of this office to process all arrestees and detainees entering this facility to determine whether they will be housed in the facility, cited and released, released on their own recognizance (O.R.) or bail, or released back to the community through an appropriate release mechanism, including alternatives to incarceration programs, such as electronic supervision.

Anyone housed in the facility shall be properly classified according to security and health risks so that appropriate supervision, temporary holding, and housing assignments may be made.

### 516.3 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. (15 CCR 1029(a)(5)).

### 516.4 CLASSIFICATION PLAN

The Facility Manager 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

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- Criminal and incarceration history
- Emotional and mental condition
- Potential risk of safety to others or self
- Special management inmate status
- Special needs assessment for vulnerable inmates
- Behavioral or physical limitations or disabilities and physical/mental health needs
- Medical condition
- Level of sobriety at booking
- Suicidal ideation
- Escape history and degree of escape risk
- Prior assaultive or violent behavior
- The need to be separated from other classifications of inmates (e.g., 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).

#### 516.4.1 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.

#### **516.5 INITIAL CLASSIFICATION**

The initial classification process is intended to identify predatory, violent and at-risk inmates. It should occur early in the intake process to allow for appropriate supervision while an inmate is being temporarily held in this facility and until a decision is made to place the individual into a more permanent housing assignment

Inmates should be interviewed by an intake deputy as soon as possible in the booking process.

#### **516.6 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.

##### **516.6.1 INTERVIEW**

The comprehensive classification process begins with a review of any initial classification information obtained during the reception and booking process, as well as an interview by the classification deputy. The classification deputy will complete the Initial Classification form. Upon completion, a numeric calculated custody score will be used to guide the appropriate housing assignment based on the classification housing plan.

Individualized determinations shall be made about how to ensure the safety of each inmate (28 CFR 115.42; 15 CCR 1050).

##### **516.6.2 OVERRIDE**

The classification deputy has the authority to override the scores when it appears necessary to more appropriately assign housing. The override capability exists to use the classification deputy's training and expertise in those instances when the numerical scores are not reflective of the inmate's potential security or health risk. All overrides will be reviewed by a supervisor and are intended to be an exception, rather than the rule.

#### **516.7 REVIEWS, RECLASSIFICATION AND APPEALS**

Once an inmate is classified and housed, he/she may appeal the decision of the classification deputy, through an inmate request slip. The review of the inmate's appeal will be conducted by the Classification Sergeant. The decision of the Classification Sergeant is final, and may only be modified by the Facility Manager.

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#### 516.7.1 PERIODIC CLASSIFICATION REVIEWS

An initial assessment should be conducted at intake for risk of being sexually abused by other inmates or sexually abusive towards other inmates. Prior to housing an inmate will be reassessed for risk of victimization or abuse. (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).

#### 516.7.2 STAFF REQUESTED REVIEW

At any point during an inmate's incarceration, a staff member may request a review of the inmate's classification. The reason for the review, the review itself and the outcome of the review shall be documented in the inmate's permanent file. Nothing in this section shall prohibit staff from immediately moving an inmate to another location in the facility based on exigent circumstances. Under such circumstances, the staff member moving the inmate must immediately document the action and notify the classification deputy.

#### 516.7.3 OBJECTIVE RECLASSIFICATION TOOL

Inmate custody levels will be assessed using an objective reclassification tool every (60) sixty days. Inmates may also be reclassified using the objective reclassification tool after incidents at the discretion of a classification deputy.

### **516.8 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 or sentenced)
- Special problems or needs
- Behavior
- Any other criteria identified by the Facility Manager or authorized designee

#### 516.8.1 SEPARATION

Civil detainees shall be housed separately from pretrial and sentenced inmates.

### **516.9 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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Facility Manager or the authorized designee should periodically meet with representatives of the classification deputies to discuss the fixed resources (e.g., cells, dorms, dayrooms).

The Facility Manager should report at least quarterly to the Sheriff on the ability of the facility to operate safely and securely and to perform its mission.

#### **516.10 SINGLE-OCCUPANCY CELLS**

Single-occupancy cells may be used to house the following categories of inmates:

- Maximum security
- Administrative separation
- Severe medical disabilities (upon consultation with medical staff and the availability of medical beds)
- 
- Sexual predators
- Any inmate with an elevated risk of being exploited or victimized by others
- Any inmate whose condition or status indicates a special need for single-occupancy housing
- Inmates exhibiting behaviors that jeopardize the safety and security of the facility.

The classification supervisor shall notify the Facility Manager 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.

#### **516.11 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).

#### **516.12 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 Facility Manager 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 being authorized for education, work or other release. This is to minimize the risk of introducing contraband into the jail and to maintain facility security.

#### **516.13 STAFF TRAINING IN CLASSIFICATION**

Classification deputies should receive training specific to inmate classification before being assigned primary classification duties. Individuals not specifically trained in inmate classification may work in classification provided that they are under the immediate supervision of a trained and qualified staff member.

## Conducted Energy Weapon System

### 517.1 PURPOSE AND SCOPE

This policy provides guidelines for the issuance and use of the TASER Conducted Energy Weapon System (CEWS).

### 517.2 POLICY

The TASER CEWS is intended to control a violent or potentially violent inmate, while minimizing the risk of serious injury. It is anticipated that the appropriate use of such a weapon should result in fewer serious injuries to custody staff and inmates.

Staff members who have completed office-approved training may be issued a TASER CEWS for use during the current assignment. Staff members who have been issued a TASER CEWS shall only use the weapon consistent with this policy and the Use of Force Policy.

Staff shall only use the TASER CEWS 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 CEWS shall be maintained in a secure storage location when not being worn by a correctional deputy.
- (b) Each TASER CEWS shall be clearly and uniquely numbered.
- (c) Upon finishing the shift, each member shall turn in the device to the approved secure storage area.
- (d) Members may pass on the weapons to oncoming shift members assigned to the same duty post.
- (e) Whenever practicable, staff should carry two TASER CEWS cartridges on their person at all times when carrying a TASER CEWS.
- (f) Members shall be responsible for ensuring that their issued TASER CEWS is properly maintained and in good working order at all times. Staff carrying a TASER CEWS should perform a spark test on the unit prior to every shift.
- (g) Members shall carry the TASER CEWS on the opposite side of their duty firearm.
- (h) The TASER CEWS should be marked with a distinctive color or marking to distinguish it from firearms or any other weapons.

### 517.3 VERBAL AND VISUAL WARNINGS

A verbal warning of the intended use of the TASER CEWS 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 incarcerated person with a reasonable opportunity to voluntarily comply.
- (b) Provide other staff and incarcerated persons with a warning that the TASER CEWS may be deployed.



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If, after a verbal warning, an incarcerated person 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 CEWS. The aiming laser should never be intentionally directed into the eyes of another as it may permanently impair a person's vision.

The fact that a verbal and/or other warning was given or the reasons it was not given shall be documented by the member deploying the device in the related report.

#### **517.4 USE OF THE CEWS**

As with any correctional equipment, the TASER CEWS has limitations and restrictions requiring consideration before its use. The TASER CEWS should only be used when its operator can safely approach the subject within the operational range of the weapon.

Although the TASER CEWS is generally effective in controlling most individuals, members should be aware that the weapon may not achieve the intended results and be prepared with other options.

##### **517.4.1 APPLICATION OF THE TASER CEWS**

Authorized personnel may use the TASER CEWS when circumstances perceived by the member at the time indicate that such application is reasonably necessary to control an incarcerated person in any of the following circumstances:

- (a) The incarcerated person is violent or is physically resisting.
- (b) The incarcerated person has demonstrated an intention to be violent or to physically resist and reasonably appears to have the potential to harm staff, themselves, or others.
- (c) Mere flight, noncompliance with directives or non violent physical resistance without other known circumstances or factors is not good cause for the use of the TASER CEWS.

##### **517.4.2 SPECIAL DEPLOYMENT CONSIDERATIONS**

The use of the TASER CEWS 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 incarcerated persons.
- (b) Incarcerated persons with obviously low body mass.
- (c) Incarcerated persons who are handcuffed or otherwise restrained.
- (d) Incarcerated persons 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.

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- (e) Incarcerated persons whose position or activity may result in collateral injury (e.g., falls from height).

Because the application of the TASER CEWS in the drive-stun mode (i.e., direct contact without probes) relies primarily on pain compliance, the use of the drive-stun mode generally should be limited to supplementing the probe-mode to complete the circuit, or as a distraction technique to gain separation between staff and the subject, thereby giving staff time and distance to consider force options or actions.

The TASER CEWS shall not be used to torture, psychologically torment, elicit statements from, or punish any incarcerated person.

#### 517.4.3 TARGETING CONSIDERATIONS

Reasonable efforts should be made to target lower center mass and avoid intentionally targeting the head, neck, chest, and groin. If the dynamics of a situation or officer safety do not permit the member to limit the application of the TASER CEWS probes to a precise target area, members should monitor the condition of the incarcerated person if one or more probes strikes the head, neck, chest, or groin until the incarcerated person is evaluated by qualified medical personnel.

#### 517.4.4 MULTIPLE APPLICATIONS OF THE TASER CEWS

Members should apply the TASER CEWS for only one standard cycle and then evaluate the situation before applying any subsequent cycles. Multiple applications of the TASER CEWS 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 CEWS appears to be ineffective in gaining control of an incarcerated person 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 incarcerated person 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 CEWS at a time against a single subject.

#### 517.4.5 DOCUMENTATION

All TASER CEWS discharges shall be documented in the related incident report. Notification shall be made to a supervisor in compliance with the office Use of Force Policy. Supervisors will complete required use of force reports. Unintentional discharges, pointing the device at a person, laser activation and arcing of a TASER CEWS will also be documented. Any report documenting the discharge of a TASER CEWS cartridge will include the cartridge serial number and an explanation of the circumstances surrounding the discharge. Accidental activations of a

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TASER cartridge will be documented on a memorandum via the chain of command to the Custody Operations Lieutenant.

In cases that criminal activity is present, spent cartridges, probes, and one or more AFIDs will be retrieved and collected by a correctional deputy for processing into evidence. Correctional deputies will document who provided the forensic medical services, including removal of TASER CEWS probes.

The onboard TASER CEWS memory will be downloaded through the data port by a supervisor and saved with the related incident report. The Sheriff's Office Use of Force Policy will be followed. Photographs of probe sites should be taken after the incarcerated person is evaluated by a qualified health care professional. The expended cartridge along with both probes and wire should be submitted into evidence for future reference by a member. 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.

The member should include the following in the arrest/crime report:

- (a) Identification of all personnel firing TASER CEWS.
- (b) Identification of all witnesses.
- (c) Serial number of the cartridge.
- (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 Coordinator should also conduct audits of data downloads and reconcile TASER CEWS report forms with recorded activations. TASER CEWS information and statistics, with identifying information removed, should periodically be made available to the public.

#### **517.4.6 PREGNANT INCARCERATED PERSONS**

Application of the TASER CEWS shall not be used on a pregnant incarcerated person (Penal Code § 4023.8).

#### **517.5 MEDICAL TREATMENT**

Absent extenuating circumstances or unavailability, only qualified medical personnel should remove TASER CEWS probes from an incarcerated person's body. Used TASER CEWS probes shall be considered a sharps biohazard, similar to a used hypodermic needle, and handled properly. Universal precautions should be taken accordingly.

All incarcerated persons who have been struck by TASER CEWS probes or who have been subjected to the electric discharge of the device shall be medically assessed prior to continued processing or housing. Any incarcerated person who falls under any of the following categories should, as soon as practicable, be examined by qualified medical personnel:

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- (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 CEWS probes are lodged in a sensitive area (e.g., groin, breast, head, face, 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, or who require a protracted physical encounter with multiple 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 transported by ambulance to a hospital for medical clearance.

Any incarcerated person 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.

#### **517.6 TRAINING**

Personnel who are authorized to carry the TASER CEWS shall be permitted to do so only after successfully completing the initial office-approved training. Any personnel who have not carried a TASER CEWS as a part of their assignment for a period of six months or more shall be recertified by an office-approved TASER CEWS instructor prior to again carrying or using the device.

Proficiency training for personnel who have been issued TASER CEWS should occur every year. A reassessment of a member's knowledge and/or practical skill may be required at any time if deemed appropriate by the Training Coordinator. All training and proficiency for TASER CEWS will be documented in the member's training file.

Command staff and supervisors should receive TASER CEWS training as appropriate for the investigations they conduct and review.

Members who do not carry TASER CEWS should receive training that is sufficient to familiarize them with the device and with working with members who use the device.

The Training Coordinator is responsible for ensuring that all members who carry TASER CEWS have received initial and annual proficiency training. Periodic audits should be used for verification.

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Application of TASER CEWS during training could result in injury to personnel and should not be mandatory for certification.

The Training Coordinator 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 a TASER CEWS and transitioning to other force options.
- (e) Restraint techniques that do not impair respiration following the application of a TASER CEWS.
- (f) De-escalation techniques.

#### 517.6.1 TESTING

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

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## Control of Incarcerated Person Movement

### 519.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process for the safe and secure movement of incarcerated persons between areas within the facility and transportation from the facility to court, medical appointments or other jurisdictions.

### 519.2 POLICY

The staff should be vigilant in the control and movement of incarcerated persons between areas within the facility and when transporting incarcerated persons 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 incarcerated person movement as a high-risk activity. The staff should be aware of their surroundings at all times and take necessary steps to prevent the possession and exchange of contraband.

### 519.3 MOVEMENT OF INCARCERATED PERSONS

Movement of one or more incarcerated persons in the facility should be done in an orderly manner with incarcerated persons walking in a single-file line. The maximum incarcerated person to staff ratio is 5:1 unrestrained and 8:1 when restrained in waist chains and leg irons. Staff members should have situational awareness during the movement of incarcerated persons and should consider the design of the facility, areas of poor visibility and the presence of other incarcerated persons being moved. The staff should avoid areas where incarcerated persons may have access to contraband items.

Incarcerated persons should be restrained during movement based upon individual security classification, with higher risk incarcerated persons in handcuffs, waist chains and leg irons. An exception to this procedure is when an incarcerated person has a physical disability where restraint devices may cause serious injury. Pregnant incarcerated persons shall be moved in accordance with the Use of Restraints Policy.

Whenever a high-security incarcerated person is not able to be restrained, the staff should compensate by utilizing wheelchairs, and should secure the incarcerated person to the chair. It may also be necessary to increase the number of staff present to ensure the safe movement of high-security incarcerated persons.

The staff should be watchful in and around passageways and ensure that sallyport doors are secured to prevent escape.

### 519.4 MOVEMENT OF SPECIAL MANAGEMENT INCARCERATED PERSONS

Incarcerated persons should be restrained during movement based upon individual security classification, with higher risk incarcerated persons in handcuffs, waist chains, and leg irons. An exception to this procedure is when an incarcerated person has a physical disability where restraint devices may cause serious injury. Pregnant incarcerated persons shall be moved in accordance with the Use of Restraints Policy.

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Whenever a high-security incarcerated person is not able to be restrained, the staff should compensate by utilizing wheelchairs and should secure the incarcerated person to the chair. It may also be necessary to increase the number of staff present to ensure the safe movement of high-security incarcerated persons.

The staff should be watchful in and around passageways and ensure that sallyport doors are secured to prevent escape.

## Use of Force

### 521.1 PURPOSE AND SCOPE

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 office is expected to use these guidelines to make such decisions in a professional, impartial, and reasonable manner (Government Code § 7286; 15 CCR 1029(a)(3)).

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

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

#### 521.1.1 DEFINITIONS

Definitions related to this policy include:

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

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

**Force** - The application of physical techniques or tactics, chemical agents, or weapons to another person. It is not a use of force when individuals allow themselves 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 incarcerated person's area in tandem, each with a specific task, to achieve immediate control of the incarcerated person.

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

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

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

#### **521.2.1 FAIR AND UNBIASED USE OF FORCE**

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

#### **521.3 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 incarcerated persons, 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 office. Members may find it more effective or reasonable to improvise their response to rapidly unfolding conditions that they are confronting. In such circumstances, the use of any improvised device or method must nonetheless be objectively reasonable and utilized only to the degree that reasonably appears necessary to accomplish a legitimate government purpose.

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

Force shall never be used as punishment.

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##### 521.3.1 FACTORS USED TO DETERMINE THE REASONABLENESS OF FORCE

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

- (a) The apparent immediacy and severity of the threat to members or others (Penal Code § 835a).
- (b) The conduct of the individual being confronted, as reasonably perceived by the member at the time (Penal Code § 835a).
- (c) Member/individual factors (e.g., age, size, relative strength, skill level, injuries sustained, level of exhaustion or fatigue, the number of members available vs. individuals).
- (d) The conduct of the involved member leading up to the use of force (Penal Code § 835a).
- (e) The effects of suspected drug or alcohol use.
- (f) The individual's apparent mental state or capacity (Penal Code § 835a).
- (g) The individual's apparent ability to understand and comply with deputy commands (Penal Code § 835a).
- (h) The proximity of weapons or dangerous improvised devices.
- (i) The degree to which the individual has been effectively restrained and the individual's 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, incarcerated persons, 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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##### 521.3.2 USE OF KICKS AND PUNCHES

Deputies shall be instructed in a variety of self-defense techniques. The trained and approved use of punching and kicking techniques shall only be used in self-defense. For purposes of this policy, self-defense includes the defense of others.

Deputies shall be instructed in a variety of self-defense techniques. The trained and approved use of punching and kicking techniques shall only be used in self-defense. For purposes of this policy, self-defense includes the defense of others.

##### 521.3.3 PAIN COMPLIANCE TECHNIQUES

Pain compliance techniques may be effective in controlling a physically or actively resisting individual. Deputies may only apply those pain compliance techniques for which they have successfully completed department-approved training. Deputies 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 person can comply with the direction or orders of the deputy.
- (c) Whether the person has been given sufficient opportunity to comply. The application of any pain compliance technique shall be discontinued once the deputy determines that compliance has been achieved.

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

##### 521.3.4 CAROTID CONTROL HOLD

On September 30, 2020 Governor Gavin Newsom signed Assembly Bill 1196 which prohibits a law enforcement agency from authorizing the use of the Carotid Control Hold.

The Sheriff's Office does not authorize the use of the Carotid Control Hold by any correctional deputy employed by this agency (Government Code § 7286.5 (a)).

Government Code § 7286.5 (a) A law enforcement agency shall not authorize the use of a carotid restraint or choke hold by any peace officer employed by that agency.

Government Code § 7286.5 (b) As used in this section, the following terms are defined as follows:

- (1) "Carotid restraint" means a vascular neck restraint or any similar restraint, hold, or otherwise 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.
- (2) "choke hold" means any defensive tactic or force option in which direct pressure is applied to a person's trachea or windpipe.
- (3) "Law enforcement agency" means any agency, department, or other entity of the state or any political subdivision thereof, that employs any peace officer described in Chapter 4.5 (commencing with Section 830) of Title 3 of Part 2 of the Penal Code.

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##### 521.3.5 DUTY TO INTERCEDE

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

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

##### 521.3.6 ALTERNATIVE TACTICS - DE-ESCALATION

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

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

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

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

##### 521.3.7 DUTY TO REPORT EXCESSIVE FORCE

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

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

##### 521.3.8 USE OF FORCE TO SEIZE EVIDENCE

In general, members may use reasonable force to lawfully seize evidence and to prevent the destruction of evidence. However, members are discouraged from using force solely to prevent a person from swallowing evidence or contraband. In the instance when force is used, members should not intentionally use any technique that restricts blood flow to the head, restricts respiration, or creates a reasonable likelihood that blood flow to the head or respiration would be restricted.

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Members are encouraged to use techniques and methods taught by the San Luis Obispo County Sheriff's Office for this specific purpose.

#### 521.3.9 MEDICAL CONSIDERATION

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

#### 521.3.10 FAILURE TO INTERCEDE

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

#### 521.3.11 NOTIFICATION TO SUPERVISORS REGARDING USE OF FORCE

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

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

#### 521.3.12 ADDITIONAL RESTRICTIONS

Terms such as "positional asphyxia," and "restraint asphyxia" 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 deputy's use of reasonable control methods when attempting to restrain a combative individual, deputies are not authorized to use any restraint or transportation method which might unreasonably impair an individual's breathing or respiratory capacity for a period beyond the point when the individual has been adequately and safely controlled. Once controlled, the individual should be placed into a recovery position (e.g., supine or seated) and monitored for signs of medical distress (Government Code § 7286.5).

### **521.4 USE OF OTHER WEAPONS, TOOLS, AND CHEMICAL AGENTS ON INCARCERATED PERSONS**

#### 521.4.1 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 or CERT Team Leader and only by members who have been trained in and are qualified for the use of the devices.

#### 521.4.2 ELECTRONIC CONTROL DEVICES

The use of the TASER® device shall be in accordance with the office'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 office's Electronic Restraints Policy.

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##### 521.4.3 CHEMICAL AGENTS - OLEORESIN CAPSICUM (OC)

OC is available for use by all trained Custody Staff. OC can be used to reduce the physical force needed to effectively control combative or violent incarcerated persons and to minimize or prevent physical injuries to Custody Staff and incarcerated persons. OC should not be used as a replacement for de-escalation techniques.

OC spray shall be worn by all authorized uniformed personnel in its approved holster on the equipment or duty belt. All authorized personnel shall complete the required office training course prior to possessing and using OC spray.

Staff members shall only carry Defense Technology OC Stream consistent with this Chemical Agents section of the Use of Force Policy and Operation Directive U1.

OC spray should not be used in the medical unit or other designated areas where individuals are assigned to respiratory isolation or on any individual who is under control with or without restraints.

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

- (a) Health-trained custody member advising the incarcerated person how to decontaminate in the cell.
- (b) Clean clothing if the incarcerated person's clothing was contaminated.
- (c) Monitoring of the in-cell individual at least every 15 minutes on an irregular schedule, for a period of not less than 45 minutes, by health-trained custody member.

##### 521.4.4 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 incarcerated person 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 office-authorized training in their use.
- (b) Members encountering a situation that requires the use of the pepper projectile system shall notify a supervisor as soon as practicable. The supervisor shall respond to all such deployments. The supervisor shall ensure that all notifications and reports are completed as required by this policy.

Each deployment of a pepper projectile system shall be documented and, if reasonably practicable, recorded on video. This includes situations where the launcher was directed toward

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the incarcerated person, regardless of whether the launcher was used. Only non-incident deployments are exempt from the reporting requirement (e.g., training, product demonstrations).

#### 521.4.5 IMPACT WEAPONS

The need to immediately incapacitate the incarcerated person 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 incarcerated person may cause serious bodily injury or death to the member or others.

#### 521.4.6 CHEMICAL AGENTS AND PREGNANT INCARCERATED PERSONS

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

#### **521.5 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 incarcerated person from inflicting self-injury or to stop an assault on any other person, including other incarcerated persons. The destruction of government property may require the immediate use of force by a 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 incarcerated person's presence or conduct poses a threat to safety or security and the incarcerated person 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 Facility Manager or the authorized designee for approval and consultation prior to any calculated use of force action.

#### 521.5.1 CONFRONTATION AVOIDANCE PROCEDURES

Prior to any calculated use of force, the supervisor shall confer with the appropriate persons to gather pertinent information about the individual and the immediate situation. Based on the supervisor's assessment of the available information, the supervisor should direct staff to attempt to obtain the individual'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 Staff
- (b) Medical Staff

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- (c) Jail Ministry
- (d) 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 incarcerated person's medical/mental history (e.g., asthma or other breathing-related illness, hypoglycemia, diabetes), recent incident reports or situations that may be contributing to the individual's present condition (e.g., pending criminal prosecution or sentencing, recent death of a loved one, divorce). The assessment should include discussions with staff members who are familiar with the individual's background or present status. This may provide insight into the cause of the individual's immediate agitation. It also may identify other members who have a rapport with the incarcerated person 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 individual are deemed inappropriate or ineffective, then the force team technique should be used to control the individual and to apply restraints, if required.

Consideration should also be given to preventing exposure to communicable diseases in calculated use of force situations and to ensure that medical services personnel are available.

#### **521.6 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



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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 designated Lieutenant 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 designated Lieutenant and Facility Manager 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.

#### 521.6.1 NOTIFICATION TO SUPERVISORS

Supervisory notification shall be made as soon as practicable following the application of force in any of the following circumstances:

- (a) The application caused a visible injury.
- (b) The application would lead a reasonable correctional deputy to conclude that the individual may have experienced more than momentary discomfort.
- (c) The individual subjected to the force complained of injury or continuing pain.
- (d) The individual indicates intent to pursue litigation.
- (e) Any application of an TASER device or control device.
- (f) Any application of a restraint device other than handcuffs, shackles or belly chains.
- (g) The individual subjected to the force was rendered unconscious.
- (h) An individual was struck or kicked.
- (i) An individual alleges any of the above has occurred.
- (j) An application of the WRAP restraint device.

#### 521.6.2 USE OF FORCE INVOLVING GREAT BODILY INJURY OR ACTIONS CAUSING SIGNIFICANT LIABILITY

If the employee's use of force caused great bodily injury (GBI) or if their actions caused significant liability, the watch commander shall notify the Professional Standards Unit commander. The Professional Standards Unit commander shall determine if the incident qualifies as a GBI or a significant liability case. If the incident qualifies as such, the Professional Standards Unit commander shall conduct the administrative investigation.

Great bodily injury (GBI) means significant or substantial physical injury. In most cases, the subject would require continued hospitalization due to the injury. An example of a situation of significant liability could include a vehicle pursuit resulting in major injuries or death.

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Upon assuming an investigation, the Professional Standards Unit commander may use other supervisors, detectives or non-involved deputies to assist in the investigation such as interviewing and canvassing for witnesses.

Absent an allegation of misconduct, the interrogation of the involved employee shall be considered the normal course of duty. However, since the involved employee in a GBI or significant liability case shall have their statement recorded, the involved employee will be afforded all subject rights provided under the Public Safety Officers Procedural Bill of Rights Act. This includes the right to be represented by a representative of their choice.

#### 521.6.3 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.

#### **521.7 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 Use of Force Report 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.

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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, including the Medical Use of Force Examination Form
- (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.

#### **521.8 USE OF DEADLY FORCE**

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

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

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

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

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

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An "imminent" threat of death or serious bodily injury exists when, based on the totality of the circumstances, a reasonable deputy in the same situation would believe that an incarcerated person has the present ability, opportunity, and apparent intent to immediately cause death or serious bodily injury to the deputy or another person. A deputy's subjective fear of future harm alone is insufficient as an imminent threat. An imminent threat is one that from appearances is reasonably believed to require instant attention (Penal Code § 835a).

#### **521.9 USE OF FORCE REVIEW**

The Correctional Sergeant shall review all related reports of use of force incidents occurring on his/her command. If an inmate is placed in the WRAP, the Correctional Sergeant shall insure a WRAP Placement form is completed. When completing this form the Correctional Sergeant will determine if the WRAP placement involved a use of force or if it is a placement notification only. If the placement results in a use of force, the Correctional Sergeant shall complete a Use of Force Report. In either case the Correctional Sergeant shall forward the completed documents to the Sheriff via chain of command. The review is to determine whether the use of force was in compliance with policy, procedure and applicable law, and to determine if follow-up action or investigation is necessary. If follow-up action is needed, the Correctional Sergeant shall ensure a review packet containing a copy of all pertinent reports and materials is prepared and forwarded to the Professional Standards Unit. All Use of Force forms, video footage, inmate(s) interviews, pertinent Jail Incident Reports, and Medical Evaluation forms shall be forwarded to the Sheriff via chain of command for further review.

#### **521.10 TRAINING**

The Facility Manager shall work with the Training Coordinator 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 persons with a behavioral crisis identification
  - 4. Application of restraints
- (e) Forced cell extraction techniques
- (f) Force team techniques
- (g) General restraint training (soft and hard restraints)
- (h) Reporting procedures

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- (i) Guidelines regarding vulnerable populations, including but not limited to incarcerated persons who are elderly or pregnant, and incarcerated persons 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

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

#### 521.10.1 TRAINING FOR CONTROL DEVICES

The Training Coordinator 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.

#### **521.11 SPECIAL CONSIDERATIONS WITH USE OF FORCE AND SERIOUSLY MENTALLY ILL OR SELF HARMING INDIVIDUALS**

Jail Mental Health can classify an individual as seriously mentally ill (SMI), when appropriate. When faced with a potential use of force situation involving a SMI individual, correctional deputies should attempt to use their Crisis Intervention Training (CIT), to gain voluntary compliance. If CIT is unsuccessful, if practicable, and safe to do so, a Mental Health member should be called to the scene both to consult with correctional deputies and attempt to talk the individual into compliance. If the individual is the subject of an incentive-based behavior plan, the Mental Health member should attempt to follow the plan. When appropriate, Mental Health members may recommend giving the SMI individual time to calm down and become less agitated. If the SMI individual is secured in a cell, nonessential members should withdraw from the immediate scene if safe to do so.

A self-harming individual who is actively trying to cause harm to their self, can cause serious and permanent harm at any moment to themselves, custody members or other individuals. In those situations, custody members are authorized to use force immediately after an initial attempt to gain voluntary compliance fails.

Custody members should not make immediate entry into a cell or housing unit if an individual has a weapon, until safe to do so. Custody members shall radio for the on-duty Correctional Sergeant

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to come to their location and give a description of what is occurring. The on-duty Correctional Sergeant will determine the safest course of action.

#### **521.12 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)).

#### **521.13 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)).

#### **521.14 POLICY AVAILABILITY**

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

#### **521.15 PUBLIC RECORDS REQUESTS**

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

## Custody Transportation Shotguns

### 522.1 PURPOSE AND SCOPE

It is the purpose of this policy to establish guidelines for the storage, inspection and use of Sheriff's Office Custody Transportation shotguns.

### 522.2 STORAGE AND REMOVAL

Correctional deputies (CD) will adhere to the following guidelines when removing and storing shotguns for transportation details:

- Correctional deputies shall inspect vans prior to checking out a shotgun. The van will be brought out to the front APS and secured.
- Shotguns will be stored in the armory inside APS control when not assigned to a correctional deputy and van.
- Shotguns will only be checked out by a correctional deputy.
- Check out information will include the shotgun number, correctional deputy name, body number, date and time checked out and what van the shotgun will be assigned to.
- No shotgun shall be left inside a van that is parked at the Honor Farm.
- Shotguns will be checked back into the armory in APS control at the completion of the shift.

### 522.3 INSPECTION AND DOWNLOADING

Sheriff's Office Custody Transportation shotguns shall be inspected for service by completing the following actions:

- At the beginning of their shift, correctional deputies shall inspect the shotgun for serviceability. Any equipment failures or malfunctions of the shotgun shall be reported to the supervisor immediately. The shotgun shall be removed from service and turned over to the Sheriff's Office Senior Rangemaster or authorized designee for repair or replacement.
- Shotguns will be removed from the rack in the armory, inspected for service and ensured that the chamber and feeding tube are empty.
- The correctional deputy will perform a B.E.E.F.S. check as follows:
  - Barrel - is it clean and free of obstructions?
  - Ejector - inspect for tension.
  - Extractor - inspect to ensure it is not broken and there is spring tension.
  - Firing pin - can you see it inside the bolt?
  - Safety - does it move freely and prevent trigger from movement?
- Set the shotgun at *Cruiser ready* as follows:
  - The slide on the shotgun will be closed and then reopened.

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- The chamber shall be physically and visually inspected again to ensure the chamber is empty.
- The slide will be closed and the correctional deputy shall place the shotgun barrel into the *Slugmaster Clearing Station* and depress the trigger, releasing the hammer.
- The safety will be pressed on.
- The correctional deputy will load the shotgun magazine to capacity with *Winchester PDX1* segmented rifled slug rounds.
- The correctional deputy will ensure the sling is set up for them and has a good fit.
- Once loaded and the armory is secured, the shotgun shall be carried out to the custody van in front of APS at port arms.
- Shotguns will be stored in Sheriff's vehicles with an empty chamber, with the action closed, the hammer released, the safety on and the full amount of shells it has been designated to carry.
- It shall be the responsibility of the Sheriff's Office personnel going off-duty to remove the shotgun from the vehicle and unload it in a proper manner.
- Shotguns will be properly downloaded inside the armory by the actuating the shell stop and removing rounds from the magazine.
- If a round is in the chamber, the shotgun barrel will be placed inside the *Slugmaster Clearing Station* and the action opened to eject the round. If another shell is released into the spoon, the shotgun will be tilted to the side to remove the shell. Correctional deputies will finish unloading the shotgun by actuating the shell stop and removing rounds from the magazine and place the empty shotgun into the rack inside the armory with the action open.

The correctional deputy that closes Station 26 will ensure that all shotguns have been checked back in when they arrive at the Honor Farm. If the shotgun cannot be located, the on-duty Correctional Sergeant will be notified immediately. Shotguns shall be inspected weekly for serviceability and cleaned as needed by the correctional deputy assigned to weapon maintenance.

#### **522.4 DEPLOYMENT OF SHOTGUNS**

Shotguns shall not be removed from the rack or displayed in public unless there exists an apparent need for additional firepower at the scene of an incident or as directed to do so by a supervisor or authorized officer. Shotguns shall be used in accordance with this Office's Use of Force policy.

#### **522.5 TRAINING**

Shotguns are only to be used and handled by staff members that have successfully completed this Office's 16 hour shotgun class. Correctional deputies should receive four hours of shotgun perishable skills training at least once a year. Shotguns will be taken to range qualification once a year during the appropriate qualification. It is the responsibility of the Correctional Sergeant assigned to Court Services to ensure each shotgun is taken during the course of qualification to ensure function and zero.



## Use of Restraints

### 523.1 PURPOSE AND SCOPE

This policy establishes guidelines for the application, supervisory oversight and restrictions on the use of restraints on persons incarcerated in this facility.

This policy shall apply to the use of specific types of restraints, such as the WRAP, as well as all other restraints, including handcuffs, waist chains and leg irons when such restraints are used to restrain any incarcerated person for prolonged periods.

#### 523.1.1 DEFINITIONS

Definitions related to this policy include:

**Security restraints** - Handcuffs and leg restraints used in normal movement and transfer of incarcerated persons for security reasons and differentiated for restraints.

**Restraints** - Includes the WRAP which is a polyurethane soft restraint system that is applied to control ambulation of an incarcerated person who is assaultive, engaging in self-injurious behavior or attempting to damage property

**Protective hood** - A hood made of nylon webbing with a Velcro closure and a fluid-resistant barrier over the mouth.

**The Cart®** - A mobile device that provides safe and secure transport for incarcerated persons restrained in the WRAP or in Security Restraints.

### 523.2 POLICY

It is the policy of this office that restraints shall be used only to prevent self-injury, injury to others, property damage or the facility to ensure public safety.

Restraints shall never be used for retaliation or as punishment. Restraints shall not be utilized any longer than is reasonably necessary to control the incarcerated person. Restraints are to be applied only when less restrictive methods, including verbal de-escalation techniques, have been attempted and are deemed ineffective in controlling the dangerous behavior of an incarcerated person (15 CCR 1029(a)(4)); 15 CCR 1058). Each incident where restraints are used shall be documented.

### 523.3 USE OF RESTRAINTS - CONTROL

Supervisors shall proactively oversee the use of restraints on any incarcerated person. Whenever feasible the use of restraints, shall require the approval of the On-Duty Correctional Sergeant prior to application. In instances where prior approval is not feasible, the On-Duty Correctional Sergeant shall be apprised of the use of restraints as soon as practicable.

For non-compliant inmates requiring involuntary administration of psychotropic medication while in the WRAP device, refer to policy section 734, Involuntary Administration of Psychotropic Medication. Restraints shall not be applied for more time than is reasonably necessary to achieve

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the above goals. An incarcerated person placed in the WRAP may be transported via the Cart with the approval of the On-Duty Correctional Sergeant. The incarcerated person shall only be in the Cart for transporting purposes, as this is not a restraint device. The Cart may be used to transport restrained incarcerated persons, with permission from the on-duty Correctional Sergeant.

The WRAP is restricted to max term of two (2) hours, placing an incarcerated person in restraints beyond two hours requires approval from the Sheriff via chain of command in conjunction with Medical and Mental Health Managers . If approval is given to continue to keep the incarcerated person in restraints beyond two hours, Medical and Mental Health shall make the determination to do one of the following: admit the incarcerated person to the Psychiatric Health Facility (PHF) per WI5150 or PC4011.6, have the incarcerated person taken to the hospital or administer involuntary medication. A qualified health care professional shall be called to observe the application of the restraints, when feasible prior to the application or as soon as practicable after the application, and to check the incarcerated person for adequate circulation.

The use of restraints on an incarcerated person shall be documented on appropriate logs and shall be video recorded unless exigent circumstances prevent staff from doing so. The documentation shall include, at a minimum, the type of restraint used, when it was applied, a detailed description of why the restraint was needed, the name of the person authorizing placement, names of staff involved in the placement, any injuries sustained, duration it was used and when it was removed (15 CCR 1058).

Security restraints as defined above, handcuff, waist/leg restraints, used for transportation/transfer, do not require approval or documentation, only the WRAP restraint device.

The following provisions shall be followed when utilizing restraints to control an incarcerated person(15 CCR 1058):

- (a) Restraints shall not be used as punishment, placed around a person's neck or applied in a way that is likely to cause undue physical discomfort or restrict blood flow or breathing (e.g., hog-tying).
- (b) Restrained incarcerated persons shall not be placed face down for an extended amount of time. Once the incarcerated person has been restrained they should be placed in a seated position when safe to do so..
- (c) Incarcerated persons in restraints shall be housed either alone or in an area designated for restrained incarcerated persons.
- (d) Restraints shall be applied for no longer than is reasonably necessary to protect the incarcerated person or others from harm.
- (e) Staff members shall conduct direct face-to-face observation at least every 15 minutes on an irregular schedule to check the incarcerated person's physical well-being and behavior. Restraints shall be checked to verify correct application and to ensure they do not compromise circulation. All checks shall be documented, with the actual time recorded by the person doing the observation, along with a description of the incarcerated person's behavior. Any actions taken should also be noted in the special observation log.

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- (f) The specific reasons for the continued need for restraints shall be reviewed, documented and approved by the on-duty Sergeant and Medical Staff every hour.
- (g) Continuous direct visual observation shall be maintained until a medical opinion can be obtained.
- (h) As soon as possible, but within one hour of placement in restraints, the incarcerated person shall be medically assessed to determine whether he/she has a serious medical condition that is being masked by the aggressive behavior and provide an opinion regarding the placements and retention of the restraints. The medical assessment shall be a face-to-face evaluation by a qualified health care professional and shall recur every one hours of continued restraint thereafter, which includes checking the incarcerated person's vital signs.
- (i) As soon as possible, but within one hour of placement in restraints, the incarcerated person must be evaluated by a mental health professional to assess whether the incarcerated person needs immediate and/or long-term mental health treatment. If mental health staff is not on site, the on-call provider will be called.
- (j) Incarcerated persons are placed in or released from restraint devices with the approval of the On-Duty Correctional Sergeant or designee in conjunction with Medical and Mental Health Staff.
- (k) Medical Staff may request an incarcerated person be removed from restraints if they determine it is not safe to remain in restraints; this medical evaluation as to whether the inmate shall remain in restraints shall take precedence over the custodial evaluation.
- (l) Where applicable, the Facility Manager shall use the restraint device manufacturer's recommended maximum time limits for placement, but in no case more than two (2) without Sheriff approval.

#### 523.3.1 COURT APPROVAL

Prior judicial approval should be obtained for the use of restraints when the incarcerated person is in court if the restraints will be visible to a jury.

#### **523.4 USE OF PROTECTIVE HOOD**

A protective hood may be used to conceal an incarcerated person's identity or to control aggressive behavior posing a threat of spitting or biting. Protective hoods will be disposed of after every use and in accordance with the *Hazardous Waste and Sewage Disposal Policy*. The following guidelines shall be followed when applying the protective hood:

- (a) The Correctional Sergeant will immediately be notified;
- (b) The hood will be applied loose enough to allow the inmate to breath and swallow normally, but secure enough to prevent the incarcerated person from easily pulling the hood off;
- (c) An incarcerated person placed in a protective hood shall remain under direct observation until the hood is removed.
- (d) A 15-minute Special Observation Log shall be started.

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- (e) Every effort will be made to remove the protective hood prior to staff exiting the cell. If the On-Duty Correctional Sergeant identifies an exigent circumstance in which it is necessary to leave the hood secured the following will be adhered to:
  - 1. A notation will be made on the Special Observation Log documenting the circumstances,
  - 2. The incarcerated person will remain under direct observation
  - 3. Medical Staff will be summonsed to examine the incarcerated person and will insure the inmate is breathing and responding to verbal or tactile stimulation.
  - 4. Log entries will be made at least every fifteen (15) minutes.
- (f) The Correctional Sergeant will review and evaluate continued use of the protective hood at least every half hour;
- (g) The hood will not be worn for a period of time exceeding two hours.
- (h) A **Report in ATIMS** will be written detailing the reason for use and it will be noted in the Correctional Sergeants' Post Log.

Incarcerated persons may request the use of a protective hood to conceal their identity. The use of restraints is not required in this situation.

#### **523.5 RANGE OF MOTION**

Incarcerated persons placed in restraints for longer than two hours should receive a range-of-motion procedure that will allow for the movement of the extremities. Range-of-motion exercise will consist of alternate movement of the extremities (i.e., right arm and left leg) for a minimum of 10 minutes every two hours.

#### **523.6 FOOD, HYDRATION, AND SANITATION**

Incarcerated persons who are confined in restraints shall be given food and fluids. Provisions shall be made to accommodate any toileting needs at least once every two hours. Food shall be provided during normal meal periods. Hydration (water or juices) will be provided no less than once every two hours or when requested by the incarcerated person.

Offering food and hydration to incarcerated persons will be documented to include the time, the name of the person offering the food or water/juices, and the incarcerated person's response (receptive, rejected). Incarcerated persons shall be provided the opportunity to clean themselves or their clothing while they are in restraints.

#### **523.7 AVAILABILITY OF CARDIOPULMONARY RESUSCITATION EQUIPMENT**

Cardiopulmonary resuscitation (CPR) equipment, such as barrier masks, shall be provided by the facility and located in proximity to the location where incarcerated persons in restraints are held.

#### **523.8 RESTRAINED INCARCERATED PERSON HOLDING**

Restrained incarcerated persons should be protected from abuse by other incarcerated persons. Under no circumstances will restrained incarcerated persons be housed with incarcerated persons

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who are not in restraints. In most instances, restrained incarcerated persons are housed alone or in an area designated for restrained persons (15 CCR 1058).

#### **523.9 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.

Incarcerated persons who are known to be pregnant will not be handcuffed behind their backs or placed in waist restraints or leg irons. (Penal Code § 3407; 15 CCR 1058.5).

##### **523.9.1 INCARCERATED PERSONS IN LABOR**

No incarcerated person who is in labor, delivery, or recovery from a birth shall be restrained by the use of leg restraints/irons, waist restraints/chains, or handcuffs behind the body (Penal Code § 3407; 15 CCR 1058.5).

No incarcerated person who is in labor, delivering, or recovering from a birth shall be otherwise restrained except when all of the following exist (Penal Code § 3407; 15 CCR 1058.5):

- (a) There is a substantial flight risk or some other extraordinary medical or security circumstance that dictates restraints be used to ensure the safety and security of the incarcerated person, the staff of this or the medical facility, other incarcerated persons, or the public.
- (b) A supervisor has made an individualized determination that such restraints are necessary to prevent escape or injury.
- (c) There is no objection from the treating medical care provider.
- (d) The restraints used are the least restrictive type and are used in the least restrictive manner.

Restraints shall be removed when medical staff responsible for the medical care of the pregnant incarcerated person determines that the removal of restraints is medically necessary (Penal Code § 3407).

The supervisor should, within 10 days, make written findings specifically describing the type of restraints used, the justification, and the underlying extraordinary circumstances.

##### **523.9.2 INCARCERATED PERSONS IN RECOVERY AFTER TERMINATED PREGNANCY**

Incarcerated persons recovering from a termination of pregnancy shall not be restrained using leg restraints/irons, waist restraints/chains, or handcuffs behind the body unless an exception identified in the Incarcerated Persons in Labor subsection of this policy applies (15 CCR 1058.5).

Restraints shall be removed when medical staff responsible for the medical care of the incarcerated person determines that the removal of restraints is medically necessary (15 CCR 1058.5).

## Body Worn Camera (BWC)

### 524.1 POLICY

The San Luis Obispo County Sheriff's Office recognizes that video and audio recording of contacts between department personnel, the public and inmates provides a video record of contacts that can enhance criminal prosecutions and limit civil liability. The audio/video recording of any event or contact allows a review of events and of a Correctional Sergeant's and deputy's actions that may be used in resolving complaints against law enforcement and in assessing the effectiveness of the training and equipment provided to supervisors and deputies by the Sheriff's Office.

While recordings obtained from video recorders provide a record of events, it is understood that video recordings do not necessarily reflect the experience or state of mind of the individual member involved in each incident. Moreover, the recordings, especially video, have limitations and may depict events differently than the events recalled by the involved member. Specifically, video recording devices have a limited field of vision and may not capture all of the events or information that a member may use in their decision-making process.

All video recordings made while working as an employee of the San Luis Obispo County Sheriff's Office in any capacity are property of the Department and subject to review by the Department and its agents. Personally owned video recording devices are prohibited for use in an official capacity.

### 524.2 PURPOSE AND SCOPE

This policy establishes guidelines for Sheriff's Office deputies using body worn cameras (BWC) and the preservation of related digital evidence.

### 524.3 OPERATING PROCEDURES

Correctional Sergeants in the Custody Division who have been issued a body worn camera as part of their duty assignment shall wear the BWC while on duty. Cameras will be worn on the Correctional Sergeant's person in a conspicuous forward facing position that facilitates awareness of its presence and comprehensive recording of the contact and/or incident. Correctional Sergeants should check the position of the camera mount as needed during each shift to ensure the camera position is maintained to facilitate optimum recording.

Correctional Sergeants will inspect the BWC system for any physical damage and to ensure the device is in working order at the beginning of their shift. Any malfunctions, missing equipment or damage shall be immediately reported to their Correctional Lieutenant.

### 524.4 GUIDELINES FOR CAMERA ACTIVATION

Correctional Sergeants will activate their BWC while on duty as soon as practicable to record actions, investigative contacts, or critical incidents. Because critical incidents can unfold rapidly a Correctional Sergeant may delay in activating their BWC if it would jeopardize their safety, the safety of other deputies or of the public and inmates. Correctional Sergeants will record contacts with citizens or incarcerated persons in the following instances:

- (a) All calls in the facility that require a Correctional Sergeant to respond

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- (b) Confrontational interactions with incarcerated persons or the public
- (c) Cell Extractions
- (d) Any use of force or interview of investigation
- (e) WRAP Placements
- (f) Any contact that the Correctional Sergeant deems may result in civil litigation
- (g) Man-down calls or critical incidents
- (h) Safety Cell placements
- (i) Involuntary or emergency medication administration
- (j) PREA Investigation
- (k) Interviews with inmates that were involved in a traffic collision inside a custody vehicle
- (l) When responding to arrestees that are restrained in a WRAP, spit hood, hobble or any time an arresting agency requests assistance upon arrival
- (m) ADA interview or transgender interview

When a Correctional Sergeant is responding to a call within the facility, the Correctional Sergeant shall activate their camera upon responding. When a Correctional Sergeant is unable to activate their camera at the beginning of an event or contact, they shall document the reason for the delay in activating their camera in the Correctional Sergeant's log.

Correctional Sergeants may use discretion when deciding whether to advise a citizen or incarcerated person they are being recorded. Generally, Correctional Sergeants should not cease recording solely based on the request or demand of a citizen or incarcerated person.

#### **524.5 GUIDELINES FOR CAMERA DEACTIVATION**

Once the BWC is activated, recording will continue until the event has concluded. If the Correctional Sergeant deactivates the BWC prior to the conclusion of an event, the Correctional Sergeant will announce on camera the reason for deactivation. The following are exceptions for camera deactivation prior to the conclusion of the event:

- (a) The incident has concluded prior to the Correctional Sergeants arrival.
- (b) The Correctional Sergeant determines the recording must be stopped, either temporarily or for the duration of the event, based on clearly articulable reasons which must be documented in the Correctional Sergeant's incident report or Correctional Sergeant's log.
- (c) While conferring with other staff members regarding the specifics of the incident.
- (d) While discussing tactical planning (Cell Extraction) or operational information.
- (e) Any exception otherwise noted in this policy.

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#### **524.6 VICTIMS, WITNESSES AND INMATES**

Correctional Sergeants should record interviews of crime victims, witnesses and incarcerated persons. Correctional Sergeants have no obligation to advise a victim, witness or incarcerated person that they are being recorded but may do so at their discretion.

However, when a victim, witness or incarcerated person requests they not be recorded, Correctional Sergeants may consider their request based on the sensitivity of the crime or incident, the emotional or physical state of the victim/witness/incarcerated person, or other articulable circumstances which will be clearly documented by the Correctional Sergeant in their incident report or Correctional Sergeant's log. In cases where a victim, witness or incarcerated person requests they not be recorded, and the Correctional Sergeant agrees they shall record the victim/witnesses/incarcerated person's request prior to turning the camera off. Correctional Sergeants may offer to avert their camera to capture only audio during the interview, when doing so would facilitate obtaining the victim's/witnesses/incarcerated person's recorded statement.

#### **524.7 PROHIBITED RECORDINGS**

BWC's shall not be used to record non#official personal activity. BWC's will not be activated in places where a reasonable expectation of privacy exists, such as workplace locker rooms, dressing rooms, or restrooms. No type of recording device may be intentionally activated to record the conversations of fellow employees or superiors without their knowledge. In addition:

- (a) Correctional Sergeants shall not record confidential informants, absent Correctional Lieutenant approval under limited circumstances.
- (b) Incident briefings without a Correctional Lieutenant's approval.
- (c) Sheriff's Office meetings, work groups and training classes.

Employees shall not obtain, convert, delete or tamper with any Sheriff's Office digital file(s) obtained during the course and scope of their duties for personal use. The following are specifically prohibited:

- (a) Personal copies of Office digital file(s);
- (b) Re-recording of Office digital file(s) with other devices;
- (c) Posting any Office digital file(s) on any website/social media site; or
- (d) Posting of any Office digital file(s) on any Sheriff's Office sponsored site without express permission from the Sheriff or his designee.

Sheriff's Office BWC digital files shall not be shared except for official purposes and only by personnel who have been authorized by the Sheriff or his designee.

#### **524.8 CATEGORY AND RETENTION**

Correctional Sergeants must assign one of the categories listed below to facilitate proper retention of the digital file(s) if the footage correlates to a specific category. Notification will be made to a Correctional Lieutenant when videos are assigned a category. Categories are selected based on the statutory retention requirements for the incident and will be stored in the Getac Management



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System which is managed by the system administrator. BWC recordings not otherwise needed for official reasons shall be retained for a period of not less than one year. (Government Code § 34090.6)

Category
Use of Force
PREA Investigation
Investigation
Other

#### **524.9 RECORDED DATA ACCESS AND REVIEW**

All access and activity on Getac Enterprise Systems are logged and subject to audit at any time. Access to Getac Enterprise Systems and the data stored there is permitted on a right to know and need to know basis. Authorized personnel in the categories listed below may view video data according to the provisions of this policy or as authorized by the Sheriff or his designee.

BWC video can be viewed on a mobile device and on computer workstations. Once uploaded to Getac Enterprise, authorized personnel may view BWC recordings on a Department computer by logging into the system and documenting the reason for access in the "Notes" section prior to viewing any data.

##### 1. Correctional Deputy Access

Correctional Deputies may view BWC recordings of incidents they are involved in as they relate to:

- (a) Their involvement in an incident for the purposes of preparing official reports. To ensure accuracy and consistency, correctional deputies are encouraged to review BWC recording prior to preparing reports.
- (b) Prior to court to refresh their recollection of events.
- (c) Prior to providing a statement pursuant to an internal investigation, including officer involved shooting investigations and critical incidents.

NOTE: Following an officer involved shooting or other critical incident resulting in injury or death, involved personnel shall not view their BWC recording on any device or computer prior to the BWC recording being uploaded into the Getac Enterprise System by the Detective Division.

##### 2. Supervisor Access

Supervisors may view BWC recordings from personnel under their supervision in the following instances:

- (a) Supervisory investigation following the application of reportable use of force (except use of deadly force). Supervisors will ensure that they document their review of the BWC video in the narrative of their investigative comments. Supervisors will ensure that the video is labeled and categorized in accordance with this policy.
- (b) Supervisory response to a citizen complaint. Supervisors will handle receipt of complaints in accordance with Personnel Complaint Policy 1020. Supervisors may

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access the video on scene through a mobile device or any mobile data terminal. Review of the recording will not occur in the presence of the complainant. If the allegation appears to be valid the supervisor will note in the narrative of the statement of complaint that BWC video is available, was reviewed, and is one of the justifications for the statement of complaint.

- (c) During an internal investigation forwarded to the Professional Standards Unit for completion.
- (d) To assist in appropriately addressing a clearly documented performance issue. In such cases the supervisor will discuss the issue with their Correctional Lieutenant who will review the circumstances and, if appropriate, retrieve the video from Getac Enterprise and forward it to the employee's direct supervisor.
- (e) To facilitate training of subordinates on real-life scenarios and situations which may improve the overall performance and practices of custody staff.

#### 3. Professional Standards Unit Access

- (a) BWC recordings will be administratively reviewed and used during investigations related to the use of force, officer involved shootings, complaints, pursuits and routine calls for service. Furthermore, the Professional Standards Unit will also review BWC recordings to evaluate the effectiveness of training, tactics and equipment to improve officer safety and critical incident response.

When recordings are administratively reviewed, use of profanity by correctional staff will be considered within the overall context of the incident, as well as accepted training and practices. However, correctional deputies remain prohibited from engaging in discourteous, disrespectful, or discriminatory treatment of the public per Policy 115- Standards of Conduct.

#### **524.10 CRITICAL INCIDENTS**

The San Luis Obispo County Sheriff's Office acknowledges that recordings taken during critical incidents obtained from video recorders do not necessarily reflect the full extent of the nature of the event or the experience, analysis, training, threat assessment or state of mind of the individual correctional staff in each incident. Moreover, the recordings, especially video, have limitations and may depict events differently than the events recalled by the involved correctional deputy. Specifically, it is understood that the recording device will capture information that may not have been heard and/or observed by the involved correctional staff and that correctional staff may see and hear events that are not captured by the camera.

Correctional Sergeants involved in critical incidents shall notify the Correctional Lieutenant of any related recordings. During an investigation of a critical incident by the Detective Division, detectives shall secure the recording device as soon as possible, ensure the recording has stopped, power off the camera and maintain chain of custody. Detectives from the Major Crimes Unit shall coordinate the download or electronic transfer, minimizing those involved with the chain of custody.

Correctional Staff who are involved in any significant use of force incident or collision causing injuries will be permitted to review their recordings prior to providing a statement or written report.

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##### **524.11 REQUESTS FOR DELETION OF ACCIDENTAL BWC RECORDING**

In the event of an accidental or sensitive personal recording using the BWC system, where the resulting recording is of no investigative or evidentiary value, the recording Correctional Sergeant may request that the file be deleted by submitting an email request to the Professional Standards Unit Commander and CC Correctional Lieutenant. The PSU Commander will review the file and recommend approval or denial of the request. In cases where the administrator denies the request to delete, an appeal may be submitted to the Sheriff, or designee, for deletion authorization. In all cases of deletion requests, a determination should be made within 7 calendar days.

##### **524.12 UPLOADING TO GETAC ENTERPRISE SYSTEM**

At the end of their shift, Correctional Sergeants shall place their BWC into the designated docking station for charging and uploading of recordings. Correctional Sergeants shall not remove the camera and related equipment from the docking station until the video files are completely uploaded and battery is fully charged.

##### **524.13 SYSTEM ADMINISTRATOR AND BWC COMMITTEE**

The system administrator will be a Commander designated by the Sheriff. The BWC Committee will be assigned to report to the system administrator. The system administrator and BWC Committee have oversight responsibilities including, but not limited to, the following:

- (a) Ensure the system is operational and functioning properly.
- (b) Ensure files are maintained in accordance with the Department's retention schedule.
- (c) Operation and user administration of the BWC system and Getac Enterprise.
- (d) Ongoing System evaluation.
- (e) Ongoing review of related Sheriff's Office policies and procedures.
- (f) Assessment and recommendations for modification of policies, procedures and practices associated with video recording.
- (g) All BWC training, to include the use of BWC video for training purposes.
- (h) Coordination with IT regarding system related issues

##### **524.14 RELEASE OF OFFICIAL VIDEO TO THIRD PARTIES**

Requests for BWC camera video images from other government agencies or by the submission of a court order or subpoena shall be submitted to Investigative Services Bureau Chief Deputy who will promptly research the request and submit the results of such search through the Sheriff to the County Counsel's Office for further handling.

BWC video images requested by the public or media will be made available only to the extent required by law. Except as required by a valid court order or other lawful process, video images requested under the Public Records Act will generally not be disclosed when such video images are evidence in an ongoing criminal investigation in which a disposition has not been reached.

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The Sheriff may elect to release video of an incident when it serves the public interest in aiding in the apprehension of a criminal suspect, assisting in a criminal investigation or advising of a potential public safety hazard.

When considering whether disclosure is warranted the privacy rights and the impacts of the disclosure on the involved employees should be considered. If it is determined that disclosure is necessary, the Sheriff's Office should provide as much advance notice as practicable to those involved member(s).

All requested BWC recordings of an incident will be provided to the District Attorney's Office as part of the routine criminal discovery process.

#### **524.15 KNOWLEDGE OF RECORDING**

Members of the Sheriff's Office shall not surreptitiously record another member of this agency without a court order or unless lawfully authorized by the Sheriff or their authorized designee.

#### **524.16 RECORDING PREPARATION**

When recording an interview, the Correctional Sergeant should include the following information if practicable:

- (a) The location of the interview or recording
- (b) The identities of all parties involved in or present at the interview or recording
- (c) Describe the time of and reason of any temporary stoppage of the recording and include the fact all parties had knowledge of the stoppage

When circumstances do not permit compliance with these guidelines (i.e., spontaneous recordings), the Correctional Sergeant should document the above information in the Correctional Sergeants log..

Whenever possible, members should ensure the device recorded properly before the interviewed person leaves.

#### **524.17 SUPERVISOR RESPONSIBILITIES**

1. Correctional Lieutenants will ensure all Correctional Sergeants assigned BWC's have completed the required training in their operation and utilize the cameras in accordance with this policy
2. Correctional Sergeants will ensure any malfunction or damage to a BWC unit is addressed without delay. The Correctional Sergeant will remove the BWC from service and obtain a replacement camera until the unit is repaired.
3. Correctional Sergeants will ensure that they upload all BWC recordings at the end of their shift.
4. Access BWC recordings, as appropriate, in accordance with the provisions of this policy.
5. Categorize appropriate videos and notify a Correctional Lieutenant.

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##### **524.18 TRAINING ACKNOWLEDGEMENT**

The BWC will only be worn and used by Correctional Sergeants who have attended Sheriff's Office approved training regarding the operation of the system pursuant to this policy. All Correctional Lieutenants of BWC equipped Correctional Sergeants and other personnel who may access or otherwise be involved with BWC's are required to attend this training. All training related to body worn cameras will be developed and conducted jointly by the body worn camera committee and the Professional Standards Unit.

In instances where a BWC recording contains material that is beneficial for training purposes, the recording may be used upon the approval of the Professional Standards Unit Commander. If an involved deputy objects to showing the recording for training purposes, their objection will be submitted in writing to the Correctional Captain, who will determine if the training value outweighs the deputy's objection.

##### **524.19 POLICY AND PROGRAM EVALUATION**

Because body worn camera technology is evolving at a rapid pace, the body worn camera committee is responsible for monitoring advancements in technology and for staying abreast of changes in law or court decisions that affect their use. The committee will prepare an annual report on the status of the BWC program at the start of each fiscal year. The report should include advancements in technology, changes in the law, examples of successful uses of the BWC and any recommendations to changes in the policies or procedures governing their use

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## FERROMAGNETIC DETECTION - CELLSENSE

### 525.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines and maintain procedures for use of Ferromagnetic Detection (FMD) technology in order to detect and eliminate ferrous contraband entering or within the San Luis Obispo County Jail. This policy applies to the San Luis Obispo County Sheriff's Office responsible for the County Jail and the use of the Cellsense Plus (CSP) system by Metrasens.

### 525.2 DEFINITIONS

Ferrous Metal – An object containing iron and has magnetic properties.

Ferromagnetic Detection (FMD) – A device used for monitoring the effect of iron-based metal items, or items containing metal on magnetic fields.

Cellsense Plus (CSP) – An advanced screening tower system with optimized sensors that detect ferrous metal contraband.

### 525.3 GUIDELINES

- A. Only authorized personnel may operate the CSP towers. The CSP towers shall be turned off when not being used.
- B. CSP towers can be unplugged and removed from docking anchors to be used in other parts of the facility for the purpose of screening for ferrous metal contraband.
- C. FMD on the CSP detects movement of objects that contain ferrous metal such as, cellular phones, SIM cards, knives, firearms, needles and lighters that may be concealed.

### 525.4 SCANNING INCARCERATED PERSONS AND PROPERTY

Incarcerated person searches are necessary to ensure the safety of staff, incarcerated persons and visitors and are accomplished by conducting effective and appropriate searches of incarcerated persons, visitors, and areas within the facility in accordance with applicable laws. CSP screening shall be conducted in a reasonable manner, balancing the significant and legitimate security interests of the jail against the invasion of an incarcerated person's personal rights; and never as a punitive measure.

The introduction of contraband, intoxicants or weapons into the jail poses a serious risk to the safety and security of staff, incarcerated persons, volunteers, contractors and the public. 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 the jail. Carefully restricting the flow of contraband into the jail can only be achieved by thorough searches of incarcerated persons and their environment.

No person held prior to placement in general population shall be subjected to a CSP screen unless there is reasonable suspicion based upon specific and articulable facts to believe the person has

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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:

- A. The detection of an object during a pat-down search that may be a weapon or contraband.
- B. 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.
- C. Custody history (past possession of contraband while in custody, assaults on staff, escape attempts, etc.)
- D. The person's actions or demeanor.
- E. Criminal history (level of experience in a custody setting, etc.).

No CSP screen of an incarcerated person shall be conducted prior to admittance to general population without prior authorization from a Correctional Sergeant. A positive alert for ferrous material shall result in an incarcerated person being immediately scanned on the Soter RS body scanner in accordance with policy §527.

#### **525.5 PACEMAKERS, OTHER MEDICAL DEVICES AND MEDICAL CONCERNS**

A CSP screen will not adversely affect implanted medical devices, such as pacemakers. A person who claims to have such a device should first be examined by medical staff per normal procedure. However, the presence of such a device should not preclude the use of the CSP system.

The CSP screening process does not emit any type of radiation that could be potentially harmful to pregnant incarcerated persons. Pregnant female incarcerated persons can be screened using the CSP tower system.

#### **525.6 NEW ARRESTS**

New arrests will be CSP screened using the following procedures:

A thorough pat-down search will be completed at the time each arrestee is received in Pre-Book Holding.

Book and Release incarcerated persons, and incarcerated persons arrested and booked on any charge, who have an expectation of immediate release on a written promise to appear or by posting bail, regardless of the nature of the offense, shall not be subject to a CSP screen, a body scan or strip and visual body cavity search unless there is reasonable suspicion, based on specific and articulable facts, to believe the incarcerated person is concealing a weapon or contraband and that a CSP screen may result in the discovery of the weapon or contraband.

#### **525.7 INCARCERATED PERSONS HOUSED IN GENERAL POPULATION**

Incarcerated persons who will be housed in population may be CSP screened at any time. No articulable facts are required beyond the routine security precautions necessary to safeguard the safety and security of the facility and the health and welfare of the incarcerated persons population.

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### *FERROMAGNETIC DETECTION - CELLSENSE*

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#### **525.8 DETECTION OF CONTRABAND**

##### **New Housing**

If the CSP screening alerts positive for ferrous metal material, a thorough pat-down search will be conducted followed by a body scan in conjunction with §527.10. An additional strip search may be necessary with authorization from a Correctional Sergeant.

##### **Housed Incarcerated Persons**

To prevent the introduction, transfer or concealment of weapons and contraband inside the facility, all housed incarcerated persons may be CSP screened at any time. No specific articulable facts are required beyond the routine security precautions necessary to safeguard the safety and security of the facility, and the health and welfare of the incarcerated person population. Incarcerated persons being escorted throughout the facility are subject to CSP screening. If the CSP screening alerts positive for ferrous metal material, a thorough pat-down search will be conducted followed by a body scan in conjunction with policy §527.10. An additional strip search may be necessary with authorization from a Correctional Sergeant.

Considerations that may warrant use of the CSP system for housed inmates:

- A. Unrestrained incarcerated persons returning from or being transported to court, outside medical appointments or incarcerated person transfers from other institutions where the incarcerated person(s) may have had access to weapons, drugs or contraband.
- B. Housed incarcerated persons who are the subject of a jail or criminal investigation involving weapons, drugs or contraband.
- C. Confidential informant information that indicates a specific incarcerated person is concealing weapons, drugs or contraband.
- D. Other information known to any staff member that would indicate an incarcerated person, or group of incarcerated persons, may be in possession of weapons, drugs or contraband.

#### **525.9 TRAINING**

The Cellsense Plus system operator training consists of the following subject matter:

- A. Review of the CSP training bulletin and attached operational videos.
- B. Review of the CSP user manual.
- C. Identification of operational parts (i.e. power switch, audible alarms, volume adjustment, threshold control dial, etc.).
- D. Review of the CSP standard operating procedure.
- E. Practical application.
- F. Adherence to this policy.



## Searches

### 526.1 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 San Luis Obispo County Sheriff's Office facility poses a serious risk to the safety and security of staff, inmates, volunteers, contractors and the public. Any item that is not available to all inmates may be used as currency by those who possess the item, and will allow those in possession of the item to have control over other inmates. Any item that may be used to disengage a lock, other electronic security devices or the physical plant itself, seriously jeopardizes the safety and security of this facility. Carefully restricting the flow of contraband into the facility can only be achieved by thorough searches of inmates and their environment.

Nothing in this policy is intended to prohibit the otherwise lawful collection of trace evidence from an inmate/arrestee.

#### 526.1.1 DEFINITIONS

Definitions related to this policy include:

**Contraband** - Anything unauthorized for inmates to possess or anything authorized to possess but in an unauthorized quantity.

**Modified strip search** - A search that requires a person to remove or rearrange some of his/her clothing that does not include a visual inspection of the breasts, buttocks or genitalia of the person but may include a thorough tactile search of an inmate's partially unclothed body. This also includes searching the inmate's clothing once it has been removed.

**Pat-down search** - The normal type of search used by deputies within this facility to check an individual for weapons or contraband. It involves a thorough patting down of clothing to locate any weapons or dangerous items that could pose a danger to the deputy, the inmate or other inmates.

**Physical body cavity search** - A search that includes a visual inspection and may include physical intrusion into a body cavity. Body cavity means the stomach or rectal cavity of a person, and the vagina of a female person.

**Strip search** - A search that requires a person to remove or rearrange some or all of his/her clothing to permit a visual inspection of the underclothing, breasts, buttocks, anus or outer genitalia of the person. This includes monitoring of a person showering or changing clothes where the person's underclothing, buttocks, genitalia or female breasts are visible to the monitoring employee.

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#### Searches

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##### **526.2 POLICY**

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

##### **526.3 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, including the Honor Farms, to participate in activities elsewhere in the facility (e.g., exercise yard, medical, program, visiting) and when they return.
- (b) When inmates leave their housing units to participate in activities outside of the facility (e.g., court, medical appointment) and when they return.
- (c) During physical plant searches of entire housing units.
- (d) When inmates come into contact with other inmates housed outside of their housing units, such as work details.
- (e) Any time the staff believes the inmates may have contraband on their person.

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).

##### **526.4 MODIFIED STRIP SEARCHES, STRIP SEARCHES AND PHYSICAL BODY CAVITY SEARCHES**

Deputies will generally consider the reason for the search, the scope, intrusion, manner and location of the search, and will utilize the least invasive search method to meet the need for the search.

###### **526.4.1 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 Shift Commander.
- (c) The staff member conducting the modified strip search or strip search shall:
1. Document the name and sex of the person subjected to the strip search.
  2. Document the facts that led to the decision to perform a strip search of the inmate.
  3. Document the reasons less intrusive methods of searching were not used or were insufficient.
  4. Document the supervisor's approval.
  5. Document the time, date and location of the search.
  6. Document the names, sex and roles of any staff present.
  7. Itemize in writing all contraband and weapons discovered by the search.
  8. Process all contraband and weapons in accordance with the office's current evidence procedures.
  9. If appropriate, complete a crime report and/or disciplinary report.
  10. Ensure the documentation is placed in the inmate's file. A copy of the written authorization shall be retained and made available to the inmate or other authorized representative upon request.

#### 526.4.2 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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##### 526.4.3 MODIFIED STRIP SEARCHES AND STRIP SEARCHES OF INMATES IN A HOUSING UNIT

A strip search of an inmate in a housing unit should be conducted when the inmate has entered an environment where contraband or weapons may be accessed. This includes, but is not limited to, the following:

- (a) Upon return from contact visits
- (b) Upon leaving the kitchen, shop, farm, etc.
- (c) Upon return to the housing unit from outside the confines of the facility (court, work-release, work detail, medical visits)

Inmates returning from court with release orders shall not be subject to strip searches or modified strip searches unless the reasonable suspicion exists based on specific and articulable facts that the person is concealing a weapon or contraband. The inmate should not be returned to the housing unit, except for retrieving his/her personal property under the direct visual supervision of staff.

Staff members may conduct modified strip searches and strip searches of inmates outside the above listed circumstances only with supervisor approval. Staff members and supervisors must make a determination to conduct a strip search by balancing the scope of the particular search, intrusion, the manner in which it is conducted, the justification for initiating it and the place in which it is conducted. Less invasive searches should be used if they would meet the need for the search. For example, a pat-down or modified strip search may be sufficient as an initial effort to locate a larger item, such as a cell phone.

The staff member conducting a modified strip or strip search outside the above listed circumstances shall:

- Document in writing the facts that led to the decision to perform a strip search of the inmate.
- Document the reasons less intrusive methods of searching were not used or were insufficient.
- Document the supervisor's approval.
- Document the time, date and location of the search.
- Document the names of staff present, their sex and their roles.
- Itemize in writing all contraband and weapons discovered by the search.
- Process all contraband and weapons in accordance with the office's current evidence procedures.
- 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.

#### 526.4.4 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 deputy can inspect the inmate's ear orifices.
  5. Open his/her mouth and run a finger over the upper and lower gum areas, then raise the tongue so the deputy can inspect the interior of the inmate's mouth. Remove dentures if applicable.
  6. Turn around and raise one foot first, then the other so the deputy can check the bottom of each foot.
  7. For a visual cavity search, turn around, bend forward and spread the buttocks if necessary to view the anus.
- (b) At the completion of the search, the inmate should be instructed to dress in either his/her street clothes or jail-supplied clothing, as appropriate.

#### 526.4.5 PHYSICAL BODY CAVITY SEARCH

Physical body cavity searches shall be completed as follows:

- (a) No person shall be subjected to a physical body cavity search without the approval of the Facility Manager 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 Facility Manager's approval.
  - 4. A copy of the search warrant.
  - 5. The time, date and location of the search.
  - 6. The medical personnel present.
  - 7. The names, sex and roles of any staff present.
  - 8. Any contraband or weapons discovered by the search.
- (f) Completed documentation should be placed in the inmate's file. A copy of the written authorization shall be retained and made available to the inmate or other authorized representative upon request.
- (g) All contraband and weapons should be processed in accordance with the office's current evidence procedures.
- (h) If appropriate, the staff member shall complete a crime report and/or disciplinary report.

#### **526.5 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

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a broader medical examination conducted in private by a qualified health care professional (28 CFR 115.15).

Inmates identifying as transgender or intersex shall be referred to the shift supervisor to determine the appropriate gender of the staff member who will be conducting the search. This determination will be made on a case by case basis. Inmates identifying as transgender or intersex will be given a voluntary *Statement of Preference Form* to document their gender identity in accordance with Penal Code §4030(k). The *Statement of Preference Form* will be placed in the inmate's *Booking Jacket*. A copy will be forwarded to the Classification Unit and Jail Medical Staff.

If the inmate identifying as intersex or transgender does not specify a gender identity, the search will be conducted by a deputy of the same gender as the inmate's gender presentation.

#### **526.6 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.

#### **526.7 HOUSING UNIT SEARCHES**

Housing unit searches shall occur as directed by the On-Duty Sergeant. Searches shall be conducted at a minimum monthly; however, bimonthly searches should occur to ensure the safety and security of the facility. Staff may initiate cell searches, but should notify the On-Duty Sergeant prior to starting the search. If exigent circumstances exist, staff may conduct the search then notify their On-Duty Sergeant once it is concluded. The On-Duty Sergeant will make a notation in the *Correctional Sergeants' Post Log* and *Search Log*. 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, the dayroom or a visiting area if it is not occupied.
- (c) Staff should 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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- (h) Other factors to consider: nightlights shall not be covered, make-shift clothes lines shall be removed, any vandalism to the cell or markings on the wall shall not be permitted, and excess clothing and non-commissary items shall be removed.

At the conclusion of the housing unit search, when necessary, staff may utilize closely supervised inmate workers to clean the unit. All authorized inmate personal property shall be respected and living areas should be returned to an orderly condition.

#### **526.8 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 missing 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.

#### **526.8.1 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).

#### **526.9 CRIMINAL EVIDENCE SEARCHES**

The Facility Manager 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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#### **526.10 TRAINING**

The Training Coordinator shall provide training for staff in how to conduct pat-downs, modified strip searches and strip searches in a professional and respectful manner and in the least intrusive manner possible, consistent with facility security needs. This training shall include cross-gender pat downs and searches, as well as searches of transgender and intersex inmates (28 CFR 115.15).

## Body Scanner and Radiation Safety Program

### 527.1 POLICY

It is the policy of this Office that the low dose, X-Ray based operation of the *OD Security North America SOTER RS* body scanner will be used as a tool to assist staff with detection and prevention of weapons, contraband and prohibited items from entering the secure areas of the jail. The purpose of this policy is to establish an effective radiation safety and protection program that will reduce the risk of exposure related to the use of ionizing x-radiation, and provide for the safe operation of the body scanner.

### 527.2 DEFINITIONS

**Body Scan:** X-ray technology used to produce an image revealing the presence of contraband concealed on or inside of a subject.

**Body Scan Device:** A stationary system for obtaining full height radiographic images of a person to detect any kind of weapons, explosives, drugs, and precious stones and metals either concealed under the clothes, swallowed, or hidden in anatomical cavities of the human body (for example, drugs in capsules) without causing harm to the scanned person.

**X-Ray:** Referred to as x-radiation, is a form of electromagnetic radiation similar to light but of shorter wavelength and capable of penetrating solids and of ionizing gases.

**Radiation:** Radiation is the process in which energetic particles or waves travel through a medium or space. There are two distinct types of radiation: ionizing and non-ionizing. X-radiation is an ionizing radiation.

**Radiation Survey:** Measurement of the x-radiation equivalent dose rate at the external surfaces of the body scan device, the personnel work station(s), the boundaries of the working zone, and in adjacent rooms if applicable.

**Exposure:** A term defining the amount of ionizing radiation that strikes living or inanimate material. The Federal Drug Administration definition is found in CFR, Title 21, 1020.40(b)(5).

**Dose:** The quantity of radiation or energy absorbed.

**RSO:** Radiation Safety Officer.

### 527.3 GUIDELINES

- (a) Only authorized personnel may view the body scan monitors or images produced by the body scanner. The monitors shall not be in an area viewable by incarcerated persons.
- (b) Whenever possible all persons conducting or otherwise present in the monitor viewing area shall be the same sex as the person being scanned. Exceptions may include identifying an anomaly or for the purposes of training.

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#### **527.4 SCANNING INCARCERATED PERSONS AND PROPERTY**

Incarcerated person searches are necessary to ensure the safety of staff, incarcerated persons and visitors and are accomplished by conducting effective and appropriate searches of incarcerated persons, visitors, and areas within the facility in accordance with applicable laws. Body scanning, strip and visual body cavity searches shall be conducted in a reasonable manner, balancing the significant and legitimate security interests of the jail against the invasion of an incarcerated person's personal rights; and never as a punitive measure.

The introduction of contraband, intoxicants or weapons into the jail poses a serious risk to the safety and security of staff, incarcerated persons, volunteers, contractors and the public. Any item that is not available to all Incarcerated persons 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 incarcerated persons. 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 the jail. Carefully restricting the flow of contraband into the jail can only be achieved by thorough searches of inmates and their environment.

No person held prior to placement in general population shall be subjected to a body scan 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:

- (a) The detection of an object during a pat-down search that may be a weapon or contraband.
- (b) 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.
- (c) Custody history (past possession of contraband while in custody, assaults on staff, escape attempts, etc.)
- (d) The person's actions or demeanor.
- (e) Criminal history (level of experience in a custody setting, etc.).

No body scan of an incarcerated person shall be conducted prior to admittance to general population without prior authorization from a correctional sergeant.

The correctional deputy conducting the body scan shall:

- (a) Document the facts that led to the decisions to perform a body scan on the arrestee.
- (b) Document the reasons less intrusive methods of searching were not used or were insufficient.
- (c) Document the correctional sergeant's approval.
- (d) Document the time, date and location of the search.
- (e) Document the names, sex and roles of any staff present.

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- (f) Itemize in writing all contraband and weapons discovered by the search.
- (g) Process all contraband and weapons in accordance with the Office's current evidence procedures.
- (h) If appropriate, complete a crime report and/or disciplinary report.

The documentation shall be stored in the Jail Management System. A copy of the record shall be retained and made available to the incarcerated person or other authorized representative upon request.

The body scanner may be used to scan any item belonging to an arrestee or incarcerated person who is booked within the facility. Scanning of a new arrestee's property may be conducted when articulable facts exist to believe the contents of the property may pose a risk to the safety or security of the facility. Use of the body scanner to inspect the contents of packages or articles not belonging to an arrestee, or items that will not be stored inside the jail property room will not be conducted without prior authorization from a correctional sergeant. The purpose of the body scanner is to prevent contraband from entering the facility, and to detect weapons, drugs and contraband possessed by incarcerated persons within the facility or hidden within their property.

The body scanner does not take the place of a pat-down search or strip search when facts exist to warrant a strip search.

#### **527.5 PACEMAKERS AND OTHER MEDICAL DEVICES**

There is no FDA published material indicating the use of the body scanner will adversely affect implanted medical devices, such as a pacemaker. A person who claims to have such a device should first be examined by medical staff prior to a scan. However, the presence of such a device should not preclude the use of the body scanner, unless other circumstances known to medical or jail staff indicate otherwise.

#### **527.6 PREGNANT INCARCERATED PERSONS**

Prior to scanning an arrestee or incarcerated person, the correctional deputy performing the scan shall ask the arrestee or incarcerated person if they are pregnant.

The body scan device shall not be used to scan arrestees or incarcerated persons who are known to be pregnant under any circumstances. A statement by the arrested person or incarcerated person that she is pregnant is sufficient for correctional deputies until verification can be made.

- (a) If pregnancy is not obvious and there is suspicion the incarcerated person is alleging pregnancy to avoid being scanned the pregnancy can be verified. Pregnancy tests will be conducted by medical staff.

This test normally occurs before the female is housed. If medical staff advises an arrestee claiming to be pregnant has tested negative (not pregnant), the arrestee may be scanned with the body scan device. This will only occur if the negative test result is revealed before the arrestee is housed.

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#### 527.6.1 PREGNANT CORRECTIONAL DEPUTIES

Correctional deputies who are pregnant or believe they are pregnant shall not operate the Body Scanner device under any circumstance. If a correctional deputy operates the Body Scanner device and subsequently discovers they were pregnant during operation of the device, they will notify the Radiation Safety Officer.

#### 527.7 INTOXICATED ARRESTEES

Care should be exercised when scanning persons who demonstrate an acute level of intoxication to such an extent that standing, or remaining still for the duration of the scan might not be possible. If the person demonstrates objective symptoms of intoxication to an extent that their safety may be compromised by the moving scanner platform, then the scan should be delayed to a later time, or deferred completely if the person will be released when sober.

#### 527.8 NEW ARRESTS

New Arrests will be scanned using the following procedures:

A thorough pat-down search will be completed at the time each arrestee is received in Pre-Book Holding.

Book and Release incarcerated persons, and incarcerated persons arrested and booked on any charge, who have an expectation of immediate release on a written promise to appear or by posting bail, regardless of the nature of the offense, shall not be subject to a body scan or strip and visual body cavity search unless a peace officer has determined there is reasonable suspicion, based on specific and articulable facts, to believe the incarcerated person is concealing a weapon or contraband and that a body scan and/or strip search and visual body cavity search will result in the discovery of the weapon or contraband.

The body scan and/or strip search authorization shall only be given after reasonable suspicion has been determined by a peace officer.

- (a) A Strip Search/Body Scanner Authorization form, which documents reasonable suspicion, shall be completed by the requesting agency prior to the body scan and/or strip and visual body cavity search.
- (b) Authorization must be obtained from a correctional sergeant prior to the search.
- (c) The arrestee will be subject to a pat-down search followed by removal of all property from their clothing.

Following removal of all property, the arrestee will be escorted and instructed to stand on the platform with their face pointed toward the dot on the platform. The incarcerated person will be instructed to hold their shoes at either side during the scanning process.

If it is suspected the incarcerated person may have concealed weapons or drugs in their shoes, the correctional deputy should scan the shoes separately to avoid potential use of a weapon or destruction of evidence.

All scans are stored electronically on the internal SOTER RS memory.

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The intake process will continue if no anomalies are detected.

#### **527.9 INCARCERATED PERSONS HOUSED IN GENERAL POPULATION**

Incarcerated persons who have turned themselves in on a commitment, cannot bail or be released on their own recognizance may be scanned at any time. No articulable facts are required beyond the routine security precautions necessary to safeguard the safety and security of the facility and the health and welfare of the incarcerated person population.

#### **527.10 DETECTION OF CONTRABAND**

If the scanning process of a new arrest reveals an object that is clearly identifiable as a weapon, drug or contraband, the following procedures will be followed:

- (a) If the object is clearly a weapon or suspected drug, appropriate officer safety practices will be utilized, the arrestee secured with restraints and placed under constant supervision.
- (b) The correctional sergeant will be advised of the detection.
- (c) The arrestee's clothing will be searched in the approximate area where the object appeared to be located.
- (d) If the clothing search is unsuccessful, a strip search may be authorized by the correctional sergeant.
- (e) If the object appears to be in a body cavity such as the rectum, vagina or mouth, the arrestee will be asked to remove the object.
- (f) If the arrestee refuses to remove the object, or the object appears to be in a location where a physical body cavity search or intrusive medical procedure would be required, medical staff will be notified of the suspected concealed item and apparent location.
- (g) Upon a determination from medical staff that the object presents a medical threat to the health or welfare of the arrestee, or cannot be removed without intrusive medical procedures, the arrestee will not be accepted for booking.
- (h) The Correctional Sergeant will download and print a copy of the image which will be provided to the arresting officer. The arresting officer will be required to obtain a medical clearance before accepting the arrestee.

If the scanning process of an incarcerated person reveals an object that is clearly identifiable as a weapon, drug or contraband, the following procedures will be followed:

- (a) If the object is clearly a weapon or suspected drug, appropriate officer safety practices will be utilized, the incarcerated person secured with restraints, placed under constant supervision and a Special Observation Log started.
- (b) The correctional sergeant will be advised of the detection.
- (c) The incarcerated person's clothing will be searched in the approximate area where the object appeared to be located.
- (d) If the clothing search is unsuccessful, a strip search may be authorized by the correctional sergeant.

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- (e) If the object appears to be in a body cavity such as the rectum, vagina or mouth, the incarcerated person will be asked to remove the object.
- (f) If the incarcerated person refuses to remove the object, or the object appears to be in a location where a physical body cavity search or intrusive medical procedure would be required, medical staff will be notified of the suspected concealed item and apparent location.
- (g) Incarcerated persons may be placed in a cell in the Intake Release Center for observation.
  - 1. Prior to placement in a cell a correctional deputy shall search the cell to ensure there is no contraband in the cell.
  - 2. The water in the cell will be turned off and the toilet flushed to empty the toilet.
  - 3. The contraband cover will be secured over the top of toilet to ensure the inmate cannot conceal the object in the toilet.
- (h) Incarcerated persons placed in restraints must be afforded meals and fluids, and use of a toilet. Refusal or acceptance of these items will be noted on the Special Observation Log.
  - (a) Water will be offered to incarcerated persons in restraints at least every two hours. A notation will be made on the Special Observation Log every time water and the bathroom toilet are offered and whether it was accepted.
  - (b) If an incarcerated person needs to use the bathroom an officer will be in attendance at all times to ensure the incarcerated person is not attempting to dispose or destroy the evidence. A plastic bag should be placed over the toilet to capture any waste.
  - (c) When an incarcerated person produces a bowel movement, it will be searched thoroughly for contraband using universal safety precautions.
- (i) A bowel movement can be searched by utilizing the body scanner to determine if the contraband is a weapon.
- (j) If it is a weapon (E.g. gun, knife) it will be processed as evidence and a crime report taken.
- (k) Any other objects that do not pose an immediate officer safety issue may be disposed of by flushing down the toilet.
- (l) Before handling the contents of any bowel movements, staff will put on gloves, a mask, and a face shield.
- (m) All contraband and weapons should be processed in accordance with the Office's current evidence procedures.
- (n) If appropriate, the staff member shall complete a crime report and/or disciplinary report.
- (o) Upon a determination from medical staff that the object presents a medical threat to the health or welfare of the incarcerated person, or cannot be removed without intrusive medical procedures. A physical body cavity search will be requested.

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Physical body cavity searches will be conducted as follows:

- (a) The Correctional Sergeant will notify the Jail Operations Lieutenant who will obtain approval from the Jail Correctional Captain for a Physical Body Cavity Search.
- (b) Upon approval from the Correctional Captain the Watch Commander will be notified and a detective requested to prepare a search warrant for a physical body cavity search. A search warrant for a physical cavity search will be obtained even if the incarcerated person provides consent.
- (c) 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 incarcerated person or authorized representative. (With the exception of portions of the warrant ordered sealed by a court.)
- (d) 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.
- (e) 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.
- (f) Privacy requirements, including restricted touching of body parts and sanitary condition requirements are the same as required for a strip search.

All such searches shall be documented including:

- (a) The facts that led to the decision to perform a physical body cavity search of the incarcerated person.
- (b) The reasons less intrusive methods of searching were not used or were insufficient.
- (c) The Facility Manager's approval.
- (d) A copy of the search warrant.
- (e) The time, date and location of the search.
- (f) The medical personnel present.
- (g) The names, sex and roles of any staff present.
- (h) Any contraband or weapons discovered by the search.

Completed documentation should be placed in the incarcerated person's file. A copy of the written authorization shall be retained and made available to the incarcerated person or other authorized representative upon request.

All contraband and weapons should be processed in accordance with the office's current evidence procedures.

If appropriate, the staff member shall complete a crime report and/or disciplinary report.



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##### **527.11 HOUSED INCARCERATED PERSONS**

To prevent the introduction, transfer or concealment of weapons, drugs and contraband inside the facility, all housed incarcerated persons may be scanned at any time. No specific articulable facts are required beyond the routine security precautions necessary to safeguard the safety and security of the facility, and the health and welfare of the incarcerated person population.

Considerations that may warrant use of the body scanner for housed incarcerated persons:

- (a) Incarcerated persons returning from court, outside medical appointments or incarcerated person transfers from other institutions where the incarcerated person(s) may have had access to weapons, drugs or contraband.
- (b) Incarcerated persons within housing units who demonstrate signs or symptoms of drugs or intoxication.
- (c) Housed incarcerated persons who are the subject of a jail or criminal investigation involving weapons, drugs or contraband.
- (d) Confidential informant information that indicates a specific incarcerated person is concealing weapons, drugs or contraband.
- (e) Other information known to any staff member that would indicate an incarcerated person, or group of incarcerated persons, may be in possession of weapons, drugs or contraband.

##### **527.12 REFUSAL BY ARRESTEE OR COMBATIVE INCARCERATED PERSONS**

Due to the nature of the scanning process, scanning a combative arrestee or incarcerated person will not produce a usable image. Arrestees or incarcerated persons who refuse to cooperate with the scanning process will be, at a minimum, placed into a cell where their activities can be monitored. If the arrestee's charges, history or behavior would otherwise qualify them for a strip search, the arrestee will be strip searched and given jail clothing while housed in the cell.

If the arrestee would not otherwise be qualified for a strip search, their refusal to submit to a scan may be considered with other factors such as behavior, symptoms of drug use or observations that would seem to indicate an attempt to conceal a weapon or drugs.

The arrestee may be accepted into custody and booked, but will remain in a cell until they have been scanned or a strip search conducted, for weapons, drugs or contraband.

If an incarcerated person is housed in a cell for observation due to a refusal to submit to a scan, medical staff will be notified and a Special Observation Log will be started, consistent with policy and procedure.

In any case where an incarcerated person is placed in an observation cell pursuant to this section, the placement will be reviewed by the Jail Operation's Lieutenant within the first twenty-four (24) hours of placement, and every forty-eight (48) hours thereafter.

##### **527.13 PRESERVATION OF IMAGES**

In the event weapons, drugs or contraband items are detected, the image will be maintained in the Body Scanner's internal memory. The correctional sergeant will be notified of the detection

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and appropriate steps will be taken to preserve the image, if needed as evidence for a criminal prosecution. Sheriff's Office protocols for booking evidence will be utilized for criminal cases handled by the Sheriff's Office or the jail. If the evidence is being provided to another agency, that agency will be responsible for documenting chain of custody and preservation of the image (digital or print).

When contraband is recovered or detected as a result of the body scan, a Jail Incident Report in ATIMS will be generated.

All other scans, when conducted for facility security purposes, will be stored in the Body Scanner's internal memory.

The RSO will be responsible for the maintenance of records on the Body Scanner's internal memory.

#### **527.14 INCARCERATED PERSON PROPERTY**

Incarcerated persons have traditionally used a variety of methods to conceal weapons, drugs and contraband. Methods have involved concealing prohibited items inside incarcerated person commissary containers, issued bedding and within envelopes used for legal materials.

Notwithstanding language regarding the property of new arrestees or persons not housed in the jail facility, any property located in incarcerated person housing may be scanned at any time, and for any reason.

Incarcerated person property located in a jail property bag may be scanned when staff has information to believe articles within the property bag may contain illegal property, weapons, drugs or contraband that would pose a risk to this facility if not recovered from the bag, a risk to another institution if the incarcerated person is transferred, or a risk to the general safety of the public if the incarcerated person is released.

#### **527.15 SYSTEM SAFETY AND OPERATING PARAMETERS**

The following provisions shall be adhered to by all staff:

- (a) Upon becoming aware of any safety issues related to a body scan device, staff shall immediately report their concerns to their supervisor, who will forward them to the Radiation Safety Officer.
- (b) Operators of a body scan device shall use it in a responsible manner, in accordance with this policy, and in accordance with the manufacturer's operating instructions.
- (c) The operator's manual for the body scan device shall not be removed from the work station.
- (d) During operation of the body scan device, unauthorized persons (other than service personnel) are not allowed within the working zone, approximately 3 feet out from each side of the base of the unit. The working zone shall be clearly marked on the floor around the unit. The device shall be considered operational while the red light on the unit is on.

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- (e) All part removal and installation of scan device components shall be completed by a service engineer of the representative company and/ or additional service contractors.

#### **527.16 TRAINING**

Body scan device operator training consists of the following subject matter:

- (a) Design of the body scanner: purpose of the basic components, principles of the scanner operation.
- (b) Radiation and overall body scanner operation safety principles: History of X-ray, nature of X-rays, the X-ray Tube, penetration and absorption, security X-ray machines, X-ray scanners features, prohibited items, limitations of X-ray, operating procedures, and health and safety.
- (c) Control of the scanner: switching on, testing, data input, scanning and switching off.
- (d) Principles of investigation of digital images: analysis (determination) of objects on the human body, using the mathematical filters, scaling, etc.
- (e) Malfunction diagnostics.
- (f) Practice and knowledge testing.

#### **527.17 RADIATION SAFETY OFFICER AND SHIFT SUPERVISOR DUTIES**

An appointed designee shall serve as the Radiation Safety Officer (RSO). The RSO will:

- (a) Maintain the Radiation Safety and Protection Program and coordinate the safe operation of X-ray body scan devices in compliance with applicable state and federal regulations.
- (b) Ensure body scanner is registered with the Radiologic Health Branch of the California Department of Public Health (form number RH-2261).
- (c) Ensure all radiation sourcing equipment operated is maintained and serviced in compliance with applicable state and federal requirements.
- (d) Arrange and schedule any needed repair or service for a body scan device upon being advised of any damage or malfunction.
- (e) Retain any survey, service, inspection, and instrument calibration records for the lifetime of the body scan device.
- (f) Ensure that the annual fee for the body scan device is paid to the Radiologic Health Branch of the California Department of Public Health prior to the anniversary of the effective date of the license.
- (g) Maintain a database of scanned inmates for the purposes of tracking exposures.

The shift supervisor, with the assistance and coordination of the RSO will:

- (a) Notify the RSO upon becoming aware of any maintenance issues related to a body scan device.
- (b) Notify the RSO immediately upon becoming aware of any safety issues related to a body scan device.

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##### **527.18 SAFETY FEATURES**

The system operation modes are preset by the manufacturer during installation and are not to be changed by the operator.

The following design features of the system make it possible to minimize radiation doses for staffing conducting the scan and persons being scanned:

- (a) X-ray generator enclosed in the X-ray protection case.
- (b) Slit diaphragms system, making it possible to obtain a narrow fan-shaped beam.
- (c) X-ray protection shutter cutting off output of the X-ray radiation from the generator.
- (d) Inbuilt X-ray radiation filter.
- (e) Highly sensitivity digital X-ray radiation converter.
- (f) Inbuilt dosimeter purposed to monitor the personal dose rate under any mode of the X-ray generator operation.
- (g) Emergency stop switch on the portal with the fixed position of the red mushroom shaped button, when activated, cuts off the X-ray radiation from the generator with the X-ray protection shutter and stops the platform.
- (h) Red signal lights (on the portal) indicate X-rays generation and platform movement.
- (i) The X-ray protection shutter cuts off the X-ray radiation from the generator in case of deviations from the system mechanisms and electronic devices operation parameters and conditions set by the manufacturer as well as in case of malfunctions.
- (j) In case of a failure of the X-ray protection shutter, the high voltage is not supplied to the X-ray tube.
- (k) The software tests the system upon its switching on and in the process of scanning. Detected faults messages are displayed on the operator monitor.

##### **527.18.1 RADIATION SURVEY**

An annual radiation survey shall be performed on each body scan device to ensure no radiation exposure to operators:

- (a) Upon installation of a new unit.
- (b) At intervals not exceeding one year.
- (c) Upon relocation of the body scanner.
- (d) Immediately following any service that could potentially increase the system output.

This survey shall only be performed by persons and contractors authorized to perform this service.

##### **527.18.2 SAFETY OF PERSONS SCANNED**

The inspected person dose rate per inspection should not exceed the contracted value of 0.25-2.5 uSv.

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##### 527.18.3 DOSE PER SCREENING

The minimum radiation dose to which an inmate or arrestee being scanned is exposed per scanning session, does not exceed 2.5 uSv. For the body scan device, the annual quote of the dose for one person in case of repeated inspections of him/her is set to be 30% of the limit of the man-caused exposure of the population to the radiation (0.3 mSv/year). Scan doses vary from .25 - 2.5 uSv. The body scanner monitors the total amount of radiation dose for each individual over a year period.

##### 527.18.4 SAFETY FOR THE OPERATOR

Within an unshielded perimeter of approximately 3 feet from the body scanner, the maximum dose rate of the scattered radiation does not exceed 10uSv per hour.

##### 527.18.5 SAFETY FOR BYSTANDERS

For incidental or occasional bystanders, the level of exposure per day and year is negligibly low. However, based on vendor recommendations, the scanning/working zone, approximately 3 feet out from each side of the base of the body scanner, shall be clearly marked on the floor around the unit.

#### **527.19 SYSTEM CHECK**

The assigned operator of a body scan device for each shift will complete an initial status equipment and safety check prior to operating the device. Staff completing a status equipment and safety check will:

- (a) Inspect the device for obvious damage.
- (b) Ensure all access panels are securely in place.
- (c) Ensure all accessible (external) cable connections are secure.
- (d) If the system is not already on, turn it on using the key switch (clockwise).
- (e) Verify that the "POWER ON" light is lighted.
- (f)

Notify their immediate supervisor who will notify the Facility Manager or designee. The shift supervisor will:

- (a) Advise the RSO the body scanner may need service or repair.
- (b) Ensure the body scanner is not operated until appropriate service or repairs have been completed.
- (c) If it is believed that the damage or malfunction may compromise the safety of any persons in the immediate vicinity of the device, the emergency procedures outlined within will be followed.

##### 527.19.1 EMERGENCY PROCEDURES

If an emergency situation occurs, the body scan device shall be powered off and the appropriate personnel shall be notified in accordance with the system check requirements.

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If the control panel is not accessible or functioning, the main power breaker for the system must be shut off and/ or the unit should be unplugged immediately. The main power breaker for the body scan device is located in the vault beneath Central Control.

If a situation occurs in which staff suspect possible exposure to excessive or dangerous levels of radiation while operating the body scan device, the operator will immediately notify the shift supervisor who will assess the situation and circumstances. If a risk exists, the shift supervisor will see that the body scanner is shut down appropriately and will notify the RSO.

If it is suspected that there was a potential exposure to excessive or dangerous levels of radiation, the shift supervisor will ensure that the use of the body scan device is immediately discontinued and notify the RSO and Jail Operations Lieutenant. The RSO will:

- (a) Schedule any needed service and a radiation survey on the identified body scan device.
- (b) If it is deemed safe, ensure that the body scan device is surveyed in the condition it was when it became suspect.
- (c) Only clear the body scan device to return to normal operations if it is determined to be safe by a service engineer from Virtual Imaging or another qualified service contractor.

If it is believed a radiation leak has occurred, the RSO will ensure that a service engineer from Virtual Imaging or another qualified service contractor will calculate the approximate exposure (radiation intensity) of the person(s) possibly exposed for filing an injury report refer to Policy and Procedure, Employee, Volunteer and Non-Employee injury/Illness and Exposure Report.

## Canines

### 528.1 PURPOSE AND SCOPE

The canine program aids staff in locating contraband and maintaining the security of this facility. This policy outlines requirements of the program, its staff and the expectations of the Office.

### 528.2 POLICY

The San Luis Obispo County Sheriff's Office is committed to ensuring its facilities are free from contraband and drugs and to maintaining facility security. This is done by employing trained canine teams to assist in the detection of drugs and other contraband, in accordance with all applicable laws, regulations and office policies and procedures.

### 528.3 GUIDELINES FOR THE USE OF CANINES

Canines may be used to assist staff in conducting searches for contraband, perimeter patrol, building searches, and area searches. At no time may a canine be used to demean, punish, or psychologically torment an incarcerated person. Contact between canines and incarcerated persons should be minimal. Canines should not be used to search individuals. Canines may be used for:

- Searching incarcerated person housing units, including cells, during a housing unit search, as described in the Searches Policy.
- Physical plant searches, as described in the Searches Policy.
- Searching unoccupied intake/booking areas.
- Searching unoccupied transportation vehicles before and after incarcerated person use.
- Searching for or tracking escaped offenders.
- Any other search-related use authorized by a supervisor.

A canine team shall only be used to perform tasks for which it has been trained or certified.

#### 528.3.1 WARNINGS AND ANNOUNCEMENTS

When a canine is used to search a building or area for an individual, unless it would otherwise increase the risk of injury or escape, two clearly audible warnings to announce that a canine will be released if the person does not come forth shall be made and a reasonable response period will be provided prior to releasing a canine. The canine handler, when practicable, shall first advise the supervisor of their decision if a verbal warning is not given prior to releasing the canine. In the event of an apprehension, the handler shall document in a report whether a verbal warning was given and, if none was given, the reasons why should be provided.

#### 528.3.2 REPORTING CANINE USE, BITES AND INJURIES

Whenever the canine is deployed, a canine use report shall be completed by the handler and turned in to the On-Duty Sergeant before going off-duty.

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Whenever the use of the canine results in a bite or any injury a the canine handler shall complete a canine use report included with any related incident report. The injured party shall receive required medical attention as soon as possible.

Photographs should be taken of the bite or injury as soon as practicable after tending to the immediate needs of the injured party. Photographs shall be retained with the canine use report until the potential need for use in any related civil proceeding has expired.

If a subject alleges an injury that is not visible, a supervisor shall be notified and the location of the alleged injury should be photographed as described above.

#### **528.4 SELECTING AND TRAINING CANINES**

A selection committee consisting of the canine handler, a supervisor and an outside subject matter expert (in canine programs) shall select any canine to be used in the canine program. The committee shall consider the prospective canine's ability to detect contraband and its ability to work effectively in a custody environment.

##### **528.4.1 TRAINING**

Before assignment in this facility, each canine team shall be trained and certified to meet the certification standards established by the office-approved and recognized canine association.

The Training Coordinator or the authorized designee shall be responsible for scheduling periodic training as recommended by the certification standards adopted by the recognized canine association for all custody personnel. This shall be done to familiarize custody personnel with how to conduct themselves in the presence of office canines.

##### **528.4.2 CONTINUED TRAINING**

Each canine team shall be recertified to current standards or other recognized and approved certification standards on an annual basis. Additional training considerations are as follows:

- (a) Canine teams shall receive training as defined in the current contract with the office's canine training provider.
- (b) Canine handlers are encouraged to engage in additional training with the approval of the canine program supervisor.
- (c) To ensure that all training is consistent, no handler, trainer or outside vendor is authorized to train to a standard that is contrary to the policies of the San Luis Obispo County Sheriff's Office.
- (d) All canine training shall be conducted while on-duty unless otherwise approved by the canine program supervisor.

##### **528.4.3 FAILURE TO SUCCESSFULLY COMPLETE TRAINING**

Any canine team failing certification shall not be deployed in this facility until certification is achieved. Any canine team failing annual recertification shall be immediately removed from



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service. When practicable, pending successful recertification, the canine handler shall be temporarily reassigned to other duties.

#### 528.4.4 TRAINING RECORDS

A training record for each canine will be created and maintained in the canine handler's training file. The record shall be reviewed and initialed monthly by the supervisor in charge of the canine program. A copy of all training shall be forwarded to the Training Coordinator and retained pursuant to the San Luis Obispo County Sheriff's Office's established records retention schedules.

#### **528.5 SELECTION AND TRAINING FOR CANINE HANDLERS**

The position of canine handler is a special assignment that requires a specific set of skills, experience, training and temperament, in addition to those of a line staff member. A canine handler shall have:

- (a) Three years experience as a deputy in the San Luis Obispo County Sheriff's Office.
- (b) Performance evaluations of satisfactory or better.
- (c) Demonstrated ability to communicate well with incarcerated persons.
- (d) Demonstrated ability to perform ancillary tasks with a minimum of supervision.
- (e) Reside in an adequately fenced, single-family residence (e.g., minimum 5-foot high fence with locking gates).
- (f) Have a garage that can be secured and will accommodate a canine unit.
- (g) Live within 30 minutes travel time from the San Luis Obispo limits.
- (h) Agree to be assigned to the position for a minimum of three years.

The canine handler shall be chosen from the applicant pool through an oral board selection. If possible, the oral board shall be comprised of one person who is a member of an outside organization that has a canine program, and two members who shall be chosen by the Facility Manager.

The canine handler shall receive all necessary training with his/her canine before being utilized in this facility. All training records for canine handlers will be maintained by the Training Coordinator.

#### **528.6 MEDICAL CARE OF THE CANINE**

All medical attention shall be rendered by the designated canine veterinarian, except during an emergency as provided in this policy.

##### 528.6.1 NON-EMERGENCY MEDICAL CARE

- (a) Non-emergency medical care will be coordinated through the canine unit coordinator.
- (b) Any indication that a canine is not in good physical condition shall be reported to the canine unit coordinator as soon as practical.
- (c) All records of medical treatment shall be maintained in the canine handler's personnel file.

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##### **528.6.2 EMERGENCY MEDICAL CARE**

The handler shall notify the canine unit coordinator as soon as reasonably practical when emergency medical care for the canine is required. Depending on the severity of the injury or illness, the canine shall either be treated by the designated veterinarian or transported to a designated emergency medical facility for treatment. If the handler and dog are out of the area, the handler may use the nearest available veterinarian.

##### **528.6.3 REPORTING CANINE INJURIES**

- (a) In the event that a canine is injured, the injury will be immediately reported to the Watch Commander who will notify the canine unit coordinator.
- (b) Medical care for any injured canine shall follow the protocol established in § 318.6 et seq.
- (c) The injury will be documented on a sheriff's memorandum and forwarded to the Sheriff via the chain of command. A copy will also be sent to the canine unit coordinator. The memorandum should contain the circumstances surrounding the incident, medical treatment and veterinary recommendations.

##### **528.7 REQUESTS FOR ASSISTANCE FROM OTHER AGENCIES**

The canine unit coordinator or the on-duty supervisor must approve all requests for canine assistance from outside agencies, subject to the following provisions:

- (a) Canine teams shall not be used to perform any assignment that is not consistent with this policy.
- (b) The handler has the ultimate authority to decide whether the canine will be used for any specific assignment.
- (c) Canine teams should not be called into service when off-duty or used outside the jurisdiction of the Office, unless authorized by the canine unit coordinator or on-duty supervisor.
- (d) It shall be the responsibility of the canine handler to coordinate with outside agency personnel in order to minimize the risk of unintended injury.

##### **528.8 REQUESTS FOR PUBLIC DEMONSTRATIONS**

- (a) All public requests for a canine team shall be approved by the Canine Unit Commander prior to making any commitment.
- (b) Handlers shall not demonstrate any apprehension work to the public unless authorized to do so by the Canine Unit Commander.

##### **528.9 CANINE HANDLER RESPONSIBILITIES**

###### **528.9.1 AVAILABILITY**

The handler shall be available for call-out under conditions specified by the canine unit coordinator.

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##### 528.9.2 CARE FOR THE CANINE AND EQUIPMENT

The canine handler shall be responsible for the health and welfare of the canine and shall ensure that the canine receives proper nutrition, grooming, training, medical care, attention, and living conditions. In addition, the handler will be responsible for:

- (a) Ensuring the canine is not exposed to any foreseeable and unreasonable risk of harm, unless required by a particular application.
- (b) Maintaining all office equipment under their control in a clean and serviceable condition.
- (c) Permitting the canine program supervisor to conduct spontaneous on-site inspections of any area of the residence that is used for the canine.
- (d) Reporting any changes in the living status of the handler that may affect the lodging or environment of the canine to the canine program supervisor as soon as possible.
- (e) Keeping the canine in a kennel provided by the Office when off-duty and at the home of the handler. When a canine is kenneled at the handler's home, the gate shall be secured with a lock. When off-duty, the canines may be let out of the kennel while under the direct control of the handler.
- (f) Permitting the canine to socialize in the home with the handler's family under the direct supervision of the handler.
- (g) Ensuring that under no circumstances will the canine be lodged at another location unless approved by the canine program supervisor.
- (h) Involving their canine in any activity or conduct when off-duty only with approval in advance by the canine program supervisor.
- (i) Notifying the canine program supervisor whenever the canine handler anticipates taking a vacation or an extended number of days off and it may be necessary to temporarily relocate the canine. In those situations, the handler shall give reasonable notice to their supervisor so that appropriate arrangements can be made.
- (j) Maintaining a daily record that contains the training, care of the dog, and significant events, such as public appearances, and when the canine is utilized for searches.

##### 528.9.3 CANINES IN PUBLIC AREAS

- (a) All canines shall be kept on a leash when in areas that allow access to the public. Exceptions would include specific operations for which the canines are trained.
- (b) If a canine unit is left unattended, all windows and doors shall be secured in such a manner as to prevent unauthorized access to the dog. The handler shall also ensure that an unattended unit remains habitable for the canine.

##### 528.9.4 HANDLER COMPENSATION

The canine handler shall be compensated for time spent in the care, feeding, grooming, and other needs of the canine in accordance with the Fair Labor Standards Act, and according to the terms of the employee's labor agreement (29 USC § 207).

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#### **528.10 CONTROLLED SUBSTANCE TRAINING AIDS**

Controlled substance training aids are required to effectively train and maintain drug detecting dogs. Further, controlled substances can also be an effective training aid during training sessions for law enforcement personnel and the public. Health & Safety Code § 11367.5 provides that any Sheriff, Chief Of Police, the Chief of the Bureau of Controlled Substance Enforcement, or the Commissioner of the California Highway Patrol, or a designee thereof may, in his or her discretion, provide controlled substances in his or her possession for training purposes:

- (a) To any duly authorized peace officer or civilian drug detection canine trainer working under the direction of a law enforcement agency.
- (b) Provided the controlled substances are no longer needed as criminal evidence.
- (c) Provided the person receiving the controlled substances, if required by the Drug Enforcement Administration, possesses a current and valid Drug Enforcement Administration registration that specifically authorizes the recipient to possess controlled substances while providing substance abuse training to law enforcement or the community or while providing canine drug detection training.

## Reporting In-Custody Deaths

### 530.1 PURPOSE AND SCOPE

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

#### 530.1.1 DEFINITIONS

Definitions related to this policy include:

**In-custody death** - The death of any person, for whatever reason (natural, suicide, homicide, accident), who is in the process of being booked or is incarcerated at any facility of this office.

### 530.2 POLICY

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

### 530.3 MANDATORY REPORTING

All in-custody deaths shall be reported within 10 days of the death to the state Attorney General's office, in accordance with reporting guidelines and statutory requirements (Government Code § 12525).

If the decedent is a boarder for another agency, the Facility Manager shall notify that agency so that agency will assume responsibility for the notification of the decedent's family.

Pursuant to Article 37 of the Vienna Convention on Consular Relations 1963, in the case of the death of a foreign national, telephonic notification to the appropriate consulate post should be made without unreasonable delay and confirmatory written notification shall be made within 72 hours of the death to the appropriate consulate post. The notification shall include the incarcerated person's name, identification number, date and time of death, and the attending physician's name.

In the event that a juvenile dies while in custody, the Facility Manager or the authorized designee shall notify the court of jurisdiction and the juvenile offender's parent or guardian (15 CCR 1047). A copy of the report provided to the state Attorney General's office shall be submitted to the Board of State and Community Corrections within 10 days of the death (15 CCR 1046(b)(1)).

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

### 530.4 PROCEDURE

Upon determining that a death of any person has occurred while in the custody of this office, the Shift Commander is responsible for ensuring that the Sheriff and all appropriate investigative authorities, including the Coroner, are notified without delay and all written reports are completed.

The Shift Commander shall also promptly notify the Facility Manager and make any other notifications required by policy or direction. The Facility Manager shall observe all pertinent laws and allow appropriate investigating agencies full access to all facts surrounding the death.

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The Office shall establish policies and procedures for the investigation of any in-custody death.

The decedent's personal belongings shall be disposed of in a responsible and legal manner. All property and records shall be retained according to established records retention schedules.

The individual designated by the decedent shall be notified of all pertinent information as required by law.

During an investigation, all inquiries regarding the death shall be referred to the Public Information Officer. Deputies shall not make a public comment.

#### **530.5 IN-CUSTODY DEATH REVIEW**

The Sheriff is responsible for establishing a team of qualified staff to conduct an administrative review of every in-custody death. At a minimum, the review team should include the following (15 CCR 1046(a); 15 CCR 1030):

- (a) Sheriff and/or the Facility Manager
- (b) Jail Operations Lieutenant
- (c) Professional Standards Unit designee
- (d) Classification Correctional Sergeant
- (e) County Counsel
- (f) District Attorney
- (g) Investigative staff
- (h) Responsible Physician, Chief Medical Officer, qualified health care professionals, supervisors, or other staff who are relevant to the incident

The in-custody death review should be initiated as soon as practicable but no later than 30 days after the incident. The team should review the appropriateness of clinical care, determine whether changes to policies, procedures, or practices are warranted, and identify issues that require further study (15 CCR 1046(a)).

## Staff and Incarcerated Person Contact

### 532.1 PURPOSE AND SCOPE

Interaction with incarcerated persons allows for continual assessment of the safety and security of the facility and the health and welfare of the incarcerated persons. 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 incarcerated persons, and is intended to promote high ethical standards of honesty, integrity and impartiality as well as increase facility safety, discipline and morale.

Violation of this policy may result in disciplinary action up to and including dismissal. Members who seek information or clarification about the interpretation of this policy are encouraged to promptly contact their supervisor.

### 532.2 POLICY

The Facility Manager shall ensure that incarcerated persons have adequate ways to communicate with staff and that the staff communicates and interacts with incarcerated persons in a timely and professional manner.

### 532.3 GENERAL CONTACT GUIDELINES

Members are encouraged to interact with the incarcerated persons 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 incarcerated persons. Members shall address incarcerated persons in a civil manner. The use of profanity or derogatory comments, including any based on race, sex, age, personal appearance or sexual identity, is strictly prohibited.

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

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

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

### 532.4 ANTI-FRATERNIZATION

Personal or other interaction not pursuant to official duties between facility staff with current incarcerated persons, incarcerated persons who have been discharged within the previous year,

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their family members or known associates have the potential to create conflicts of interest and security risks in the work environment.

Members shall not knowingly maintain a personal or unofficial business relationship with any persons described in this section unless written permission is received from the Facility Manager.

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 incarcerated person for reasons other than an official visit without reporting the visit.
- (j) Providing an incarcerated person with the staff member's personal contact information, including social media accounts.

#### **532.4.1 EXCEPTIONS**

The Facility Manager 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 Facility Manager should give consideration to factors including, but not limited to:

- Whether a relationship existed prior to the incarceration of the person.
- Whether the relationship would undermine security and order in the facility and the integrity of the supervision process.
- Whether the relationship would be detrimental to the image and efficient operation of the facility.
- Whether the relationship would interfere with the proper discharge of, or impair impartiality and independence of, judgment in the performance of duty.

#### **532.5 REPORTING**

Members shall promptly report all attempts by incarcerated persons to initiate sexual acts or any salacious conversations, and forward any correspondence from an incarcerated person or former incarcerated person to the Facility Manager or the authorized designee.

Members shall report all attempts by incarcerated persons to intimidate or instill feelings of fear to their supervisor.

Members shall promptly notify their immediate supervisor in writing if:



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- A family member or close associate has been incarcerated or committed to the custody of the facility.
- The member is involved in a personal or family relationship with a current incarcerated person or with a person who has been discharged within the previous year.

# Transportation of Incarcerated Persons Outside the Secure Facility

## 534.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for the transportation of incarcerated persons outside this facility and to ensure that the staff assigned to transportation duties is qualified and adequately trained.

## 534.2 POLICY

It is the policy of the San Luis Obispo County Sheriff's Office to provide safe, secure and humane transportation for all incarcerated persons and other persons as required by law.

This office shall transfer all incarcerated persons 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 incarcerated persons and costs related to transfers to facilities and jurisdictions.

## 534.3 PROCEDURES

Only staff members who have completed office-approved training on transportation should be assigned transportation duty. All staff members who operate transportation vehicles shall hold a valid license for the type of vehicle being operated. Only members who are trained in the following shall conduct outside transports: baton, handcuffs, gun, oleoresin capsicum and taser. All members conducting transports outside of the secure confine of the jail shall be carrying all of the items previously mentioned.

Any member who transports an incarcerated person outside the secure confines of this facility is responsible for:

- (a) Obtaining all necessary paperwork for the incarcerated person being transported (e.g., Booking Report, medical/dental records, commitment documents).
- (b) Staff completing transport should address the following items:
  1. Type of restraints to be used on the incarcerated persons being transported.
  2. The routes, including alternate routes, to be taken during the transportation assignment. Routes should be selected with security for the community in mind.
  3. Emergency response procedures in the event of a collision, breakdown of a transportation vehicle, or other unforeseen event.
- (c) Ensuring that all incarcerated persons are thoroughly searched and appropriate restraints are properly applied.
  1. Incarcerated persons who are known to be pregnant will not be handcuffed behind their backs or placed in leg restraints/irons or waist restraints/chains while being transported (see the Use of Restraints Policy).

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2. Incarcerated persons who are transported to a hospital for the purpose of childbirth shall be transported in the least restrictive way possible and in accordance with Penal Code § 3407. The incarcerated person shall not be shackled to anyone else during transport (see 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 incarcerated person is placed inside, and again after removing the incarcerated person from the transporting vehicle.
  - (f) Incarcerated persons will be required to wear seatbelts. No transportation vehicle shall have more incarcerated persons than operational seat belts. Correctional deputies will advise incarcerated persons to put on seat belts prior to departing any location.
  - (g) If an incarcerated person is restrained by handcuffs and cannot put on a seatbelt, correctional deputies will place seatbelt on the incarcerated person prior to departing any location
  - (h) Call Control 20, (Dispatch), and get assigned an Edward Number.
  - (i) Before leaving the jail, radio Control 20 with Edward Number, departure location, gender of the incarcerated person being transported, beginning mileage and destination location.
  - (j) Radio shall remain on "blue" channel. Advise Control 20 if you need assistance.

#### 534.3.1 GUIDELINES FOR GUARDING INCARCERATED PERSONS AT THE HOSPITAL

The incarcerated person is to be secured to the bed by an ankle chain, (one cuff on the incarcerated person's ankle and the other cuff to the bed). If an ankle chain cannot be applied, the incarcerated person will be secured to the bed by the use of handcuffs, (one cuff on the wrist and the other cuff to the bed).

If medical reasons prohibit the use of restraints, the officer shall notify the jail sergeant.

Officers shall have in their possession a handcuff key.

Officers shall check restraints frequently.

Officers shall remove all items within incarcerated person's area of control that present a danger to the incarcerated person or to hospital staff, e.g., an item that may be used as a weapon.

If the incarcerated person needs to leave the hospital room, the officer shall notify the jail sergeant prior to the movement and then again when the incarcerated person returns to the hospital room. The incarcerated person will be secured to the wheelchair, gurney, etc., by the use of ankle chains or handcuffs. If the incarcerated person is to walk, the incarcerated person will be secured with their hands cuffed behind their back. Pregnant females will have their hands cuffed in front. If medical reasons prohibit the use of restraints, the officer shall notify the jail sergeant.

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Officers shall remain with the incarcerated person at all times excluding medical procedures requiring the officer to adhere to hospital/professional protocol.

If medical procedures require the officer to be removed from the incarcerated person, the officer shall notify the jail sergeant and take a position to monitor all exits available to the incarcerated person. If a medical procedure prohibits metal restraints, when practical, plastic restraints should be utilized. The Correctional Deputy should contact the Jail Sergeant for clarification or guidance if necessary.

Officers shall report to the jail sergeant any change in the incarcerated person's room assignment or significant changes in the incarcerated person's medical status.

Offices shall not allow the incarcerated person to have visitors unless approved by the jail sergeant.

Officers shall not allow the incarcerated person access to items of contraband, e.g., cigarettes, matches, gifts. Contraband is any item not given to the incarcerated person by the Sheriff's Office or hospital staff.

Officers shall not allow the incarcerated person to make or receive phone calls unless approved by the jail sergeant.

Incarcerated persons shall not be given metal utensils for meals. All utensils must be accounted for, before and after each meal.

Incarcerated persons shall be bathed by hospital staff utilizing the facilities approved bathing wipes. Incarcerated persons shall be fully restrained in leg irons, waist chains and truss chain during this time, unless the incarcerated person is pregnant. Should the incarcerated person need a standard shower for medical purposes, the on-duty Correctional Sergeant will be notified in order to develop a plan for the utilization of restraints based on the incarcerated persons medical needs, mobility impairments, etc.

#### **534.3.2 COURT HOLDING**

Court Holding, Station 26, will routinely hold adult incarcerated persons during normal working hours of the judicial courts. Court Holding will not house or hold, either secured or unsecured, any juvenile offenders, unless emergency or exigent circumstances exist. Should a circumstance arise which a juvenile is held at Court Holding, the Correctional Sergeant will document the reasons for the placement and notify the Correctional Lieutenant as soon as is feasible. The Correctional Sergeant will initiate a *Secure Detention of Minors Log* and the Correctional Lieutenant will make the appropriate notification to the Board of State and Community Corrections.

Nothing in this policy will exclude the Court Holding Facility from being utilized as temporary holding during natural disasters, civil unrest or other declared emergencies.

#### **534.4 TRAINING**

The Training Coordinator shall ensure that all employees charged with transportation duties receive training appropriate for the assignment.

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Documentation of all training presented shall be retained in the employee's training file in accordance with established records retention schedules. As outlined in the training manual, the trainee should be given the opportunity to complete a transportation run. They will demonstrate all security measures, safe driving skills and proper radio operation.

## Safety and Sobering Cells

### 536.1 PURPOSE AND SCOPE

This policy establishes the requirement for placing incarcerated persons into and the continued placement of incarcerated persons in safety cells or sobering cells.

#### 536.1.1 DEFINITIONS

Definitions related to this policy include:

**Safety cell** - An enhanced protective housing designed to minimize the risk of injury or destruction of property used for incarcerated persons who display behavior that reveals intent to cause physical harm to themselves or others or to destroy property, or who are in need of a separate cell for any reason, until suitable housing is available.

**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 incarcerated persons who are a threat to their own safety or the safety of others as a result of being intoxicated from any substance, and who require a protected environment to prevent injury or victimization by other incarcerated persons.

**Jail Intoxication Assessment Report** - Documents the distinction of several levels of intoxication to make appropriate decisions related to the intake and housing of inebriated arrestees.

### 536.2 POLICY

This facility will employ the use of safety and sobering cells to protect incarcerated persons from injury or to prevent the destruction of property by an incarcerated person in accordance with applicable law.

A sobering or safety cell shall not be used as punishment or as a substitute for treatment. The Facility Manager or the authorized designee shall review this policy annually with the Responsible Physician.

### 536.3 SAFETY CELL PROCEDURES

The following guidelines apply when placing any incarcerated person in a safety cell (15 CCR 1055):

Placement of an incarcerated person into a safety cell requires approval of the Correctional Sergeant, a Correctional Nurse Supervisor, Correctional Registered Nurse, Physician, Psychiatrist or Licensed Therapist.

- (a) Incarcerated persons placed in the safety cell who are in custody on a citable offense must either be cleared by a Qualified Mental Health Professional and cite released, or evaluated by the Qualified Mental Health Professional for possible admission to the PHF; no later than 48 hours after placement..

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- (b) If after 48 hours the incarcerated person is still in the safety cell, the incarcerated person must be evaluated by Qualified Mental Health Professional and **one** of the following must occur:
- (c) The incarcerated person must be transported to the hospital for treatment of a medical condition per PC4011.5.
- (d) The incarcerated person must be placed on a hold per PC4011.6 or W&I 5150, and transferred to a Psychiatric Health Facility, (PHF) for admission. Psychiatric Health Facility Staff will determine whether medical clearance at a hospital emergency department is required.
- (e) The incarcerated person must be cleared for housing.
- (f) A mental health assessment shall be conducted by a Qualified Mental Health Professional within 12 hours of an incarcerated person's placement in the safety cell. Continued assessment of the incarcerated person in the safety cell shall be conducted by a qualified mental health care professional and shall occur at least every 12 hours thereafter. The mental health professional's recommendations shall be documented.
- (g) A complete medical evaluation of the incarcerated person in the safety cell shall occur by either a Correctional Nurse Supervisor, a Correctional Registered Nurse or a Physician within a maximum of 6 hours of placement. Continued assessment of the incarcerated person in the safety cell shall be conducted by a qualified health care professional and shall occur at least every 6 hours thereafter. Medical assessments shall be documented.
- (h) The Correctional Sergeant, either a Correctional Nurse Supervisor, a Correctional Registered Nurse or a Physician, and when on duty a Qualified Mental Health Professional shall review the appropriateness for continued retention in the safety cell at least every four hours. The reason for continued retention or removal from the safety cell shall be documented on the safety cell log. The Correctional Sergeant will coordinate the retention check times with staff listed above. The Correctional Sergeant will document these checks on both the Correctional Sergeants' Log and the incarcerated person's Special Observation Log
- (i) Incarcerated persons will be provided meals during each meal period. The incarcerated persons will be monitored while eating the meals. Incarcerated persons shall be given ample time to complete their meals. All meals provided to inmates in safety cells will be documented on the safety cell log.
- (j) Incarcerated persons in safety cells shall be given the opportunity to have fluids (water, juices) at least once every two hours. Correctional deputies shall provide the fluids in paper cups. The incarcerated persons shall be given sufficient time to drink the fluids prior to the cup being removed. Each time an incarcerated person is provided the opportunity to drink fluids, it will be documented on the safety cell log.
- (k) Incarcerated persons should be permitted to be provided a safety gown and/or safety blanket, except in cases where the incarcerated person has demonstrated that clothing articles may pose a risk to the incarcerated person's safety or the facility. In these cases, the reasons for not providing clothing shall be documented on the Special Observation log.

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- (l) A safety check consisting of direct visual observation that is sufficient to assess the incarcerated person's well-being and behavior shall occur once every 15 minutes. Each safety check of the incarcerated person shall be documented. Supervisors shall inspect the logs for completeness every four hours and document this action on the safety cell log.
- (m) A Special Observation log shall be initiated every time an incarcerated person is placed into the safety cell and should be maintained for the entire time the incarcerated person is housed in the cell. Cell logs will be retained in accordance with established office retention schedules.

#### **536.4 SOBERING CELL PROCEDURES**

The following guidelines apply when temporarily placing any incarcerated person in a sobering cell (15 CCR 1056):

- (a) A Sobering Cell Log shall be initiated every time an incarcerated person is placed into a sobering cell. The report shall be completely filled out and maintained for the entire time the incarcerated person is housed in the cell. Cell reports will be retained in accordance with established office retention schedules.
- (b) If a Sobering Cell Log is initiated, the incarcerated person shall be given a non-tear blanket.
- (c) A safety check consisting of direct visual observation that is sufficient to assess the incarcerated person's well-being and behavior shall occur at least once every 30 minutes. Each visual observation of the incarcerated person by staff shall be documented. Supervisors shall check the logs for completeness every six hours and document this action on the sobering cell log.
- (d) Qualified health care professionals shall assess and document on the Sobering Cell Log, the medical condition of the inmate in the sobering cell at least every six hours in accordance with the Office Detoxification and Withdrawal Policy. Only incarcerated persons who continue to need the protective housing of a sobering cell will continue to be detained in such housing over 6 hours. A special observation log will be started with direct observation checks being conducted no less than every 15 minutes.
- (e) Incarcerated persons 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.
- (f) Incarcerated persons will be detained in separate sobering cells by gender.



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## Control and Restraint Enclosures

### 537.1 PURPOSE AND SCOPE

The purpose of this policy is to establish procedures for use of the Control and Restraint Enclosures. The enclosures are designed to be used as a classification tool for the purpose of safe movement of special management incarcerated persons and the temporary restraint of incarcerated persons during disturbances. These procedures establish guidelines and limitations of use for the intent of maintaining the safety and security of the San Luis Obispo County Jail.

#### 537.1.1 DEFINITIONS

**Control Enclosure** - A large enclosure that separates the showers and phones from the general dayroom area.

**Restraint Enclosure** - A standing securable enclosure measuring approximately two feet by three feet and seven feet tall that is secured to the ground.

#### 537.1.2 PROCEDURE

Control and Restraint Enclosures are classification tools for safe movement of incarcerated persons to maintain the safety and security of incarcerated persons, staff and the facility. Control and Restraint Enclosures will be used for the following:

- (a) Access to services for special management incarcerated persons.
- (b) A less restrictive means of a restraint device.
- (c) Temporary separation of incarcerated persons during a major disturbance.

Limitations of use include:

- (a) Incarcerated persons are not to be secured in the enclosures for a period exceeding 30 minutes.
- (b) Enclosures will remain unsecured unless being used for the above reasons.
- (c) Enclosures will not be used for disciplinary reasons.
- (d) Enclosures will not be used as a temporary holding cell or alternative housing.

## Biological Samples

### 538.1 PURPOSE AND SCOPE

This policy provides guidelines for the collection of biological samples from those incarcerated persons required to provide samples upon conviction and/or arrest for certain offenses. This policy does not apply to biological samples collected at a crime scene or taken from a person in conjunction with a criminal investigation. Nor does it apply to biological samples collected from those required to register, for example, as sex offenders.

### 538.2 POLICY

The San Luis Obispo County Sheriff's Office will assist in the expeditious collection of required biological samples from arrestees and offenders in accordance with the laws of this state and with as little reliance on force as practicable.

### 538.3 PERSONS SUBJECT TO BIOLOGICAL SAMPLE COLLECTION

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

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

### 538.4 PROCEDURE

When an incarcerated person is required to provide a biological sample, a trained employee shall attempt to obtain the sample in accordance with this policy.

#### 538.4.1 COLLECTION

The following steps should be taken to collect a sample:

- (a) Verify that the incarcerated person is required to provide a sample pursuant to Penal Code § 296 and Penal Code § 296.1.
- (b) Verify that a biological sample has not been previously collected from the offender by querying the individual's criminal history record for a DNA collection flag or, during regular business hours, calling the California Department of Justice (DOJ) designated DNA laboratory. There is no need to obtain a biological sample if one has been previously obtained.
- (c) Use the designated collection kit provided by the California DOJ to perform the collection and take steps to avoid cross contamination.

### 538.5 CALCULATED USE OF FORCE TO OBTAIN SAMPLES

If an incarcerated person refuses to cooperate with the sample collection process, deputies should attempt to identify the reason for refusal and seek voluntary compliance without resorting to using force. Force will not be used in the collection of samples except as authorized by court order or

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approval of legal counsel and only with the approval of the Shift Commander. Methods to consider when seeking voluntary compliance include contacting:

- (a) The incarcerated person's parole or probation officer when applicable.
- (b) The prosecuting attorney to seek additional charges against the incarcerated person for failure to comply or to otherwise bring the refusal before a judge.
- (c) The judge at the incarcerated person's next court appearance.
- (d) The incarcerated person's attorney.
- (e) A chaplain.
- (f) A supervisor who may be able to authorize disciplinary actions to compel compliance, if any such actions are available.

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

#### **538.5.1 VIDEO RECORDING**

A video recording should be made any time force is used to obtain a biological sample. The recording should document all staff participating in the process, in addition to the methods and all force used during the collection. The recording should be part of the investigation file, if any, or otherwise retained in accordance with the office's established records retention schedule.

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

#### **538.6 LEGAL MANDATES AND RELEVANT LAWS**

California law provides for the following:

##### **538.6.1 DOCUMENTATION RELATED TO FORCE**

The Shift Commander or the authorized designee on-duty shall prepare prior written authorization for the use of any force (15 CCR 1059).

The written authorization shall include information that the subject was asked to provide the requisite sample and refused, as well as any related court order authorizing the force.

##### **538.6.2 BLOOD SAMPLES**

A blood sample should only be obtained under this policy when:

- (a) The California DOJ requests a blood sample and the subject consents, or
- (b) A court orders a blood sample following a refusal.

The withdrawal of blood may only be performed in a medically approved manner by health care providers trained and qualified to draw blood. A California DOJ collection kit shall be used for this purpose (Penal Code § 298(a); Penal Code § 298(b)(2)).

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##### 538.6.3 STATE MANDATES

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

## End of Term Release

### 540.1 PURPOSE AND SCOPE

The purpose of this policy is to establish and maintain procedures governing the end of term release of incarcerated persons to ensure that incarcerated persons are not released in error. (15 CCR 1029).

### 540.2 POLICY

It will be the policy of the San Luis Obispo County Sheriff's Office to provide for the timely, efficient, and legal release of incarcerated persons.

### 540.3 RELEASE PROCEDURE

Incarcerated persons who have reached the end of their sentenced term or who are ordered released by the court will be scheduled for release at staggered times on their release date to avoid congestion in the release area. Incarcerated persons scheduled for release shall be escorted by the staff to the Intake Release Center to begin the release procedure.

The Office, to the extent reasonably practicable, will not release an inmate in severe weather in such a manner as to endanger the incarcerated person's health, safety or well-being. The incarcerated person may be offered a safe mode of transportation, if available, to the closest place of safety or the opportunity to remain in a public area of the facility until the inclement weather passes.

The Correctional Sergeant, releasing correctional deputy and Correctional Technician shall complete the release workflow in ATIMS.

Incarcerated persons shall not be released or moved during incarcerated person count, change of shift or at any time that would pose a potential safety threat or disrupt the orderly operation of the facility.

All incarcerated persons must be positively identified by the staff prior to being released from the facility. Incarcerated person identities should be verified using intake records bearing the incarcerated person's name, photograph and facility identification number or single digit fingerprint match system, if available.

Before any incarcerated person may be released, the following conditions must be met:

- (a) The identity of the incarcerated person has been verified.
- (b) All required documents for release is present. The staff shall review the active incarcerated person file to verify the validity of the documents authorizing the release. The file should also be reviewed for other release-related or pending matters, including:
  1. Verifying calculations and release-date adjustments for good time.
  2. Any pending arrangements for follow-up, such as medications needed, appointments or referral to community or social resources.

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3. Unresolved grievances, damage claims or lost property that can be settled when the incarcerated person is out of custody.
  - (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 incarcerated person, the staff shall notify the agency that the incarcerated person is available for release.
  - (d) If an incarcerated person has known mental health concerns, the incarcerated person shall be evaluated by a qualified health care professional and medically authorized for release. To the extent reasonably practicable, individuals who have been determined to be severely mentally ill should be released during business hours to facilitate their ability to receive services immediately after release.
  - (e) All personal property shall be returned to the incarcerated person during the release process. The incarcerated person must acknowledge receiving their property by signed receipt. Any discrepancies shall be promptly reported to the Correctional Sergeant.
  - (f) All facility property must be returned by the incarcerated person. Any missing or damaged facility property should be documented and promptly reported to the Correctional Sergeant. The incarcerated person shall remain in custody until the Correctional Sergeant determines whether additional criminal charges should be filed against the incarcerated person for the damage..
  - (g) A forwarding address for the incarcerated person should be on file and verified with the incarcerated person for the return of mail.
  - (h) 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) Incarcerated persons shall have access to at least three telephone calls to plan for a safe and successful release (Penal Code § 4024.5)
  - (j) The inmate shall not be released during non-daylight hours unless they have transportation on site and the transporting person has checked in with a Correctional Technician to verify which inmate they will be picking up.
  - (k) Release standards, release processes, and release schedules are available to an incarcerated person on housing kiosks and tablets (Penal Code § 4024.5)

The facility count shall be updated accordingly after the incarcerated person's release. The Correctional Technician shall ensure all release documents are complete and properly signed by the incarcerated person and the staff where required.

#### **540.3.1 DISCHARGE OF INCARCERATED PERSONS WITH MENTAL ILLNESS OR SUBSTANCE ADDICTION**

Incarcerated persons who are eligible for release and suffer from mental illness or substance addiction may be offered to stay in the facility for up to 16 additional hours or until normal business hours, whichever is shorter, in order for the incarcerated person to be discharged to a

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treatment center or be discharged during daylight hours. The incarcerated person may revoke the incarcerated person's consent and be released as soon as possible and practicable (Penal Code § 4024).

#### 540.3.2 DISCHARGE OF INCARCERATED PERSONS CONVICTED OF FELONIES

Incarcerated persons who have been convicted of a felony and meet the conditions in Penal Code § 4852.01 shall be advised of the right to petition for certificate of rehabilitation and pardon prior to release. The Records and Warrants shall inform the incarcerated person in writing of the incarcerated person's right to petition, and of the procedures for filing a petition and obtaining the certificate (Penal Code § 4852.21).

#### 540.3.3 TRANSFERS TO IMMIGRATION AUTHORITIES

Members shall not transfer an individual to immigration authorities unless one of the following circumstances exist (Government Code § 7282.5; Government Code § 7284.6):

- (a) Transfer is authorized by a judicial warrant or judicial probable cause determination.
- (b) The individual has been convicted of an offense as identified in Government Code § 7282.5(a).
- (c) The individual is a current registrant on the California Sex and Arson Registry.
- (d) The individual is identified by the U.S. Department of Homeland Security's Immigration and Customs Enforcement as the subject of an outstanding federal felony arrest warrant.

#### 540.3.4 DISCHARGE OF SEX OFFENDER REGISTRANTS

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

#### 540.3.5 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.

## Immigration Status

### 541.1 PURPOSE AND SCOPE

It is the purpose of this Office to establish guidelines for restrictions on detaining a person on the basis of an immigration hold or detainer and to ensure full compliance with the California Fair Values Act., Trust and Truth Act. No person shall be held solely on the basis of their immigration status. The immigration status of a person and lack of immigration documentation, should have no bearing on the manner in which Sheriff's Office personnel execute their duties.

### 541.2 DEFINITIONS

Definitions related to this policy include:

**Immigration and Customs Enforcement (ICE):** The US Department of Homeland Security's Immigration and Customs Enforcement Agency (ICE) has the primary responsibility to investigate and enforce federal immigration laws. This Office's personnel may assist ICE in the enforcement of federal immigration laws upon its specific request and in those situations where ICE initiated investigations have lead to the discovery of criminal violations of California law.

**Immigration Detainer:** Form I-247, issued by an authorized immigration officer, pursuant to Section 287.7 of Title 8 of the Code of Federal Regulation, that requests the Sheriff's Office to advise the authorized immigration officer prior to the release of that individual. The Sheriff's Office will not comply with this request unless it meets the criteria as listed below.

### 541.3 POLICY

An Immigration Detainer requests the Sheriff's Office to notify ICE, prior to release of an individual, in order for ICE to make arrangements to assume custody. The detainer request will be honored only within the following established guidelines:

- a. The existence of an Immigration Detainer does not affect an individual's ability to post bail or bond or to be released on their own recognizance.
- b. Immigration Detainers are not to be considered warrants and should be considered separate entities. Duly issued warrants will be honored in all cases.
- c. If an individual becomes release eligible, the Sheriff's Office will not detain the individual on the basis of an Immigration Detainer past his or her scheduled release date (*Maria Miranda-Olivares v Clackamas County*).

The Sheriff's Office will only respond to a request for notification or transfer of an incarcerated person if the person has been convicted of a Trust Act crime, which includes a serious or violent felony, a felony punishable by imprisonment in state prison, a misdemeanor as part of a "wobbler" within the past five years, or a felony for one of the numerous offenses outlined in Government Code section 7282.5(a)(3) within the last 15 years.



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There will be no cooperation with immigration authorizes for individuals arrested, detained, or convicted of misdemeanors that were previously felonies or wobblers prior to the passage of Proposition 47.

The Sheriff's Office will not transfer an individual to immigration unless authorized by a judicial warrant, or a judicial probably cause determination, or in accordance with Section 7282.5.

#### **541.4 NOTIFICATION**

The Sheriff's Office will not provide information regarding a person's release date or respond to requests for notification by providing release dates or other information, unless such information is available to the public or is in response to a notification request from immigration authorities in accordance with Section 7282.5. Nor will personal information about an individual, including but not limited to the individual's home address or work address,

## Over-Detention and Inadvertent Releases

### 542.1 PURPOSE AND SCOPE

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

#### 542.1.1 DEFINITIONS

Definitions related to this policy include:

**Inadvertent release** - Any instance of an incarcerated person being mistakenly released.

**Over-detention** - Any instance of an incarcerated person being mistakenly detained beyond their scheduled release date.

### 542.2 POLICY

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

### 542.3 OVER-DETENTION

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

The Correctional Sergeant should direct the jail booking staff to immediately conduct an investigation to determine the correct release date of the incarcerated person and to report the findings to the Correctional Sergeant.

Incarcerated persons who are found to be over-detained shall be processed for immediate release in accordance with the End of Term Release Policy. The Correctional Sergeant shall notify the Correctional Lieutenant who shall ensure that the Facility Manager is notified, an entry is made to the daily activity log and that a report is completed.

#### 542.3.1 OVER-DETENTION GRIEVANCES

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

The Correctional Sergeant receiving a grievance regarding an over-detention should direct the jail booking staff to immediately conduct an investigation to determine the correct release date of the incarcerated person and to report the findings to the Correctional Sergeant.

If the Correctional Sergeant decides not to release the incarcerated person, the Correctional Sergeant should ensure the incarcerated person receives a grievance hearing within five days of the grievance submission. The hearing documentation should reflect efforts made to investigate the allegation (see the Inmate Grievances Policy).

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#### **542.4 INADVERTENT RELEASE**

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

##### **542.4.1 INADVERTENT RELEASE INVESTIGATION**

The Correctional Sergeant should direct the jail booking staff to immediately conduct an investigation to determine the cause of the inadvertent release.

The Correctional Sergeant will coordinate a response based upon the seriousness of the threat the incarcerated person may pose to the community. The threat assessment should be based upon the incarcerated person's criminal history and the reason he/she is currently in custody, among other factors. As soon as practical, the Correctional Sergeant will notify the Correctional Lieutenant.

The Correctional Sergeant shall report all steps being taken to rectify the situation.

In the case of an inadvertent release, the Correctional Lieutenant should immediately notify the Facility Manager and ensure a report is completed. The Facility Manager 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.

##### **542.4.2 RETURNING THE INMATE TO CUSTODY**

When the incarcerated person is located and returned to the facility, the appropriate notifications should be made as soon as possible.

## **Chapter 6 - Due Process of Incarcerated Persons**

## Discipline

### 600.1 PURPOSE AND SCOPE

This policy addresses the fair and equitable application of incarcerated person rules and disciplinary actions for those who fail to comply (15 CCR 1081).

### 600.2 POLICY

It is the policy of this office to maintain written general categories of prohibited incarcerated person behavior that are clear, consistent, and uniformly applied. Written rules and guidelines will be made available to all incarcerated persons. They will include a process for resolving minor infractions and a hearing process for a more serious breach of incarcerated person rules. Criminal acts may be referred to the appropriate criminal agency.

### 600.3 DUE PROCESS

Incarcerated persons who are subject to discipline as a result of rule violations shall be afforded the procedural due process by the Sheriff that is established in the policies, procedures, and practices relating to incarcerated person discipline. All incarcerated persons will be made aware of the rules of conduct related to maintaining facility safety, security, and order, as well as clearly defined penalties for rule violations. Staff will not engage in arbitrary actions against incarcerated persons. All disciplinary actions will follow clearly established procedures. All disciplinary actions will be fairly and consistently applied (15 CCR 1081 et seq.).

The process for an incarcerated person accused of a major rule violation includes:

- (a) A fair hearing in which the Facility Manager or the authorized designee presents factual evidence supporting the rule violation and the disciplinary action.
- (b) Advance notice to the incarcerated person of the disciplinary hearing, to allow the incarcerated person time to prepare a defense.
- (c) An impartial hearing officer.
- (d) The limited right to call witnesses and/or present evidence on the person's behalf.
- (e) The appointment of an assistant or representative in cases where the incarcerated person may be incapable of self-representation.
- (f) A formal written decision that shows the evidence used by the hearing officer, the reasons for any actions, and an explanation of the appeal process.
- (g) Reasonable actions for violating rules that relate to the severity of the violation.
- (h) The opportunity to appeal the finding.

#### 600.3.1 RULES AND ACTIONS

The Facility Manager is responsible for ensuring that rules and actions are developed, distributed, reviewed annually, and revised as needed.

Incarcerated persons cannot be held accountable for rules of which they are unaware. However, it is impossible to define every possible prohibited act or rule violation that might be encountered in

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a detention facility. Therefore, a current list of recognized infractions that are generally prohibited are available in each housing unit and in the Jail Rule Book. All incarcerated persons, regardless of their housing unit, shall have access to these rules. For those individuals with limited literacy, unable to read English, and for persons with disabilities, provisions shall be made for staff to instruct them verbally or provide them with material in an understandable form (15 CCR 1080) (see the Handbook and Orientation Policy).

Disciplinary procedures governing incarcerated person rule violations should address rules, minor and major violations, criminal offenses, disciplinary reports, prehearing detention, and prehearing actions or investigations.

#### 600.3.2 RULE VIOLATION REPORTS

California Penal Code § 4019.5 requires that all disciplinary actions administered be documented. This requirement may be satisfied by retaining copies of rule violation reports, including the disposition of each violation (15 CCR 1084). Rule violation reports are required for major rule violations or any other violation that will require investigation or a formal resolution. The staff member who observed or detected the rule violation or who was charged with investigating a rule violation is responsible for completing the rule violation report. The rule violation report shall include, at a minimum:

- The date, time, and location of the incident.
- Specific rules violated.
- A written description of the incident.
- The identity of known participants in the incident.
- Identity of any witnesses to the incident.
- Description and disposition of any physical evidence.
- Action taken by staff, including any use of force.
- Name and signature of the reporting deputy.
- Date and time of the report.

The supervisor investigating the violation shall ensure that certain items are documented in the investigation or rule violation report, including:

- Date and time the explanation and the written copy of the complaint and appeal process was provided to the incarcerated person.
- The incarcerated person's response to the charges.
- Reasons for any actions.
- The identity of any staff or witnesses involved, as revealed by the incarcerated person.
- The findings of the hearing officer.
- The incarcerated person's appeal, if any.

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- The appeal findings, if applicable.

#### 600.3.3 POSTING

The Facility Manager or the authorized designee is responsible for conspicuously posting notices about rules, disciplinary procedures, and actions in a conspicuous location, as set forth in 15 CCR 1080. These are posted in the Jail Rulebook.

#### **600.4 RULE VIOLATION PROCEDURES**

Minor acts of non-conformance to the rules may be handled informally by any deputy (15 CCR 1081).

A violation of rules observed by general service employees, volunteers, or contractors will be reported to a deputy for further action. Deputies are authorized to recommend informal actions on minor violations.

Any staff member imposing informal discipline shall complete the reporting portion of the disciplinary report and provide the form to the supervisor for review prior to the imposition of the action.

Disciplinary actions that may be imposed for minor rule violations include (15 CCR 1081):

- Counseling the incarcerated person regarding expected conduct.
- Assignment to extra work detail.
- Removal from work detail (without losing work time credits).
- Loss of television, telephone, and/or commissary privileges for a period not to exceed 24 hours.
- Lockdown in the incarcerated person's assigned cell or confinement in the incarcerated person's bunk area for a period not to exceed 24 hours.

An incarcerated person may request that a supervisor review the imposed action. However, this request must be made within one hour of receiving notice of the action. The supervisor should respond to the request within a reasonable time (generally within two hours) and shall have final authority as to the imposition of informal discipline.

#### 600.4.1 MULTIPLE MINOR RULE VIOLATIONS

Staff may initiate a major rule violation report if an incarcerated person is charged with three or more minor rule violations in a consecutive 30-day period. Copies of all minor rule violations will be attached to the major rule violation report. A staff member shall conduct a hearing according to the procedures of a major rule violation.

#### 600.4.2 MAJOR RULE VIOLATIONS

Major rule violations are considered a threat to the safety, security, or efficiency of the facility, its staff members, incarcerated persons, or visitors. Staff members witnessing or becoming aware of a major rule violation shall take immediate steps to stabilize and manage the situation, including

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

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, unless directed otherwise by a supervisor. All reports shall be submitted within 24 hours of the event which resulted in a major rule violation.(15 CCR 1081).

#### **600.4.3 ADMINISTRATIVE SEPARATION HOUSING**

Inmates who are accused of a major rule violation may be moved to administrative separation housing for pre-hearing detention, with the Correctional Lieutenant's or designee's approval, if there is a threat to safety or security (15 CCR 1081). Inmates placed in pre-hearing detention may be subject to the property and privilege restrictions (15 CCR 1081).

The Facility Manager 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 separation housing is appropriate.

#### **600.5 INVESTIGATIONS**

Investigations involving major rule violations should be initiated within 24 hours of the initial report and completed in sufficient time for the incarcerated person to have a disciplinary hearing, which is required within 72 hours of the time the incarcerated person was informed, in writing, of the charges. If additional time is needed, the investigating supervisor will request more time in writing from the Operations Lieutenant or authorized designee. The incarcerated person will be notified in writing of the delay.

If upon completion of the investigation, the investigating supervisor finds insufficient evidence to support a major rule violation, the supervisor may discuss alternative actions with the Operations Lieutenant or authorized designee, including handling the incident as a minor violation or recommending that charges be removed. Such alternatives shall be documented in the incarcerated person's file.

If the investigating supervisor determines that sufficient evidence exists to support a major rule violation, the supervisor will act as the hearing coordinator and will be responsible for:

- Reviewing all reports for accuracy and completeness.
- Overseeing or conducting any required additional investigation.
- Making a determination as to the final charges.
- Making preliminary decisions about the appointment of a staff member to act as an assistant to the incarcerated person.
- Identifying any witnesses that may be called to the hearing.



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#### **600.6 NOTIFICATIONS**

An incarcerated person charged with a major rule violation shall be given a written description of the incident and the rules violated at least 24 hours prior to a disciplinary hearing.

Unless waived in writing by the incarcerated person, hearings may not be held in less than 24 hours from the time of notification (15 CCR 1081).

#### **600.7 HEARING OFFICER**

The Facility Manager shall appoint at least one hearing officer to preside and conduct disciplinary hearings of major rule violations. The hearing officer should be a qualified supervisor or suitably trained designee who will have the responsibility and authority to rule on charges of incarcerated person rule violations. The hearing officer shall also have the power to impose actions. The hearing officer shall not investigate nor preside over any incarcerated person disciplinary hearing on cases where the hearing officer was a witness or was directly involved in the incident that generated the complaint (15 CCR 1081).

#### **600.8 HEARING PROCEDURE**

Incarcerated persons charged with major rule violations are entitled to be present at a hearing unless waived in writing or excluded because their behavior poses a threat to facility safety, security, and order (15 CCR 1081). Staff shall inform the hearing officer when any incarcerated person is excluded or removed from a scheduled hearing and shall document the reasons for the exclusion or removal. A copy of the report shall be forwarded to the Facility Manager.

Hearings may be postponed or continued for a reasonable period of time for good cause. Reasons for postponement or continuance shall be documented and forwarded to the Facility Manager (15 CCR 1081).

The hearing officer shall disclose to the accused incarcerated person all witnesses who will be participating in the hearing. Incarcerated persons have no right to cross-examine witnesses. However, the accused incarcerated person may be permitted to suggest questions that the hearing officer, in the hearing officer's discretion, may ask.

##### **600.8.1 EVIDENCE**

Accused incarcerated persons have the right to make a statement, present evidence, and call witnesses at the hearing (15 CCR 1081). Requests for witnesses shall be submitted in writing by the incarcerated person no later than 12 hours before the scheduled start of the hearing. The written request must include a brief summary of what the witness is expected to say.

The hearing officer may deny the request when it is determined that allowing the witness to testify would be unduly hazardous to institutional safety or correctional goals, when the witness's information would not be relevant or would be unnecessarily duplicative, or is otherwise unnecessary. The reason for denying a witness to testify shall be documented in the hearing report. The reason for denial of any documents requested by the incarcerated person shall also be documented in the hearing record.

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A witness's signed written statement may be submitted by the incarcerated person as an alternative to a live appearance. The hearing officer shall review and determine whether the statement is relevant to the charges and shall document the reason for exclusion when any written statement is not given consideration.

Absent a safety or security concern, all staff reports and evidence, including exculpatory evidence, obtained during the disciplinary investigation shall be made available to the accused incarcerated person prior to the hearing.

#### 600.8.2 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 incarcerated person who is incapable of self-representation at a disciplinary hearing due to limited literacy, developmental disabilities, language barriers, or mental status (15 CCR 1081). The scope of the duties of the assistant shall be commensurate with the reasons for the appointment. The assistant should be allowed sufficient time to confer with the incarcerated person to fulfill the individual's obligations. In these cases, the incarcerated person does not have a right to appoint a person to assist in the individual's disciplinary hearing. The final decision regarding the appointment rests with the hearing officer.

Incarcerated person discipline is an administrative and not a judicial process. Incarcerated persons do not have a right to an attorney in any disciplinary hearing. Additionally, disciplinary matters may be referred for criminal prosecution and jail disciplinary action concurrently as there is no double jeopardy defense for an administrative process.

#### 600.8.4 DISCIPLINARY DECISIONS

Disciplinary decisions shall be based on the preponderance of evidence presented during the disciplinary hearing.

The disciplinary process shall consider whether an incarcerated person's mental disabilities or mental illness contributed to the incarcerated person's behavior when determining what type of discipline, if any, should be imposed (28 CFR 115.78(c)).

#### 600.8.5 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 incarcerated person. The original shall be filed with the record of the proceedings. All documentation related to the disciplinary process shall be retained and a copy should be placed in the incarcerated person's file (15 CCR 1081).

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If it is determined that the incarcerated person's charge is not sustained at the end of the disciplinary hearing, the documentation shall be removed from the incarcerated person's file but otherwise maintained in accordance with records retention requirements.

All disciplinary hearing reports and dispositions shall be reviewed by the Facility Manager or the authorized designee soon after the final disposition (15 CCR 1081).

#### **600.9 DISCIPLINARY APPEALS**

Incarcerated persons wishing to appeal the decision of the hearing officer must do so in writing within five days of the decision. All appeals will be forwarded to the Facility Manager 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 incarcerated person's appeal is granted or discipline is reduced but no later than 10 days after the appeal. The decision of the review authority shall be final and the result of the appeal shall be provided to the incarcerated person in writing.

#### **600.10 LIMITATIONS ON DISCIPLINARY ACTIONS**

The U.S. and state constitutions expressly prohibit all cruel or unusual punishment, disciplinary actions shall not include corporate punishment, group punishment when feasible, or physical or psychological degradation (15 CCR 1083). Additionally, there shall be the following limitations:

- Disciplinary separation shall be considered an option of last resort and as a response to the most serious and threatening behavior, for the shortest time possible, and with the least restrictive conditions possible (15 CCR 1083).
- In no case shall any incarcerated person or group of incarcerated persons be delegated the authority to punish any other incarcerated person or group of incarcerated persons (Penal Code § 4019.5; 15 CCR 1083).
- In no case shall a safety cell, as specified in the Safety and Sobering Cells Policy, be used for disciplinary purposes (15 CCR 1083).
- In no case shall any restraint device be used for disciplinary purposes (15 CCR 1083).
- Food shall not be withheld as a disciplinary measure (15 CCR 1083).
- Correspondence privileges shall not be withheld except in cases where the incarcerated person has violated correspondence regulations, in which case correspondence other than legal mail may be suspended for no longer than 72 hours without the review and approval of the Facility Manager (15 CCR 1083).
- In no case shall access to the courts and/or legal counsel be suspended as a disciplinary measure (15 CCR 1083).

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- Disciplinary separation in excess of 30 days without review by the Facility Manager 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).
- No incarcerated person may be deprived of the implements necessary to maintain an acceptable level of personal hygiene (15 CCR 1083; 15 CCR 1265).
- Discipline may be imposed for sexual activity between incarcerated persons. However, such activity shall not be considered sexual abuse for purposes of discipline unless the activity was coerced (28 CFR 115.78(g)).
- No discipline may be imposed for sexual contact with staff unless there is a finding that the staff member did not consent to such contact (28 CFR 115.78(e)).
- No incarcerated person may be disciplined for falsely reporting sexual abuse or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation, if the report was made in good faith based upon a reasonable belief that the alleged conduct occurred (28 CFR 115.78(f)).

#### **600.11 GUIDELINES FOR DISCIPLINARY ACTIONS**

Discipline shall be commensurate with the nature and circumstances of the offense committed, the incarcerated person's disciplinary history, and the actions imposed for comparable offenses by other incarcerated persons with similar histories (28 CFR 115.78(b); 15 CCR 1082).

In all cases, actions should be imposed for the purpose of controlling or changing an incarcerated person's behavior, promotion of desired behavior through a progressive disciplinary process, and not for the purpose of punishment (15 CCR 1082).

Acceptable forms of discipline shall consist of but not be limited to the following (15 CCR 1082):

- Loss of privileges
- Extra work detail
- Short-term lockdown for less than 24 hours
- Removal from work details
- Forfeiture of work time credits earned under Penal Code § 4019
- Forfeiture of good time credits earned under Penal Code § 4019
- Disciplinary detention

The Sheriff or the Facility Manager shall be responsible for developing and implementing a range of disciplinary actions for violations.

Incarcerated persons shall be subject to disciplinary actions pursuant to a formal disciplinary process following an administrative finding that the incarcerated person engaged in incarcerated person-on-incarcerated person sexual abuse or following a criminal finding of guilt for incarcerated person-on-incarcerated person sexual abuse (28 CFR 115.78(a)).

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To the extent that there is available therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for sexual abuse, the facility shall consider whether to require an incarcerated person being disciplined for sexual abuse to participate in such interventions as a condition of access to programming or other benefits (28 CFR 115.78(d)).

#### **600.12 TRAINING**

The Facility Manager or the authorized designee is responsible for ensuring that a wide range of training and disciplinary tools are available to aid staff and that preprinted forms are available for documenting rule violations in a consistent and thorough manner.

The Training Coordinator 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

### 602.1 PURPOSE AND SCOPE

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

#### 602.1.1 DEFINITIONS

Definitions related to this policy include:

**Disciplinary separation** - A status assigned to an inmate after a disciplinary hearing in which the inmate was found to be in violation of a jail rule or state or federal law. This status results in separating the inmate from the rest of the inmate population to serve the consequence imposed.

### 602.2 POLICY

The San Luis Obispo County Sheriff's Office will maintain areas which will house inmates on disciplinary separation; after an impartial due process hearing, which results in the inmate being sanctioned for violating one or more jail rules. Restrictions on privileges will be subject to the disciplinary process and in accordance with this policy.

### 602.3 DISCIPLINARY SEPARATION

Inmates may be placed into disciplinary separation only after an impartial hearing to determine the facts of the rule violation, in accordance with the office Inmate Discipline Policy. The hearing officer shall impose discipline in accordance with the discipline schedule established by the Facility Manager. Maximum discipline sanctions for any one incident, regardless of the number of rules violated, shall not exceed 60 days.

Disciplinary separation in excess of 30 days shall be reviewed by the Facility Manager or their designee before the discipline is imposed. The review shall include a consultation with health care staff. Such reviews shall continue at least every 15 days thereafter until the disciplinary status has ended. These reviews shall be documented (15 CCR 1082(g); 15 CCR 1083(a)).

### 602.4 INMATE ACCESS TO SERVICES

The ability to discipline inmates for conduct violations is not absolute. Absent legitimate government reason, inmates continue to have a right to receive certain services. However, inmates in disciplinary separation, in accordance with the Inmate Discipline Policy, or special management inmates who are disciplined for one or more rule violations, may be subject to loss of privileges or credit for good time and work.

Services to provide for basic human needs must continue to be made available. There are minimum service requirements that must be maintained to ensure the facility continues to operate in a constitutional manner. All custody staff will adhere to the following policy sections to guide

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

#### 602.4.1 MEDICATION, CLOTHING, AND PERSONAL ITEMS

Inmates placed in disciplinary separation are considered special management inmates and shall not be denied prescribed medication.

Special management inmates will be provided with clothing, such as Full-Restraint or Two-Officer Move 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 Facility Manager or the authorized designee and reviewed every 24 hours.

#### 602.4.2 SHOWERING AND PERSONAL HYGIENE

Inmates in disciplinary separation should be allowed to shower with the same frequency as the general inmate population, if reasonably practicable, but at 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 Shift Commander. The circumstances necessitating a restriction must be clearly documented on the unit log.

#### 602.4.3 DENIAL OF AUTHORIZED ITEMS OR ACTIVITIES

Personal items may be withheld when it reasonably appears that the items will be destroyed by the inmate or it is reasonably believed that the personal item will be used for a self-inflicted injury or to harm others.

Whenever an inmate in disciplinary separation is denied personal care items or activities that are usually authorized to the general population inmates, except for restrictions imposed as a result of a disciplinary hearing, the deputy taking such action shall prepare a report describing the circumstances that necessitated the need to restrict personal items or activities. The report shall

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be submitted to a supervisor for review, who will then forward it to the Facility Manager. A copy of the report shall be placed in the inmate's file.

#### 602.4.4 MAIL AND CORRESPONDENCE

Inmates in disciplinary separation shall have the same privileges to write and receive correspondence as inmates in general population, except in cases where inmates violated correspondence regulations. In such cases, mail privilege may be suspended. The Facility Manager or the authorized designee shall approve all mail privilege suspensions that exceed 72 hours. Legal mail shall not be suspended from delivery to the inmate (15 CCR 1083(h)).

#### 602.4.5 VISITATION

Inmates in disciplinary separation shall have the same opportunities for visitation as general population inmates, except when the visitation privileges are suspended pursuant to a sanction imposed by the disciplinary hearing officer. Disciplinary sanctions that limit or curtail visitation must be clearly documented and approved by a supervisor if not a condition of the original approved discipline.

#### 602.4.6 READING AND LEGAL MATERIALS

Inmates in disciplinary separation shall have the same access to reading materials and legal materials as the general population inmates, unless the restriction is directed by a court of law or there is a reasonable basis to believe the materials will be used for illegal purposes or pose a direct threat to the security and safety of the facility. In such cases the basis for the action shall be documented in the inmate's file and unit log. Access to courts and legal counsel shall not be suspended as a disciplinary measure (15 CCR 1083(i)).

#### 602.4.7 EXERCISE

Inmates in disciplinary separation shall be given a minimum of three hours of exercise per week outside of their cell. Exceptions to this may occur if there are legitimate security or safety considerations. The circumstances relating to the limitation of exercise shall be documented in an incident report. The report shall be reviewed and the restriction shall be approved by a supervisor.

#### 602.4.8 LIMITED TELEPHONE PRIVILEGES

Inmates in disciplinary separation may have their telephone privilege restricted or denied. Exceptions include the following:

- (a) Making legal calls
- (b) Responding to verified family emergencies, when approved by the sergeant or Facility Manager

All telephone access based on the above exceptions shall be documented on the unit log.

#### 602.4.9 BEDDING AND CLOTHING

Inmates in disciplinary separation shall not be deprived of bedding or clothing except in cases where the inmate destroys such articles or uses them to harm him/herself or others or for something other than the intended purpose. Clothing and bedding shall be returned to the inmate



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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 Facility Manager or the authorized designee and reviewed at least every eight hours. This review shall be documented and placed into the inmate's file.

#### **602.5 DISCIPLINARY SEPARATION DIET**

Under no circumstances will an inmate be denied food as a means of punishment (15 CCR 1083(f)). A disciplinary separation diet may only be used for major violations of jail rules (15 CCR 1083(g)). No inmate receiving a prescribed medical diet is to be placed on a disciplinary separation diet without review and written approval of the Responsible Health Authority or pursuant to a written plan approved by the Responsible Health Authority. Disciplinary separation diets shall be served twice during each 24-hour period and must meet statutorily prescribed minimum food and nutritional requirements as described in the Disciplinary Separation Diet Policy.

Before any inmate is placed on a disciplinary separation diet, the following shall occur:

- (a) The Responsible Health Authority shall review the medical condition and history of the inmate and approve the alternative meal service.
- (b) The Facility Manager 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 Facility Manager.
- (d) Disciplinary separation diets shall not be served in any case for more than 72 hours without the written approval of the Facility Manager and a physician.

#### **602.6 INITIAL EVALUATION OF INMATES UPON PLACEMENT**

After notification from staff that an inmate is being placed in separation, if the inmate has any prior documented medical needs or concerns then the Classification Sergeant shall ensure that the following occurs:

- (a) A qualified health care professional shall review the inmate's health record to determine whether existing medical, dental or mental health needs contraindicate the placement or require special accommodations.
- (b) If contraindications or special accommodations are noted, the qualified health care professional shall inform the Classification Sergeant and coordinate the appropriate plan for the inmate based on the safety needs of the facility and the medical needs of the inmate.

#### **602.7 MENTAL HEALTH CONSIDERATIONS**

Due to the possibility of self-inflicted injury and depression during periods of separation, mental health and 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.

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- (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 mental health care professional should provide screening for suicide risk following admission to the separation unit.

#### **602.8 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 30 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:

- (a) A visit by the Shift Commander or their designee once a day.
- (b) Visits by program staff, upon request.
- (c) Visits by a qualified health care professional a minimum of once a day and more often, if needed.

All management, program staff, and qualified health care professional visits shall be documented on the appropriate records and logs and retained in accordance with established records retention schedules.

#### **602.9 LOG PROCEDURES**

All management, program staff, and qualified mental health and health care professional visits shall be documented on the appropriate records and logs and retained in accordance with established records retention schedules.

Handwritten logs should be completed in ink. Once an entry is made it should not be modified. If corrections or changes are needed they should be done by way of a supplemental entry.

Electronically captured logs will be maintained in a way that prevents entries from being deleted or modified once they are entered. Corrections or changes must be done by way of supplemental entries. At a minimum the log will contain the following:

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- (a) Inmate name
- (b) Inmate booking number
- (c) Housing location
- (d) Classification status
- (e) Date and time placed in separation
- (f) Date and time of entry and exit from the cell
- (g) Violation and length of discipline
- (h) Scheduled date of removal from separation
- (i) Medical, psychological, or behavioral considerations
- (j) Counseling for behavior
- (k) Date and time of removal from separation

Log entries should be legible, be entered promptly, and provide sufficient detail to adequately reflect the events of the day for future reference.

The date and time of the observation or incident and the name and identification number of the staff member making the log entry shall be included on each entry.

Supervisors should review the logs frequently during the shift and enter comments as appropriate. At a minimum, supervisors should enter the date and time of each review.

All safety checks will be documented in detail and should include the exact time of the safety check and the identification information of the employee conducting the check. All documentation will be gathered and placed in the appropriate Log Binder to the corresponding housing Unit at the end of each shift.

#### 602.9.1 LOG INSPECTION AND ARCHIVAL OF LOGS

The Shift Commander shall review and evaluate the logs at the end of the month and pass any significant incidents via the chain of command to the Facility Manager for review.

The logs will be retained by the Office in accordance with established records retention schedules but in no case less than one year.

## Incarcerated Persons with Disabilities

### 604.1 PURPOSE AND SCOPE

This policy provides guidelines for addressing the needs and rights of incarcerated persons detained by this office, in accordance with Title II of the Americans with Disabilities Act (ADA) for all incarcerated persons incarcerated by the San Luis Obispo Sheriff's Office and for those persons having legitimate business within the Custody Bureau.

#### 604.1.1 DEFINITIONS

Definitions related to this policy include:

**ADA: Americans with Disabilities Act.** - The ADA covers individuals who have a physical or mental impairment that substantially limits one or more major life activities, who have a record of such impairment, or who are regarded as having such impairment. Temporary conditions are generally not covered by ADA. Certain other conditions expressly excluded from coverage of the ADA. Excluded conditions include pedophilia, homosexuality, trans-sexuality, or current users of illegal drugs or alcohol.

**ADA Coordinator:** The ADA Coordinator is tasked with ensuring compliance with the Americans with Disabilities Act within the Custody Bureau of the San Luis Obispo Sheriff's Office. The ADA Coordinator shall be responsible for reviewing all documentation, and documenting responses to all disability related requests. The ADA Coordinator shall maintain information of each ADA inmate and incorporate the previously listed information.

**IRC:** Intake and Release Center.

**MAJOR LIFE FUNCTIONS:** Basic functions that the average person can perform with little or no difficulty.

**NON-AMBULATORY:** Bedridden.

**PROSTHESIS:** A device used to replace a defective or missing part of the body.

**REASONABLE MODIFICATION:** An adjustment made in a system to "modify" or make fair the same system for an individual based on a proven need.

**SERVICE ANIMAL:** Any dog that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual, or other mental disability. A miniature horse that has been individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, intellectual or other mental disability. Other species of animals, whether wild or domestic, trained or untrained, are not service animals for the purposes of this definition. The work or tasks performed by a service animal must be directly related to the individual's disability. The crime deterrent effects of an animal's presence and the provision of emotional support, well-being, comfort, or companionship do not constitute work or tasks for the purposes of this definition.

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**VIDEO PHONE:** A telecommunications relay service that allows people with hearing or speech disabilities who use sign language to communicate with voice telephone users through video equipment. The "Purple" Video Relay Service, (VRS), is the system used in the San Luis Obispo County Jail.

#### **604.2 POLICY**

This office will take all reasonable steps to accommodate incarcerated persons with disabilities while they are in custody and will comply with the ADA and any related state laws. Discrimination on the basis of disability is prohibited.

#### **604.3 FACILITY MANAGER RESPONSIBILITIES**

The Facility Manager, in coordination with the Responsible Physician and the ADA Coordinator (see the Accessibility - Facility and Equipment Policy), will establish written procedures to assess and reasonably accommodate disabilities of incarcerated persons. The procedures will include but are not limited to:

- (a) Establishing housing areas that are equipped to meet the physical needs of disabled incarcerated persons, including areas that allow for personal care and hygiene in a reasonably private setting and for reasonable interaction with incarcerated persons.
- (b) Establishing classification criteria to make housing assignments to incarcerated persons with disabilities.
- (c) Assigning individuals with adequate training to assist disabled incarcerated persons with basic life functions, as needed.
- (d) Establishing transportation procedures for moving incarcerated persons with limited mobility.
- (e) Establishing guidelines for services, programs, and activities for the disabled and ensuring that incarcerated persons with disabilities have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect and respond to sexual abuse and sexual harassment (28 CFR 115.16).
- (f) Enlisting or contracting for trained service personnel who have experience working with people with disabilities.
- (g) Establishing procedures for the request and review of accommodations.
- (h) Establishing guidelines for the accommodation of individuals who are deaf or hard of hearing, have common disabilities such as sight and mobility impairments and developmental disabilities, or have common medical issues, such as epilepsy.
- (i) Identifying and evaluating all incarcerated persons with developmental disabilities, including contacting the regional center for the developmentally disabled to assist with diagnosis and/or treatment within 24 hours of identification, excluding holidays and weekends (15 CCR 1057).

The Facility Manager is responsible for ensuring the San Luis Obispo County Sheriff's Office jail is designed or adapted to reasonably accommodate incarcerated persons with disabilities. At a minimum this includes:

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- Access to telephones equipped with a telecommunications device for the deaf (TDD) for incarcerated persons who are deaf, are hard of hearing, or have a speech impairment.
- If orientation videos are used to explain facility rules to newly admitted incarcerated persons, subtitles may be displayed on the video presentation to assist incarcerated persons who have impaired hearing.
- Some cells and dormitories should be equipped with wheelchair-accessible toilet and shower facilities. Incarcerated persons with physical disabilities should be allowed to perform personal care in a reasonably private environment.
- Tables designed for eating should be accessible to those in wheelchairs.

#### **604.4 CORRECTIONAL DEPUTIES RESPONSIBILITIES**

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

Correctional Deputies who work in the Classification Unit should be aware of incarcerated persons with disabilities before making housing decisions. For example, persons with mobility issues may require a lower bunk and accessible toilet and shower facilities. When necessary or required, the ADA Coordinator/Classification Sergeant should consult with the qualified health care professional or the Responsible Physician regarding housing location.

Correctional Deputies should assist an incarcerated person with a disability by accommodating the incarcerated person consistent with any guidelines related to the incarcerated person's disability. If there are no current guidelines in place, Correctional Deputies receiving a request for accommodation of a disability should direct the incarcerated person to provide the request in writing or assist the incarcerated person in doing so, as needed. The written request should be brought to the ADA Coordinator 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 San Luis Obispo County Jail. . The formal written request should still be submitted to the ADA Coordinator.

Requests that are minor and do not reasonably appear related to a significant or ongoing need may be addressed informally, such as providing extra tissue to an incarcerated person with a cold. Such requests need not be made in writing.

#### **604.5 FORMS**

The forms listed below will be used to document and track all ADA incarcerated persons while within the San Luis Obispo County Jail system. The following forms shall be provided to incarcerated persons who either state they have a disability, request one of the forms, is provided a form through Medical, and/or is noted to have a disability in their file. All completed forms shall be retained in the incarcerated person's ADA File.

*ADA Request for Accommodation:* to be given to an incarcerated person upon request or as directed above.

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*Communication Assessment for Deaf or Hard of Hearing Incarcerated Persons:* to be completed by ADA Coordinator/Classification Sergeant or designee in Classification.

*ADA Coordinator Review Form:* to be completed by ADA Coordinator.

#### **604.6 TRANSPORTATION PROCEDURES**

Accommodations will be made for incarcerated persons with mobility disabilities requiring the use of a wheelchair. Staff will utilize the specially equipped van with a wheelchair lift when transporting incarcerated persons out of the jail.

If an incarcerated person is transported to court and utilizes a wheelchair, the Correctional Deputy completing the transport will assist the incarcerated person in the wheelchair through the front of the Court House, through the public access which are wheelchair accessible.

The Correctional Deputy will utilize the ADA-compliant elevators to transport wheelchair-bound incarcerated persons from the court room to the ADA van.

Incarcerated persons requiring and/or requesting an ADA restroom will be given access to the ADA-compliant cell, (#104), which includes and ADA-compliant toilet and drinking fountain.

Incarcerated persons requiring and/or requesting services for the hearing impaired while at their court proceedings are provided hearing-impaired services. The incarcerated persons shall be provided access to ADA-compliant cell #102 for private conversations with their counsel and/or interpreter.

#### **604.7 DISABLED INCARCERATED PERSONS PROCEDURES**

##### **IDENTIFYING DISABLED INCARCERATED PERSONS AT INTAKE**

- The medical screening process during intake provides the ability to identify most disabilities and the need for accommodations prior to housing of the incarcerated person. It is the responsibility Registered Nurse working in IRC to assess incarcerated persons upon admission for evidence of a disability or special management need. This assessment information will be entered in the Electronic Health Records portion of the *San Luis Obispo County Jail Medical Pre-Screen Questionnaire*.
- Upon arrival in the Intake and Release Center, arrested persons with an apparent physical impairment will be immediately brought to the attention of medical staff.
- It is the responsibility of the IRC Correctional Deputies to advise the ADA Coordinator when an incarcerated person appears to meet the criteria of a disabled person for the purposes of ADA.
- Upon acceptance for booking, an IRC Correctional Deputy shall be assigned to monitor the progress of the arrested person throughout the intake process.

##### **INTAKE PROCESS FOR DISABLED INCARCERATED PERSONS**

Medical Staff shall screen all incarcerated persons entering the facility for medical and mental health issues. Medical Staff shall notify IRC and Classification Correctional Deputies of any

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incarcerated person's meeting ADA criteria, including any special needs the incarcerated person may have. Special needs include but are not limited to:

- Requires a wheelchair, walker or other device to assist in mobility.
- Requires a lower bunk/lower tier cell.
- Requires hearing aid or assistance for visiting/phone calls.
- Visually impaired.
- Requires or request mental health medication.

Medical Staff as well as the IRC Correctional Deputies will ensure every effort is made to assist the incarcerated person so they can effectively communicate their information. If the incarcerated person is hearing impaired, staff will ensure hearing-impaired incarcerated persons are provided with an *ADA Request for Accommodation* form.

If, during intake, it is determined that for health and/or medical reasons, the incarcerated person needs to shower prior to being housed, the disabled incarcerated person shall be escorted to the ADA shower in the Property Storage area.

Classification Correctional Deputies will classify incarcerated persons with the incarcerated person's disability given consideration when making a housing assignment, placing the incarcerated person's safety at the forefront. Being disabled in any way is not justification for a higher security classification.

Every effort will be made to house disabled incarcerated persons in general population, unless such assignment would jeopardize the safety of the incarcerated person or those around them.

IRC Correctional Deputies and Registered Nurses will notify the ADA Coordinator and Classification, when a disabled incarcerated person is going to be housed in the facility. Notification to the ADA Coordinator shall be made immediately. If the ADA Coordinator is not on duty, the IRC Correctional Deputies shall notify their On-Duty Sergeant. The On-Duty Sergeant shall send an e-mail to the ADA Coordinator and make a notation in the CS Post Log.

Hearing impaired incarcerated persons wishing to make telephone calls shall be allowed to utilize the "Purple" software which acts as a videophone. The incarcerated persons will be afforded use of the Purple system whenever they request to do so. The Purple system may also be used as a translation device for hearing impaired who cannot otherwise communicate with staff. Suggested uses include, but are not limited to: Classification interview, Medical interview, and/or Mental Health interview.

Instructions for proper use of the Purple system shall be kept in Classification and a copy may be made available to an incarcerated person upon request.

#### ORTHOPEDIC OR PROSTHETIC DEVICES

As required by Penal Code Section 2656, incarcerated persons shall be allowed to retain possession of their orthopedic or prosthetic appliance if such appliance has been prescribed



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or recommended and fitted by a physician. If, however, the On-Duty Sergeant has probable cause to believe possession of such orthopedic or prosthetic appliance constitutes an immediate risk of bodily harm to any person in the facility or threatens the security of the facility, such appliance may be removed. If such appliance is removed, the incarcerated person shall be deprived of such appliance only during such time as the facts which constitute probable cause for its removal continue to exist; if such facts cease to exist, then the On-Duty Sergeant shall return such appliance to the incarcerated person. The removal of any appliance and the return of such appliance shall be document in a *Jail Incident Report* When such appliance is removed, the incarcerated person shall be examined within 24 hours after such removal. If the examining physician determines that removal is or will be injurious to the health or safety of the incarcerated person, they shall so inform the incarcerated person and Operations Correctional Lieutenant. Upon receipt of the physician's opinion, the Operations Correctional Lieutenant shall either return the appliance to the incarcerated person or refuse to return such appliance to the incarcerated person, informing the physician and the incarcerated person of the reasons for such refusal and promptly providing the incarcerated person with a form, as specified in subdivision (c) of PC2656, by which the incarcerated person may petition the superior court for return of the appliance.

#### HOUSING DISABLED INCARCERATED PERSONS

It is incumbent upon all housing unit Correctional Deputies to be aware of incarcerated persons housed to their housing unit who have any type of disability. In the event an incarcerated person with a disability is identified and there is no documentation that the incarcerated person is disabled, the Correctional Deputy shall immediately notify Medical Staff to have the incarcerated person evaluated. The ADA Coordinator shall also be notified.

All incarcerated persons with disabilities shall be afforded access to all services, programs, and activities for which they meet eligibility criteria. These incarcerated persons shall not be excluded by reason of their disability unless they present a direct threat to the health and/or safety of others. This determination shall be made on an individualized basis.

Incarcerated persons with mobility disabilities should be housed in a housing unit within their classification level. Every effort will be made to provide these incarcerated persons with a cell designated for incarcerated persons with disabilities, accessible showers and accessible dining area. In the event an incarcerated persons is housed in a cell not designated for an incarcerated person with disabilities, it shall be noted documented in a Jail Incident Report and forwarded to the ADA Coordinator for review. The ADA Coordinator will make their best effort to ensure that an individual deemed to require accessible accommodations are provided with such accessible accommodations.

#### COMMUNICATION

Incarcerated persons with disabilities may use the *Request* slips if they are able to complete them. If they need assistance, it will be provided by the housing unit Correctional Deputy. If the housing unit Correctional Deputy is not able to assist the incarcerated person, they will immediately notify their On-Duty Sergeant who will facilitate assistance or refer to the ADA Coordinator/

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Classification, (if they are on duty), who will then facilitate the request. These requests should be routed as any other request. Requests pertaining to ADA issues shall be provided an *ADA Request for Accommodations* form. The form shall be forwarded to the ADA Coordinator/Classification Sergeant. The ADA Coordinator/Classification Sergeant shall address the issue and maintain a record of the request in the incarcerated person's Classification file and a notation on the *Disability Tracking* spreadsheet.

Staff will provide assistance to incarcerated persons who require assistance in understanding and completing the *Request* slip. This is especially true if the incarcerated person requires assistance in writing or if the incarcerated person is mentally ill or developmentally disabled.

#### GRIEVANCE PROCESS

Incarcerated persons will use the *Grievance* form to submit grievances regarding ADA issues in which they believe they are being denied, as well as for other grievable issues.

Staff will provide assistance to incarcerated persons who require assistance in understanding and completing the grievance process. This is especially true if the incarcerated person requires assistance in writing or if the incarcerated person is mentally ill or developmentally disabled.

#### DISCIPLINARY PROCESS

When a disabled incarcerated person is the subject of a disciplinary process that could deprive them of any privilege or right afforded to all other incarcerated persons, the interviewing Classification Correctional Deputy will ensure the incarcerated person understands the charges against them.

To ensure effective communication with individuals who are deaf, hearing impaired, or deaf and blind, the incarcerated person will be afforded usage of the Purple system so they may completely understand all phases of the disciplinary process. If the incarcerated person is developmentally disabled or mentally ill, the interviewing Classification Correctional Deputy may make whatever accommodations necessary for the incarcerated person to understand and defend against the charges.

#### REMOVAL FROM ADA STATUS

If an incarcerated person no longer wishes an ADA accommodation, they may complete and submit an *Request* form to the ADA Coordinator. The ADA Coordinator will evaluate the request and respond back to the incarcerated person. The ADA Coordinator will document in the incarcerated person's ADA file and they no longer wish to have an ADA designation.

#### RETALIATION

Retaliation of any kind directed at an incarcerated person for exercising their rights under the Americans with Disabilities Act will not be tolerated.

#### PUBLIC PROCEDURE / VISITORS

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It is the policy of the San Luis Obispo Sheriff's Office to make every possible effort to ensure reasonable accommodations are available to disabled visitors. Should a member of the public require assistance with a visit due to a disability, they should notify the Correctional Technicians in Booking by calling the public Booking line or in-person. Upon receiving the request for accommodations, the Correctional Technician shall advise the On-Duty Correctional Sergeant.

Disabled visitors are subject to the same facility rules as all other visitors.

#### SERVICE ANIMALS

Service animals will be allowed to accompany visitors. The care and supervision of a service animal is solely the responsibility of their owner and they may not be segregated from each other. Visitors may be asked if their animal is a service animal and required because of a disability and what tasks the animal has been trained to perform. However, verification is not required and no inquiry into the visitor's disability may be made. A visitor with a disability cannot be asked to remove their service animal unless one of the following conditions exist:

- The animal is out of control and the owner does not take effective action to control the animal.
- The animal poses a direct threat to the health or safety of others.

#### RESTROOM /VISITORS

Should a disabled visitor need to use a restroom and an accessible restroom is not available nearby, they shall be directed to the lobby restrooms which are fully ADA accessible. The visitor shall not be penalized in regards to their visit should this occur and will be provided the opportunity for a full visit as scheduled.

#### ATTORNEYS

All attorneys shall be afforded the same rights and privileges under the ADA as the public. The use of wheelchair accessible areas, sign language interpreters and any other reasonable accommodation shall be provided.

#### VOLUNTEERS

All volunteers shall be afforded the same rights and privileges under the ADA as the public. The use of wheelchair accessible areas, sign language interpreters and any other reasonable accommodation shall be provided.

## Access to Courts and Counsel

### 606.1 PURPOSE AND SCOPE

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

### 606.2 POLICY

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

### 606.3 INCARCERATED PERSON ACCESS

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

Access to courts and legal counsel may occur through court-appointed counsel, approved legal contact visits (as defined in *Lexipol Section 1022*), 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 incarcerated person 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 incarcerated persons 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 Correctional Lieutenant 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 handbook, that is provided during orientation.

### 606.4 CONFIDENTIALITY

All communication between incarcerated persons 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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#### *Access to Courts and Counsel*

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Outgoing and incoming legal correspondence shall be routed through the staff. Incoming legal correspondence shall be opened and inspected for contraband in the presence of the recipient incarcerated person.

Incarcerated persons may seek the assistance of other incarcerated persons in writing writs and other legal correspondence to the courts, when needed subject to the security and safety needs of the incarcerated persons, staff and the facility.

#### **606.5 INCARCERATED PERSONS REQUEST FOR ASSISTANCE**

Written materials addressing how an incarcerated person can access local attorneys and key legal documents shall be available in each housing unit. Staff shall provide these materials to any incarcerated person upon request. However, staff shall not provide legal advice or assist any incarcerated person in the completion of any legal document.

Habeas corpus forms shall be made available to any incarcerated person by the staff upon request.

Legal forms filled out by the incarcerated person shall be forwarded to court administration directly or via an appointed legal assistant.

#### **606.6 VISITATION RELATED TO LEGAL DEFENSE**

Visits with incarcerated persons that are related to legal defense, including attorneys, paralegals and investigators, will be permitted only in the areas designated for legal visitation or by way of video visitation to assure confidentiality (15 CCR 1068(b)). Contact visits may be approved by the Facility Manager, or authorized designee for special circumstances.

- (a) Visits shall be of a reasonable length of time to discourage any allegation the defense of the incarcerated person 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, scheduled lockdown hours 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 Correctional Sergeant for logging and distribution.

#### **606.7 MAIL**

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

## PRO-PER Incarcerated Persons

### 607.1 PURPOSE AND SCOPE:

The purpose of this policy is to set facility standards to ensure staff consistency in handling incarcerated persons designated with the status of "In Propria Persona" (Pro-Per) by the courts; including legal publications and legal materials provided to them. This policy will refer only to incarcerated persons designated pro-per on the criminal charges that are pending or currently holding them in custody. Civil, juvenile, and family law cases are not eligible for Pro-Per privileges but may be granted Pro-Per status by the Court. Pro-Per privileges will terminate upon sentencing or the conclusion of their conditions of confinement case in the trial court.

### 607.2 POLICY:

Incarcerated person may be granted Pro-Per status by court order only. Any time a court order is received designating an incarcerated person as having been granted Pro-Per status, all relevant records systems at the facility shall be updated to reflect this information. A copy of the court order shall be maintained in the incarcerated person's file in accordance with established records retention schedules.

- The court may, but is not required to, appoint to an incarcerated person who is designated Pro-Per an assistant to aid the incarcerated person 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.

### 607.3 DEFINITIONS:

**IN PROPRIA PERSONA** – "For one's self," acting on one's own behalf. Generally used to identify a person who is acting as their own legal counsel in a case or lawsuit. Abbreviated "pro-per."

**BLANKET PRO-PER** – A general court order granting Pro-Per status, but with no specific additional provisions.

**COURT APPOINTED LEGAL ASSISTANT** – An assistant appointed by the court to aid the Pro-Per incarcerated person with legal research. Assistants assigned to court ordered Pro-Per incarcerated persons generally consist of a back-up attorney, paralegal, investigator, or legal runner.

**PRIVILEGED PHONE CONVERSATION** – A telephone conversation between a Pro-Per incarcerated person and a court-appointed legal assistant. Call is not monitored or recorded.

**COURT APPROVAL** – Written documentation from the court granting Pro-Per status to an incarcerated person.

**COURT ORDER** – Written documentation from the court granting specific privileges to a Pro-Per incarcerated person.

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### *PRO-PER Incarcerated Persons*

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**CONFIDENTIALITY** – All communication between incarcerated persons and their attorneys is confidential, including telephone conversations, written communication, and video conferencing.

**PRO-PER ACTIVITIES RECORD** – A record logging an incarcerated person's Pro-Per activities and usage of materials. This will be an electronic record using the jail management system.

**DATA STORAGE DEVICE (DSD)** – Commonly known as a flash-drive, thumb-drive, or (Universal Serial Bus) USB-drive.

**CONTRABAND** – An item explicitly illegal, such as narcotics or firearms, an item that is not being used for the item's intended purpose, or the unauthorized transfer of an item from anyone to an incarcerated person.

#### **607.4 PRO-PER ACTIVITIES RECORD:**

A Pro-Per activities record shall be maintained. Recorded activities shall outline the date, time, deputy assisting, services rendered, and services/supplies refused to incarcerated persons having Pro-Per status. Attached to this record shall be a Services Provided to Pro-Per incarcerated persons notification and contract. This notice and contract must be read, signed and dated by the Pro-Per incarcerated person and witnessed, signed and dated by a Shift Supervisor or authorized designee. The Shift Supervisor shall make confirmation of an incarcerated person's Pro-Per status by acquiring the Pro-Per court order.

##### **607.4.1 PRO-PER ACTIVITIES RECORD PROCEDURE:**

- (a) A Pro-Per activities record shall be electronically started on each Pro-Per incarcerated person.
- (b) A copy of the Pro-Per court order shall be electronically attached to the incarcerated person's Pro-Per activities record (Remand/Reservation Order).
- (c) Pro-Per activities records shall be maintained and stored in the Pro-Per incarcerated person's electronic file.
- (d) Pro-Per activities records shall document dates and times that services were provided, the assisting deputy's name, and remarks indicating what services and/or supplies were provided to the incarcerated person. An incarcerated person's refusal of service and supplies will be logged along with the reason for refusal, if given.
- (e) Incarcerated persons with Pro-Per status will be required to sign a Notice of Services Provided and an Admonishment Statement/Contract indicating that they understand the privileges that they have been granted and that misuse of these privileges will result in the restriction and/or loss of further privileges.

##### **607.4.2 REQUESTS FOR PRO-PER SERVICES:**

Pro-Per incarcerated persons requesting use of an appropriate available working space or provision of services and/or supplies which have been authorized by the court, must make a written request by use of a Request Form, or by utilizing the electronic request system.

- Services will be provided to Pro-Per incarcerated persons on a first request first serve basis.

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- The incarcerated person's assigned housing officer shall take the written or digital request and attach it to the incarcerated person's file in the jail management system.
- The Correctional Deputy shall try to satisfy the incarcerated person's request as soon as it is practical and safe to do so.
- Services and supplies provided to Pro-Per incarcerated persons shall be logged as soon as possible by the attending officer. An incarcerated person's refusal of services shall also be logged.

#### **607.5 PRO-PER SUPPLIES AND SERVICES:**

Unlimited Legal Information Request forms from Legal Research Associates. Copies of completed motions relating to an incarcerated person's Pro-Per case(s) may be made upon request. Excessive copies are prohibited.

Incarcerated persons shall be offered the use of a typewriter or laptop for completing legal documents. It is the responsibility of the incarcerated person and the court-appointed legal assistant(s) to arrange copies of legal documents. Additionally, incarcerated persons shall be offered access to a Pro-Per tablet for usage of the electronic legal research application. Assigned Pro-Per tablets will also have the capability to access the electronic request system for legal requests (LRA forms, Pro-Per supplies, available working space, etc.). Requests not pertaining to Pro-Per services will not be accepted. The use of Pro-Per tablets outside the scope of legal services will not be permitted and may lead to disciplinary action. Incarcerated persons are not permitted to use Pro-Per tablets, typewriters, or laptops in their cells. Pro-Per incarcerated persons shall be placed in an available working space while using these items. Additionally, access to web based legal research applications shall serve only as a supplement to legal research. This service is a privilege and may be suspended by the facility manager. It is the responsibility of the incarcerated person and court appointed legal assistants to arrange for copies of research material.

Incarcerated persons may request copies of blank legal forms. Copies of blank legal forms may be made. Excessive copies are prohibited.

The facility may provide the following materials and supplies to a Pro-Per incarcerated person:

- Up to one-half of a ream of 8½-inch x 11-inch plain bond typing paper (typewriter use only)
- Up to three ruled legal notepads
- Standard legal-size envelopes
- One dozen (maximum) black lead golf pencils
- Two erasers
- One legal size accordion file or storage of equivalent size
- 9-inch x 12-inch manila envelopes and 10-inch x 14-inch manila envelopes
- 3-hole punch



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- Corrective tape or white-out
- Stapler
- Numbered legal paper, known as pleading paper, for court correspondence
- A ballpoint pen may be used for signature purposes only (Correctional Deputy will directly observe and retrieve pen)

These items will be stored in a container supplied for such purpose when items are not being used. All items used will be logged in the incarcerated person's Pro-Per activities record.

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 or electronic request to the Correctional Sergeant or the authorized designee. Supplies provided by a court legal liaison will be received and distributed by the Correctional Sergeant or the authorized designee. All supplies distributed to the incarcerated person will be recorded in the inmate's Pro-Per activities record. Supplies not listed in this policy are subject to approval by the Facility Manager or the authorized designee.

Incarcerated persons 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 incarcerated person's possession. Personal books must be marked with the incarcerated person's name and identification number. These materials are subject to a safety inspection for contraband.

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

#### 607.5.1 ACCESS AND USAGE OF MATERIALS AND SUPPLIES

Incarcerated persons granted Pro-Per by the court shall have reasonable access to the materials and supplies listed in §607.5. In addition, this includes reasonable access to rooms throughout the facility that are conducive for preparing court case work.

- Date and time entries shall be written in an incarcerated person's Pro-Per activities record, noting the start time and end time of an incarcerated person's access to Pro-Per materials and usage.
- Incarcerated persons may have data storage devices (DSD) pertaining to their Pro-Per case(s). Due to the potential contraband danger of Compact Discs (CDs), information contained on CDs will need to be transferred by the incarcerated person's court-appointed legal assistant to an approved DSD.
- Incarcerated persons with a DSD pertaining to their Pro-Per case(s), shall be allowed to maintain possession of the DSD at all times, outside of extenuating circumstances. Correctional Staff shall not confiscate a DSD from a Pro-Per incarcerated person unless the item has been deemed contraband. Any requests for copies from a DSD must be approved by a supervisor.
- Data storage devices sent to or received from a court appointed legal assistant will be noted in the incarcerated person's Pro-Per activities record. It is the responsibility

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of a supervisor to approve or disapprove a DSD coming into the facility. Reasons for disapproval will also be noted in the incarcerated person's Pro-Per activities log.

Any supply or material provided by a court-appointed legal assistant will be subject to a safety inspection for contraband. Any supply or material that is not listed in §607.5 will need the approval of the on-duty supervisor (i.e. permanent markers, highlighters, transparent tape, etc.).

#### **607.5.2 PRO-PER TELEPHONE USAGE:**

Normal telephone usage shall be in accordance with Sheriff's Office Custody policy 1020, Telephone Access, unless otherwise specified in a court order.

- Privileged phone conversations are limited to Pro-Per incarcerated person's court-ordered legal assistant(s). The name(s) of the legal assistant(s) and their phone number(s) shall be listed on the court order.
- Pro-Per incarcerated persons may request that a legal assistant be added to their defense team for privileged calls. Such request will be approved by the courts and listed on a court order. Court approved legal assistants and their telephone numbers will be added to the NCIC privileged call list, submitted by custody staff.
- Pro-Per incarcerated persons may request to be moved to another location to complete a privileged call. This is subject to the availability of space and the accessibility of a telephone.
- Pro-Per telephone conversations will not be recorded or monitored by this office.

#### **607.5.3 PRO-PER MAIL**

Legal mail shall be handled in accordance with Sheriff's Office Custody policy 1018, Incarcerated Person Mail, unless otherwise specified in a court order.

- Pro-Per incarcerated persons have unlimited access to legal mail and paid postage.
- Pre-paid envelopes, manila envelopes, envelopes, and stamps will be provided by Commissary.
- A request slip will be completed by the Pro-Per incarcerated person and forwarded to Commissary.

When practicable, Commissary shall fulfill requests depending on the supply of mailing materials.

#### **607.6 PRO-PER INCARCERATED PERSON INTERVIEWING WITNESSES**

A Pro-Per incarcerated person 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 incarcerated persons 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 incarcerated person is responsible for providing the judge with the list of prospective witnesses for validation.

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- (b) No visit shall be permitted by a prospective witness who is in the custody of this office or otherwise detained by a government agency, except upon a specific court order.

#### **607.7 PRO-PER MISUSE PROCEDURE:**

Any incarcerated person 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 Shift Supervisor. The Shift Supervisor will notify the Correctional Lieutenant of the misuse. The Shift Supervisor will ensure the following steps are followed.

- (a) Misuse of Pro-Per privileges shall be documented by a Jail Incident Report.
- (b) The report shall be referenced in the Pro Per activities record.
- (c) An additional copy of the report shall be forwarded to the appropriate Judge by Correctional Deputy working Court Services/Transportation.
- (d) Other copies shall be electronically routed through the jail management system or normal channels to the Correctional Lieutenant, Pro-Per Coordinator.

#### **607.7.1 SUSPENSION OF PRO-PER PRIVILEGES**

The Correctional Lieutenant may recommend the suspension or a limitation of the incarcerated person's Pro-Per privileges if they adversely affect the safety and security of the jail.

- (a) Misuse of Pro-Per privileges may result in suspension of Pro-Per privileges.
- (b) Evidence of misuse shall be documented by a Jail Incident Report.
- (c) Evidence of misuse, and full documentation, shall be taken to the Shift Supervisor.
- (d) The Correctional Deputy responsible for documentation shall ensure that a copy of all documentation is attached to the incarcerated person's electronic file.
- (e) An additional copy of the report shall be forwarded to the appropriate Judge by Correctional Deputies working Court Services/Transportation.
- (f) Other copies shall be electronically routed through the jail management system or normal channels to the Correctional Lieutenant.

Upon the concurrence with the findings and recommendation of the Correctional Lieutenant, the Sheriff or the authorized designee shall consult with the Office's legal counsel prior to notifying the court of any intent to limit the described Pro-Per privileges.

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

## Foreign Nationals and Diplomats

### 608.1 PURPOSE AND SCOPE

This policy addresses the privileges and immunities afforded to members of foreign diplomatic missions and consular posts.

This policy also addresses the legal requirements related to consular notifications that should occur when a foreign national is in custody.

### 608.2 POLICY

The San Luis Obispo County Sheriff's Office Jail will treat foreign diplomatic and consular personnel with due regard for the privileges and immunities to which they are entitled under international law. The Office will investigate all claims of immunity and accept custody of the person when appropriate.

The San Luis Obispo County Sheriff's Office Jail will also honor the laws related to foreign nationals in custody by making proper consular notifications and by assisting those who wish to contact their consular representative.

### 608.3 DIPLOMATIC AND CONSULAR IMMUNITY

#### 608.3.1 AVAILABILITY OF RESOURCES

The Correctional Sergeant will ensure that current contact information for the U.S. Department of State and the U.S. Mission to the United Nations is readily available for office members who need to verify a claim of diplomatic or consular immunity. Relevant material for law enforcement published by the U.S. Department of State Bureau of Diplomatic Security should be readily available as well.

#### 608.3.2 ADDRESSING CLAIMS OF DIPLOMATIC OR CONSULAR IMMUNITY

When an arrestee who claims diplomatic or consular immunity is brought to the San Luis Obispo County Sheriff's Office Jail the receiving deputy shall first inform the Correctional Sergeant and then generally proceed as follows:

- (a) Do not accept custody of the person from the transporting deputy. The person should not be brought inside the San Luis Obispo County Sheriff's Office Jail unless doing so would facilitate the investigation of their 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 they will be detained until their identity and immunity can be confirmed. Attempt to obtain a U.S. Department of State-issued identification card or other identification or documents that may relate to the claimed immunity.
- (d) In all cases, verify the status and level of immunity by contacting the U.S. Department of State or the U.S. Mission to the United Nations, as appropriate.

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It will be the responsibility of the Correctional Sergeant to communicate the claim of immunity to the on-duty supervisor of the arresting office (if not the San Luis Obispo County Sheriff's Office). The Correctional Sergeant may assist another agency in determining the person's immunity status.

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

#### **608.3.3 REPORTING**

If the person's immunity status has been verified, the Correctional Sergeant should ensure a report is prepared describing the details and circumstances of any detention or custody. A copy of the report should be faxed or mailed as soon as possible to the U.S. Department of State in Washington, D.C. or to the U.S. Mission to the United Nations in New York in cases involving a member of the United Nations community.

#### **608.4 CONSULAR NOTIFICATIONS**

##### **608.4.1 CONSULAR NOTIFICATION LIST AND CONTACTS**

The Facility Manager will ensure that the U.S. Department of State's list of countries and jurisdictions that require mandatory notification is readily available to office members. There should also be a published list of foreign embassy and consulate telephone and fax numbers, as well as standardized notification forms that can be faxed and then retained for the record.

##### **608.4.2 CONSULAR NOTIFICATION ON BOOKING**

Office members assigned to book incarcerated persons shall:

- (a) Inform the foreign national, without delay, that they may have their 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 their 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 their consular officers without delay.
- (d) If the foreign national's country is on the list for mandatory notification, then:
  1. Notify the nearest embassy or consulate of the foreign national's country, without delay, of the person's arrest or detention by faxing the appropriate notification form. If no fax confirmation is received, a telephonic notification should be made and documented.

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2. Tell the foreign national that this notification has been made and inform them without delay that they may communicate with their consular officers.
3. Forward any communication from the foreign national to their consular officers without delay.
4. Document all notifications to the embassy or consulate and retain the faxed notification and any fax confirmation for the incarcerated person's file.

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

# Incarcerated Person Rights - Protection from Abuse

## 610.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines to ensure that incarcerated persons are afforded a safe, healthful environment free from abuse, corporal punishment or harassment, and that incarcerated persons property is protected.

## 610.2 POLICY

It is the policy of this office to make every reasonable effort to protect incarcerated persons from personal abuse, corporal punishment, personal injury, disease, property damage and harassment by other incarcerated persons or staff. Staff shall take reasonable actions to safeguard vulnerable incarcerated persons from others and shall use the classification policies and procedures to make housing decisions that will provide for incarcerated person safety. Abuse of incarcerated persons by staff or other incarcerated persons will not be tolerated.

The Facility Manager or the authorized designee shall be responsible for including prohibitions against incarcerated person abuse and harassment, rules regarding respect for the property of others, and the prevention of disease in the inmate handbook. All incarcerated persons shall receive a copy of the handbook during the booking process, which shall be available in a language understood by the incarcerated person. The incarcerated person also shall receive verbal instruction on incarcerated person rights during orientation.

## 610.3 RESPONSIBILITY

It shall be the responsibility of all facility staff to adhere to policies, procedures and practices, and to make every reasonable effort to prevent injury to an incarcerated person, harassment and abuse, to prevent theft or damage to incarcerated persons property and to eliminate conditions that promote disease. These procedures include, but are not limited to:

- Following the classification guidelines for housing.
- Closely supervising incarcerated person activities and interceding as needed to prevent violence, harassment or abuse of incarcerated persons.
- Using force only when necessary and to the degree that is reasonable.
- Reporting all incarcerated person 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 incarcerated persons conducting kangaroo courts or dispensing discipline toward any other incarcerated person.
- Conducting required safety checks of all incarcerated person housing areas.
- Checking all safety equipment for serviceability and making a report of any defective equipment to the appropriate supervisor or Facility Manager.

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#### *Incarcerated Person Rights - Protection from Abuse*

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- Referring sick or injured incarcerated persons to a qualified health care professional without unnecessary delay.
- Maintaining high standards of cleanliness throughout the jail.
- Documenting all abuse protection efforts in facility logs and incident reports as applicable.

#### **610.4 TRAINING**

The Training Coordinator shall be responsible for developing and delivering a training curriculum on the topic of protecting incarcerated persons from abuse to all staff. A roster of attendees shall be maintained from each class. Training completion documents shall be filed in each employee's training file.



## Prison Rape Elimination Act

### 612.1 PURPOSE AND SCOPE

This policy provides guidance for compliance with the Prison Rape Elimination Act of 2003 (PREA) and the implementing regulation that establishes standards (PREA Rule) to prevent, detect, and respond to sexual abuse and sexual harassment (28 CFR 115.11; 15 CCR 1029).

#### 612.1.1 DEFINITIONS

Definitions related to this policy include:

**Intersex** - A person whose sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development (28 CFR 115.5).

**Sexual abuse** - Any of the following acts, if the incarcerated person does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse (28 CFR 115.6; 15 CCR 1006):

- (a) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight
- (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 incarcerated person, detainee, or resident:

- Contact between the penis and the vulva or the penis and the anus, including penetration, however slight
- Contact between the mouth and the penis, vulva, or anus
- Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire
- Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties, or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire
- Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties, or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire
- Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described above

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- Any display by a staff member, contractor, or volunteer of their uncovered genitalia, buttocks, or breast in the presence of an incarcerated person, detainee, or resident
- Voyeurism by a staff member, contractor, or volunteer

**Sexual harassment** - Repeated and unwelcome sexual advances; requests for sexual favors; verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one incarcerated person, detainee, or resident that are directed toward another; repeated verbal comments or gestures of a sexual nature to an incarcerated person, detainee, or resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures (28 CFR 115.6; 15 CCR 1006).

**Transgender** - A person whose gender identity (i.e., internal sense of feeling male or female) is different from the person's assigned sex at birth (28 CFR 115.5).

#### **612.2 POLICY**

This office has zero tolerance with regard to sexual abuse and sexual harassment in this facility. This office will take appropriate affirmative measures to protect all incarcerated persons from sexual abuse and harassment, and promptly and thoroughly investigate all allegations of sexual abuse and sexual harassment.

#### **612.3 TRAINING**

##### **EMPLOYEE, MEDICAL AND MENTAL HEALTH STAFF TRAINING**

- All employees including Medical and Mental Health staff who may have contact with incarcerated persons shall be trained on the Sheriff's Office zero-tolerance policy for sexual abuse and sexual harassment.
- The initial PREA training for Correctional Deputies shall take place during their Jail Training Program. Medical and Mental Health staff training shall take place within four months of assignment to the Sheriff's Office. The training shall include instruction related to the prevention, detection, response and investigation of incarcerated person sexual abuse.
- Correctional Sergeants, Medical and Mental Health Supervisors will provide refresher training to their employees by reviewing this policy with them during the month of January each year.
- Documentation of training and yearly refresher training will be through diploma, employee signature or electronic verification that employees understand the training they have received.
- All employees who are assigned to investigate sexual abuse cases will receive specialized training in conducting such investigations in confinement settings.

#### **612.4 PREA COORDINATOR**

The Facility Manager shall appoint an upper-level manager with sufficient time and authority to develop, implement, and oversee office efforts to comply with the PREA standards. The

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PREA coordinator shall review facility policies and practices, and make appropriate compliance recommendations to the Facility Manager (28 CFR 115.11).

The PREA coordinator's responsibilities shall include:

- (a) Developing a written plan to coordinate response among staff first responders, medical and mental health practitioners, investigators, and facility management to an incident of sexual abuse. The plan must also outline the office's approach to identifying imminent sexual abuse toward incarcerated persons and preventing and detecting such incidents (28 CFR 115.11; 28 CFR 115.65; 28 CFR 115.62).
- (b) Ensuring that within 30 days of intake, incarcerated persons are provided with comprehensive education, either in person or through video, regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding the office's policies and procedures for responding to such incidents (28 CFR 115.33).
- (c) Developing a staffing plan to provide adequate levels of staffing and video monitoring, where applicable, to protect detainees from sexual abuse. This includes documenting deviations and the reasons for deviations from the staffing plan, as well as reviewing the staffing plan a minimum of once per year. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration (28 CFR 115.13):
  - 1. Generally accepted detention and correctional practices.
  - 2. Any judicial findings of inadequacy.
  - 3. Any findings of inadequacy from federal investigative agencies.
  - 4. Any findings of inadequacy from internal or external oversight bodies.
  - 5. All components of the facility's physical plant, including blind spots or areas where staff or incarcerated persons may be isolated.
  - 6. The composition of the incarcerated person population.
  - 7. The number and placement of supervisory staff.
  - 8. Institution programs occurring on a particular shift.
  - 9. Any applicable state or local laws, regulations, or standards.
  - 10. The prevalence of substantiated and unsubstantiated incidents of sexual abuse.
  - 11. Any other relevant factors.
- (d) Ensuring that, when designing, acquiring, expanding, or modifying facilities, or when installing or updating a video-monitoring system, electronic surveillance system, or other monitoring technology, consideration is given to the office's ability to protect incarcerated persons from sexual abuse (28 CFR 115.18).
- (e) Ensuring that any contract for the confinement of office detainees or incarcerated persons includes the requirement to adopt and comply with the PREA standards including obtaining incident-based and aggregated data, as required in 28 CFR 115.187. Any new contract or contract renewal shall provide for office contract

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monitoring to ensure that the contractor is complying with the PREA standards (28 CFR 115.12).

- (f) Making reasonable efforts to enter into agreements with community service providers to provide incarcerated persons with confidential, emotional support services related to sexual abuse. The facility shall provide persons with access to outside victim advocates for emotional support services related to sexual abuse by giving incarcerated persons mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, state, or national victim advocacy or rape crisis organizations. The facility shall enable reasonable communication between incarcerated persons and these organizations and agencies in as confidential a manner as possible. The facility shall inform persons, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws (28 CFR 115.53).
- (g) Ensuring the protocol describing the responsibilities of the Office and of another investigating agency, if another law enforcement agency will be responsible for conducting any sexual abuse or sexual harassment investigations, is published on the facility website or by other means, if no website exists (28 CFR 115.22).
- (h) Implementing a process by which incarcerated persons may report sexual abuse and sexual harassment to a public/private entity or an office that is not part of the Office, and that the outside entity or office is able to receive and immediately forward incarcerated person reports of sexual abuse and sexual harassment to the Facility Manager, allowing the person anonymity (28 CFR 115.51; 15 CCR 1029).
- (i) Establishing a process to ensure accurate, uniform data is collected for every allegation of sexual abuse at facilities under the direct control of this office, using a standardized instrument and set of definitions. Upon request, the Office shall provide all such data from the previous calendar year to the U.S. Department of Justice (DOJ) no later than June 30 (28 CFR 115.87; 34 USC § 30303; 15 CCR 1041).
  - 1. The data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the U.S. DOJ.
  - 2. The data shall be aggregated at least annually.
- (j) Establishing a process to monitor the conduct and treatment of detainees or staff who have reported sexual abuse, and the conduct and treatment of detainees who were reported to have suffered sexual abuse.
- (k) Ensuring that the following are published on the office's website or by other means, if no website exists:
  - 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 incarcerated person (28 CFR 115.54)

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- (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 San Luis Obispo County Sheriff's Office informed of the progress of the investigation (28 CFR 115.71).
- (o) Ensuring that information for uninvolved incarcerated persons, family, community members, and other interested third parties to report sexual abuse or sexual harassment is publicly posted at the facility (15 CCR 1029).
- (p) Ensuring the Office conducts follow-up criminal background records checks at least once every five years on members or contractors who may have contact with incarcerated persons or has in place a system for otherwise capturing such information (28 CFR 115.17).

#### **612.5 REPORTING SEXUAL ABUSE, HARASSMENT, AND RETALIATION**

Any employee, agency representative, volunteer, or contractor who becomes aware of an incident of sexual abuse, sexual harassment, or retaliation against incarcerated persons or staff shall immediately notify a supervisor, who will forward the matter to a sexual abuse investigator (28 CFR 115.61). Staff may also privately report sexual abuse and sexual harassment of incarcerated persons (e.g., report to the Facility Manager) (28 CFR 115.51; 15 CCR 1029).

The facility shall provide information to all visitors or third parties on how they may report any incident, or suspected incident of sexual abuse, or sexual harassment to a staff member (28 CFR 115.54; 15 CCR 1029).

Incarcerated persons may report sexual abuse or sexual harassment incidents anonymously or to any staff member they choose. Staff shall accommodate all incarcerated person requests to report allegations of sexual abuse or harassment. Staff shall accept reports made verbally, in writing, anonymously, or from third parties and shall promptly document all verbal reports (28 CFR 115.51; 15 CCR 1029).

Threats or allegations of sexual abuse and sexual harassment, or retaliation, regardless of the source, shall be documented and referred for investigation. Sexual abuse and sexual harassment reports shall only be made available to those who have a legitimate need to know, and in accordance with this policy and applicable law (28 CFR 115.61).

##### **612.5.1 REPORTING TO OTHER FACILITIES**

If there is an allegation that an incarcerated person was sexually abused while the person was confined at another facility, the Facility Manager shall notify the head of that facility as soon as possible but not later than 72 hours after receiving the allegation. The Facility Manager shall ensure that the notification has been documented (28 CFR 115.63).

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#### **612.6 RETALIATION**

All incarcerated persons and staff who report sexual abuse or sexual harassment, or who cooperate with sexual abuse or sexual harassment investigations, shall be protected from retaliation.

Protective measures, including housing changes, transfers, removal of alleged abusers from contact with victims, administrative reassignment, or reassignment of the victim or alleged perpetrator to another housing area, and support services for incarcerated persons or staff who fear retaliation, shall be utilized (28 CFR 115.67; 15 CCR 1029).

The Facility Manager or the authorized designee shall assign a supervisor to monitor, for at least 90 days, the conduct and treatment of incarcerated persons or staff who report sexual abuse or sexual harassment, as well as persons who were reported to have suffered sexual abuse, to determine if there is any possible retaliation. The supervisor shall act promptly to remedy any such retaliation. The assigned supervisor should consider incarcerated person disciplinary reports, housing or program changes, negative staff performance reviews, or reassignment of staff members. Monitoring may continue beyond 90 days if needed. Incarcerated person monitoring shall also include periodic status checks. The Facility Manager should take reasonable steps to limit the number of people with access to the names of individuals being monitored and should make reasonable efforts to ensure that staff members who pose a threat of retaliation are not entrusted with monitoring responsibilities.

If any other individual who cooperates with an investigation expresses a fear of retaliation, the facility shall take reasonable measures to protect that individual against retaliation (28 CFR 115.67).

#### **612.7 FIRST RESPONDERS**

If an allegation of incarcerated person sexual abuse is made, the first deputy to respond shall (28 CFR 115.64):

- (a) Separate the parties.
- (b) Request medical assistance as appropriate. If no qualified health care or mental health professionals are on-duty when a report of recent abuse is made, staff first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate qualified health care and mental health professionals (28 CFR 115.82).
- (c) Establish a crime scene to preserve and protect any evidence. Identify and secure witnesses until steps can be taken to collect any evidence.
- (d) If the time period allows for collection of physical evidence, request that the alleged victim, and ensure that the alleged abuser, do not take any actions that could destroy physical evidence (e.g., washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, eating).
- (e) Consider whether a change in classification or housing assignment for the victim is needed or whether witnesses to the incident need protection, both of which may include reassignment of housing.

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- (f) Determine whether the alleged perpetrator should be administratively separated or administratively transferred during the investigation.

If the first responder is not a deputy, the responder shall request the alleged victim to refrain from any actions that could destroy physical evidence and then immediately notify a deputy.

Should an investigation involve incarcerated persons who have disabilities or who have limited English proficiency, the first responder shall not rely on incarcerated person interpreters, incarcerated person readers, or other types of incarcerated person assistants, except in limited circumstances where an extended delay in obtaining an interpreter could compromise incarcerated person safety, the performance of first responder duties, or the investigation of sexual abuse or sexual harassment allegations (28 CFR 115.16).

#### **612.8 SEXUAL ABUSE AND SEXUAL HARASSMENT INVESTIGATIONS**

An administrative investigation, criminal investigation or both shall be completed for all allegations of sexual abuse and sexual harassment (28 CFR 115.22). Administrative investigations shall include an effort to determine whether the staff's actions or inaction contributed to the abuse. All administrative and/or criminal investigations shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Only investigators who have completed office-approved training on sexual abuse and sexual harassment investigation shall be assigned to investigate these cases (28 CFR 115.71).

When practicable, an investigator of the same gender as the victim should be assigned to the case. Sexual abuse and sexual harassment investigations should be conducted promptly and continuously until completed. Investigators should evaluate reports or threats of sexual abuse and sexual harassment without regard to an incarcerated person's sexual orientation, physical gender, or gender identity. Investigators should not assume that any sexual activity among incarcerated persons is consensual.

The departure of the alleged abuser or victim from the employment or control of the 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).

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Incarcerated persons alleging sexual abuse shall not be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with an investigation (28 CFR 115.71).

If a victim considered a vulnerable adult under state law, the assigned investigator shall report the allegation to the designated social services agency as required (28 CFR 115.61).

#### 612.8.1 INVESTIGATIVE FINDINGS

All completed written investigations shall be forwarded to the Facility Manager or, if the allegations may reasonably involve the Facility Manager, to the Sheriff. The Facility Manager or Sheriff shall review the investigation and determine whether any allegations of sexual abuse or sexual harassment have been substantiated by a preponderance of the evidence (28 CFR 115.71; 28 CFR 115.72).

The staff shall be subject to disciplinary actions, up to and including termination, for violating this policy. Termination shall be the presumptive disciplinary action for staff members who have engaged in sexual abuse. All discipline shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the actions imposed for comparable offenses by other staff with similar histories.

All terminations for violations of sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to the law enforcement agency that would handle any related investigation and to any relevant licensing bodies (28 CFR 115.76).

#### 612.8.2 REPORTING TO INCARCERATED PERSONS

The Facility Manager or the authorized designee shall inform a victim incarcerated person in writing whether an allegation has been substantiated, unsubstantiated, or unfounded. If the Office did not conduct the investigation, the Office shall request relevant information from the investigative agency in order to inform the incarcerated person.

If a staff member is the accused (unless the Office has determined that the allegation is unfounded), the incarcerated person shall also be informed whenever:

- (a) The staff member is no longer assigned to the incarcerated person's unit or employed at the facility.
- (b) The Office learns that the staff member has been indicted or convicted on a charge related to sexual abuse within the facility.

If another incarcerated person is the accused, the alleged victim shall be notified whenever the Office learns that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility.

All notifications or attempted notifications shall be documented. When notification is made while the incarcerated person is in custody, the incarcerated person will sign a copy of the notification letter. The letter will be added to the case file (28 CFR 115.73).



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#### **612.9 SEXUAL ABUSE AND SEXUAL HARASSMENT BETWEEN STAFF AND INCARCERATED PERSONS**

Sexual abuse and sexual harassment between staff, volunteers or contract personnel and incarcerated persons is strictly prohibited. The fact that an incarcerated person may have initiated a relationship or sexual contact is not recognized as a defense to violating this policy.

Any incident involving allegations of staff-on-incarcerated person sexual abuse or sexual harassment shall be referred to the Professional Standards Unit for investigation.

##### **612.9.1 SEXUAL ABUSE CONTRACTOR AND VOLUNTEER AGREEMENT**

Any Contractor or Volunteer that will have contact or potentially have contact with incarcerated persons, either within or outside of the facility, shall review the San Luis Obispo Sheriff's Office Prison Rape Elimination Act Policy. After reviewing the Policy contractors and volunteers will be required to sign a contracted agreement outlining the understanding and implementation of the Policy. Contractors and volunteers will also be provided with the San Luis Obispo Sheriff's Office Volunteer and Contractor Prison Rape Elimination Act information sheet.

##### **612.9.2 SEXUAL ABUSE BY CONTRACTOR OR VOLUNTEER**

Any contractor or volunteer who engages in sexual abuse within the facility shall be immediately prohibited from having any contact with incarcerated persons. The contractor or volunteer shall be promptly reported to the law enforcement agency that would investigate such allegations and brought to the attention of any relevant licensing bodies (28 CFR 115.77).

#### **612.10 SEXUAL ABUSE VICTIMS**

Incarcerated persons who are victims of sexual abuse shall be transported to the nearest appropriate location for treatment of injuries and collection of evidence, and for crisis intervention services (28 CFR 115.82). Depending on the severity of the injuries, transportation may occur by a staff member or by ambulance, in either case with appropriate security to protect the staff, the incarcerated person, and the public, and to prevent escape.

A victim advocate from a rape crisis center should be made available to the victim. If a rape crisis center is not available, the Office shall make available a qualified member of a community-based organization, or a qualified health care or mental health professional from the Office, to provide victim advocate services. Efforts to secure services from a rape crisis center shall be documented. A rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in (34 USC § 12511), to sexual assault victims of all ages. A rape crisis center that is part of a government unit may be used if it is not part of the criminal justice system (such as a law enforcement agency) and it offers a level of confidentiality comparable to the level at a nongovernmental entity that provides similar victim services (28 CFR 115.21).

#### **612.11 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

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shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANE)s. If neither SAFEs nor SANEs are available, other qualified medical practitioners can perform the examination. The Office shall document its efforts to provide SAFEs or SANEs (28 CFR 115.21).

- (b) If requested by the victim, a victim advocate, a qualified office staff member, or a qualified community organization staff member shall accompany the victim through the forensic medical examination process and investigatory interviews. That person will provide emotional support, crisis intervention, information, and referrals (28 CFR 115.21).
- (c) Provisions shall be made for testing the victim for sexually transmitted diseases (28 CFR 115.82).
- (d) Counseling for the treatment of sexually transmitted diseases, if appropriate, shall be provided.
- (e) Victims shall be offered information about, and given access to, emergency contraception, prophylaxis for sexually transmitted infections, and follow-up treatment for sexually transmitted diseases (28 CFR 115.82; 28 CFR 115.83). This shall be done in a timely manner.
- (f) Victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the abuse, such victims shall receive comprehensive information about, and access to, all lawful pregnancy-related medical services (28 CFR 115.83). This shall be done in a timely manner.
- (g) Victims shall be provided with follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody (28 CFR 115.83).
- (h) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident (28 CFR 115.82; 28 CFR 115.83).
- (i) The health authority or mental health staff shall obtain informed consent from incarcerated persons before reporting information to jail staff about prior sexual victimization that occurred somewhere other than an institutional setting unless the incarcerated person is under the age of 18 (28 CFR 115.81).
- (j) Medical and mental health practitioners shall ensure that information related to sexual victimization that occurred in an institutional setting is limited to medical and mental health practitioners and other staff unless it is necessary to inform jail staff about security or management decisions (28 CFR 115.81).

#### **612.12 PROTECTIVE CUSTODY**

Incarcerated persons at high risk for sexual victimization shall not be placed in involuntary protective custody unless an assessment of available alternatives has been made and it has been determined that there is no reasonably available alternative means of separation. Incarcerated persons may be held in involuntary protective custody for less than 24 hours while an assessment is completed.

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If an involuntary protective custody assignment is made because of a high risk for victimization, the Facility Manager shall clearly document the basis for the concern for the incarcerated person's safety and the reasons no alternative means of separation can be arranged (28 CFR 115.43).

The facility shall assign these persons to involuntary protective custody only until an alternative means of separation from likely abusers can be arranged, not ordinarily in excess of 30 days.

Incarcerated persons placed in temporary protective custody shall continue to have reasonable access to programs, privileges, education, and work opportunities. If restrictions are put in place, the Facility Manager shall document the following:

- (a) The opportunities that have been limited
- (b) The duration of the limitation
- (c) The reasons for such limitations

Every 30 days, the Facility Manager shall afford each such incarcerated person a review to determine whether there is a continuing need for protective custody (28 CFR 115.43).

#### **612.13 SEXUAL ABUSE INCIDENT REVIEW**

An incident review shall be conducted at the conclusion of every sexual abuse investigation unless the allegation has been determined to be unfounded (28 CFR 115.86). The review should occur within 30 days of the conclusion of the investigation.

The review team shall include upper-level management officials and seek input from line supervisors, investigators, and qualified health care and/or mental health professionals, as appropriate:

- (a) Consider whether the investigation indicates a need to change policy or practice in order to better prevent, detect, or respond to sexual abuse.
- (b) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification status or perceived status; gang affiliation; or other group dynamics at the facility.
- (c) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers may enable abuse.
- (d) Assess the adequacy of staffing levels in the area during different shifts.
- (e) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.
- (f) Prepare a written report of the team's findings, including but not limited to determinations made pursuant to paragraphs (a)-(e) of this section, and any recommendations for improvement. The report should be submitted to the Sheriff and the PREA coordinator.

The Facility Manager or the authorized designee shall implement the recommendations for improvement or document the reasons for not doing so.

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#### **612.14 DATA REVIEWS**

This office shall conduct an annual review of collected and aggregated incident-based sexual abuse data. The purpose of these reviews is to assess and improve the effectiveness of sexual abuse prevention, detection, and response policies, practices, and training by:

- (a) Identifying problem areas.
- (b) Identifying corrective actions taken.
- (c) Recommending corrective actions.
- (d) Comparing current annual data and corrective actions with those from prior years.
- (e) Assessing the office's progress in addressing sexual abuse.

The reports shall be approved by the Facility Manager and made available through the office website. Material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of the facility. However, the nature of the redacted material shall be indicated (28 CFR 115.88).

All aggregated sexual abuse data from San Luis Obispo County Sheriff's Office facilities and private facilities with which it contracts shall be made available to the public at least annually through the office website. Before making aggregated sexual abuse data publicly available, all personal identifiers shall be removed (28 CFR 115.89).

#### **612.15 RECORDS**

All case records and reports associated with a claim of sexual abuse and sexual harassment, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment or counseling, shall be retained in accordance with confidentiality laws.

The Office shall retain all written reports from administrative and criminal investigations pursuant to this policy for as long as the alleged abuser is held or employed by the Office, plus five years (28 CFR 115.71).

All other data collected pursuant to this policy shall be securely maintained for at least 10 years after the date of the initial collection, unless federal, state or local law requires otherwise (28 CFR 115.89).

#### **612.16 PRESERVATION OF ABILITY TO PROTECT INCARCERATED PERSONS**

The Office shall not enter into or renew any collective bargaining agreement or other agreement that limits the office's ability to remove alleged staff sexual abusers from contact with any incarcerated persons pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted (28 CFR 115.66).

## Grooming

### 616.1 PURPOSE AND SCOPE

The purpose of this policy is to allow incarcerated persons 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, classification status, work status, safety and security, or health and hygiene.

### 616.2 POLICY

It is the policy of this facility to allow incarcerated persons choice in personal grooming, except when a valid government interest justifies that grooming standards be established. The Facility Manager or the authorized designee shall establish incarcerated person grooming standards specific to classification, work status, facility safety and security, or health and hygiene. Any established standards should not unreasonably interfere with religious observances. Grooming standards should be identified in the incarcerated person handbook.

### 616.3 HAIRCUTS

Incarcerated persons 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. Incarcerated persons who significantly alter their appearance may be required to submit to additional booking photos.

Incarcerated persons shall not cut names, numbers, or other designs into their hair. Incarcerated persons shall not manipulate their hair into any style, including but not limited to braids, ponytails, cornrows, or twists, that could facilitate the concealment and movement of contraband and weapons.

#### 616.3.1 HAIR CARE SERVICES

The Facility Manager or the authorized designee shall establish written procedures for incarcerated person 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.

Incarcerated persons 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 incarcerated person appears to be a danger to themselves or others or to the safety and security of the facility.

### 616.4 SHAVING

Incarcerated persons may shave daily. Facial hair shall be clean and well groomed. Long beards may allow persons to conceal weapons or contraband. Incarcerated persons may be required to trim facial hair if it poses a security or safety risk. Incarcerated persons may be required to submit to new booking photographs if their appearance is significantly altered due to facial hair. Incarcerated persons with facial hair who work around food shall wear appropriate facial coverings.

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An incarcerated person may be denied access to razors if they appear to be a danger to themselves or others, or if such access may jeopardize the safety and security of the facility.

Incarcerated persons may be restricted from significantly altering their appearance for reasons of identification in court (15 CCR 1267(b)).

#### **616.5 NAILS**

Nail clippers will be kept at each housing unit office and will be issued to incarcerated persons upon request. Incarcerated person workers are required to keep their nails clean and trimmed. Incarcerated persons with long nails may be required to trim their nails if there is a security concern and the incarcerated person is admitted to general population.

#### **616.6 GROOMING EQUIPMENT**

Grooming equipment is to be inventoried and inspected by the staff at the beginning of each shift and prior to being issued to incarcerated persons. The staff shall ensure that all equipment is returned by the end of the shift and is not damaged or missing parts.

Grooming equipment will be disinfected before and after each use by the methods approved by the State Board of Barbering and Cosmetology to meet the requirements of (16 CCR 979; 16 CCR 980; 15 CCR 1267(c)). Cleaning methods include:

- Removing foreign matter.
- Cleaning tools with soap or detergent and water.
- Immersing non-electrical equipment in disinfectant.
- Spraying electrical equipment with disinfectant.
- Storing cleaned equipment in clear, covered containers that are labeled as such.

Disinfectant solution shall be changed at least once per week or whenever the solution is cloudy or dirty. Solution will be stored in covered containers with labeled instructions for its use and the Environmental Protection Agency registration number.

#### **616.7 SHOWERING**

Incarcerated persons shall be permitted to shower upon assignment to a housing unit, at least every other day thereafter and more often if practicable (15 CCR 1266).

#### **616.8 PERSONAL CARE ITEMS**

Incarcerated persons are expected to maintain their hygiene using approved personal care items. Personal care items, including disposable razors, toothbrushes, combs and soap, are available through commissary and will be charged to the inmate's account.

Indigent incarcerated persons shall receive hygiene items necessary to maintain an appropriate level of personal hygiene.

No incarcerated person 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.).

## Nondiscrimination

### 618.1 PURPOSE AND SCOPE

The constitutional rights of persons regarding discrimination are protected during incarceration. These protections extend to administrative decisions ( e.g., classification, access to programs, availability of services). This policy is intended to guide the staff toward nondiscriminatory administrative decisions and to detail an incarcerated person complaint and discrimination investigation process.

### 618.2 POLICY

All decisions concerning incarcerated persons housed at this facility shall be based on reasonable criteria that support the health, safety, security, and good order of the facility.

### 618.3 INCARCERATED PERSONS REPORTING DISCRIMINATION

Incarcerated persons who wish to report an allegation of discrimination may communicate with facility management in any way, including:

- (a) Confidential correspondence addressed to the Facility Manager 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.

#### 618.3.1 HANDLING COMPLAINTS OF DISCRIMINATION

Staff shall promptly forward all written allegations of discrimination by incarcerated persons to the on-duty Correctional Sergeant. 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 incarcerated person is clearly identified as confidential and addressed to the Facility Manager, Sheriff, or other official, the Correctional Sergeant shall review the complaint and attempt to resolve the issue. In any case, the Correctional Sergeant shall document the circumstances of the allegation and what actions, if any, were taken to investigate or resolve the complaint. All reports of alleged discrimination shall be forwarded to the Facility Manager 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 incarcerated person's classification
- (b) The incarcerated person'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

#### **618.4 DISCRIMINATION COMPLAINT AUDITS**

The Facility Manager should perform an annual audit of all incarcerated person discrimination complaints to evaluate whether any policy or procedure changes or training are indicated. The Facility Manager should record these findings in a confidential memorandum to the Sheriff. Specific details of complaints and identifying information, such as names of the involved persons, dates, or times, are not part of this process and should not be included in the memorandum. If the audit identifies any recommended changes or content that may warrant a critical revision to this Custody Manual, the Facility Manager should promptly notify the Sheriff.

Any training issues identified as a result of this audit should be forwarded to the Training Coordinator, who shall be responsible for ensuring all necessary and required training is scheduled and completed.

#### **618.5 DISCRIMINATION PROHIBITED**

Discriminating against an incarcerated person 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 incarcerated persons in a nondiscriminatory manner.

The Facility Manager should periodically conduct interviews with incarcerated persons and staff members to identify and resolve potential problem areas related to discrimination before they occur.



## Grievances

### 620.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process by which inmates may file grievances and receive a formal review regarding the conditions of their confinement. This includes an incarcerated person's right to challenge the physical or mental health care provided by the San Luis Obispo County Jail.

This policy is also established to explain the procedures for incarcerated persons to grieve concerns about whether their confinement is consistent with the Americans with Disabilities Act of 1990 (ADA) and other rights guaranteed by Federal and State law. The San Luis Obispo County Jail will afford access to this procedure to any incarcerated person who wishes to file a grievance alleging discrimination on the basis of disability by the San Luis Obispo County Jail.

The San Luis Obispo County Jail will provide all incarcerated persons with information about the existence and provisions of its grievance procedure, among other ways, by publishing information in the Rulebook and posting information in conspicuous locations throughout the facility. Information regarding the grievance procedure will be provided to incarcerated persons in a language and format accessible to the incarcerated person as outlined in 620.2.3 and 620.4 of this policy.

### 620.2 POLICY

Any incarcerated person may file a grievance relating to conditions of confinement, including, but not limited to, release date, physical or mental health care, denial of an ADA reasonable modification, inaccessible facilities, failure to provide auxiliary aids and services, 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).

Subjects that cannot be resolved through the grievance process include challenges to state or local laws, court decisions, probation/parole actions, and requests for punishment of any kind toward any staff member. Retaliation for use of the grievance system, such as any punishment of any kind, is prohibited.

Incarcerated persons have the right to communicate concerns regarding health treatment and services to receive a response. Responses to incarcerated persons' grievances are completed by Wellpath Staff in accordance with the Sheriff's Office policies and procedures. Health care service grievances will be reviewed on a routine basis by the site CQI Committee. All grievances addressed to Wellpath will be reviewed by the Sheriff's Office Chief Medical Officer or designated jail command staff in accordance with this policy.

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#### 620.2.1 DEFINITIONS

Inmate Grievance Form – A form available to inmates, to grieve any condition relating to condition of confinement as described above. The form will be reviewed and answered at the Supervisory level (Correctional Sergeant, Kitchen / Nursing Supervisor or Mental Health Site Leader).

Grievance Appeal Form – A form provided to incarcerated persons, to appeal a decision made by a lower command level.

Responsible Health Authority (RHA) – a designated individual or entity that is tasked with ensuring the organization and delivery of all health care in the facility. It may be a physician, health services administrator (HSA), or agency. (NCCHC 2018)

Health Services Administrator (HSA) – a person who by education, experience, or certification is capable of assuming responsibility for arranging all levels of health care and ensuring quality and accessible health services for inmates. (NCCHC 2018)

Three-Tiered Grievance Process –

- (a) Level 1 – is the lowest level of the grievance process directed to the Supervisory level. Overseeing Supervisors include Correctional Sergeant, Kitchen Supervisor, Nursing Supervisor, Mental Health Manager, and ADA Compliance Officer.
- (b) Level 2 – is the first level of appeal directed to the Custody Operations Lieutenant, Support Services Lieutenant, Nurse Practitioner or Mental Health Nurse Practitioner.
- (c) Level 3 – is the final level of appeal directed to the Custody Bureau Captain, Medical Director or Psychiatrist.

Americans with Disabilities Act (ADA) – a civil rights law that prohibits discrimination based on disability.

Auxiliary Aids – are aids to ensure effective communication with individuals with hearing, vision or other impairments, including, but not limited to, qualified interpreters, qualified readers, written materials to exchange written notes, telephone handset amplifiers, assistive listening devices or systems and or compatible with hearing aids, text telephone (TTY) system or video relay system (Purple), taped texts, audio recordings, Braille materials and displays, optical readers, and large print materials.

Grievance System Abuse – the repetitive, burdensome, and unwarranted filing of meritless grievances.

Substantive Resolution – a resolution of a grievance that addresses the incarcerated person's underlying request or allegation.

Grievance Category – an umbrella of responsibility where a supervisor oversees an area and responds to grievances which may contain multiple grievable items.

#### 620.2.2 ACCESS TO THE GRIEVANCE SYSTEM

All incarcerated persons shall have access to the grievance system, and procedures. Incarcerated persons will receive information concerning the grievance procedure in the Rulebook, and through

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conspicuous postings in the facility. Information regarding the grievance process will be provided to incarcerated persons with disabilities utilizing appropriate auxiliary aids in compliance with the Americans with Disabilities Act. The Sheriff's Office will ensure that grievance forms are available to all incarcerated persons upon request and in all housing locations where Request Slips are stored or distributed.

The information will include (15 CCR) 1073(a) and (b)):

- A grievance form and instructions for registering a grievance.
- Instructions for the resolution of the grievance at the lowest appropriate staff level.
- The appeal process to the next level of review.
- Written reasons for denial of a grievance at each level of review.
- A provision explaining required time frames for responses.
- A provision for resolving questions of jurisdiction within the facility.
- Consequences for abusing the grievance system.

The San Luis Obispo County Jail will ensure that all incarcerated persons, including those with disabilities, have equal and meaningful access to the grievance system. Failing to provide an incarcerated person with a grievance form, failing to respond appropriately to a grievance, destroying or concealing grievances, attempting to intimidate an incarcerated person from filing a grievance, and retaliating against an incarcerated person who has filed a grievance is prohibited and, shall each be cause for disciplinary action in accordance with policy §340.3.5(c)(d)(q)(ab).

#### 620.2.3 GRIEVANCE PROVISIONS

The San Luis Obispo County Jail has taken steps to ensure all inmates have meaningful access to the grievance process. Inmates will receive information concerning the grievance procedure in the Inmate Rulebook, and through conspicuous postings in the facility. Information regarding the grievance process will be provided to inmates with disabilities utilizing appropriate auxiliary aids in compliance with the Americans with Disabilities Act. The Sheriff's Office will ensure that grievance forms are available to all inmates and in all housing locations where Inmate Request Slips are stored or distributed. This includes inmate grievance information, in English and Spanish, explaining how to file a grievance will be provided to inmates who are deaf or hard of hearing or are non-English or limited English speakers. When needed, auxiliary aids and services will be provided to an inmate to explain how to file a grievance. Inmates who are blind, inmates with low literacy, and inmates who have physical or cognitive disabilities will be assisted by staff in filing grievances. This includes but is not limited to, assistance in writing a grievance, or appeal, explaining the grievance forms, interpreting, or reading aloud responses, and procuring, completing, submitting appeal paperwork, and where needed, auxiliary aids will be used.

Jail staff or Wellpath staff may assist inmates in completing grievances upon request.

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#### **620.3 GRIEVANCE PROCEDURES**

After completing a grievance form or appeal form, the incarcerated person will place the completed form in a grievance lockbox or provide the completed form to any staff member. Grievance lockboxes are located in every housing unit throughout the facility and are available to, and physically accessible to all incarcerated persons daily. Lockboxes will be utilized to enable incarcerated persons to submit grievances confidentially or anonymously. Furthermore, incarcerated persons in restrictive housing units will have daily opportunities to obtain and submit grievances during their allotted dayroom and recreation yard times but will also be provided grievance forms upon request. Grievances will be collected by a Correctional Sergeant daily. The Correctional Sergeant collecting grievances will be responsible for logging and routing grievances each day as outlined in this policy, §620.3.2.

Upon receiving a completed form, the overseeing supervisor shall ensure that the grievance is investigated and resolved or denied within the timeframe listed below and as established by the Correctional Captain. Timeframes are listed on grievance forms and in the Rulebook.

- A grievance must be filed as soon as the issue has been identified, but no later than 60 calendar days after the incarcerated person becomes aware of the issue being grieved.
- Staff will respond to grievances as soon as they are received, but no later than 10 calendar days after the date the grievance was submitted.
  - This allows for sufficient time to meet with incarcerated persons and address ADA grievances as outlined in this policy, §620.4.
  - Anonymous grievances will answered in accordance Level 1 procedures and will be stored in the appropriate file.
- Appeals must be filed no later than 15 calendar days after receiving a written response of resolution or denial.
- Staff will respond to appeals as soon as they are received, but no later than 15 calendar days after the date the appeal was submitted.
  - This allows for sufficient time to meet with incarcerated persons and address ADA appeals as outlined in this policy, §620.4.

Grievances shall be routed in the following manner. Grievances that involve multiple departments will be routed to each intersecting department for collaborated responses.

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GRIEVANCE CATEGORY	LEVEL 1 - Grievance	LEVEL 2 - Appeal	LEVEL 3 - Appeal
ADA	ADA Compliance Officer*	Correctional Lieutenant / Nurse Practitioner	Correctional Captain / Medical Director
Classification	Classification Sergeant	Correctional Lieutenant	Correctional Captain
Commissary	Honor Farm Sergeant	Correctional Lieutenant	Correctional Captain
Court Services	Transportation Sergeant	Correctional Lieutenant	Correctional Captain
Honor Farm	Honor Farm Sergeant	Correctional Lieutenant	Correctional Captain
Jail Operations	On-Duty Sergeant	Correctional Lieutenant	Correctional Captain
Kitchen	Kitchen Supervisor	Correctional Lieutenant	Correctional Captain
Medical	Nursing Supervisor	Nurse Practitioner	Medical Director
Mental Health	Mental Health Manager	Mental Health Practitioner	Psychiatrist
Programs	Jail Programs Sergeant	Correctional Lieutenant	Correctional Captain

\*Or to the Chief Medical Officer if the ADA Coordinator is the subject of the grievance.

#### 620.3.1 CORRECTIONAL DEPUTY RESPONSIBILITIES

1. Senior Correctional Deputies and Correctional Deputies are responsible for making grievance forms, including appeal forms, available to all incarcerated persons.
2. Senior Correctional Deputies and Correctional Deputies may assist an incarcerated person in completing grievance and appeal forms if requested by the incarcerated person.
3. All completed grievances and all completed appeals may be placed in accessible lockboxes throughout the facility or provide the completed form to any staff member if the incarcerated persons chooses. If provided to a staff member, the completed form must be forwarded to the on-duty Correctional Sergeant the same day.

#### 620.3.2 CORRECTIONAL SERGEANT RESPONSIBILITIES

1. A Correctional Sergeant will verify if there are grievances to be collected from housing units and be responsible for collecting all grievances and appeals from lockboxes. This shall be completed on a daily basis.
2. After collecting all grievances, the Correctional Sergeant will log the grievances.
3. The Correctional Sergeant will assign the next sequential number available from the grievance log to the collected grievance.
4. The Correctional Sergeant will then sign, date, and time the grievance form.
5. A copy of the Correctional Sergeant signed and dated grievance form will be returned to the incarcerated person in an envelope as a receipt.
6. The Correctional Sergeant will log the grievance in the grievance log, noting the incarcerated person's name, ID#, date, and routing location.
7. The Correctional Sergeant will make three photocopies of the grievance, routing one copy to Classification, one to the Custody Bureau Legal Clerk and placing the other copy in the grievance log behind the form's assigned number tab.
8. The Correctional Sergeant will then forward the original grievance form to the intended recipient.

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9. Anonymous grievances will follow the above procedures excluding any incarcerated person information.

#### 620.3.3 OVERSEEING SUPERVISOR RESPONSIBILITIES

Overseeing supervisors shall attempt to resolve all grievances at the first level. Overseeing supervisors will respond to first level grievances with a written resolution or denial. Denials and all attempts to resolve a grievance shall be documented in the Grievance Log. If there is no resolution at this level or if the grievance is denied, a form will be available to appeal to the next level.

1. The overseeing supervisor responding to the grievance will verify the form is completed and determine if the grievance meets criteria to be accepted or denied as outlined in this policy, §620.2.
2. Grievances that are denied will be processed by the following procedure:
  - (a) The overseeing supervisor will check the box "Denied". If it is for technical grounds (unrelated to the substance of the grievance), the supervisor will explain the technical deficiency to the incarcerated person, in writing, and provide the incarcerated person 10 days to cure by correcting the error and resubmitting the grievance.
  - (b) Grievances that involve multiple departments will be routed to each intersecting department for collaborated responses.
  - (c) The overseeing supervisor will fill out the grievance log, noting their name, the date it was responded to, and that the grievance was "Denied."
  - (d) The overseeing supervisor will make two photocopies of all documents. One copy will be placed in the grievance log behind its numerical matching tab. The second copy will be forwarded to the Custody Bureau Legal Clerk.
  - (e) The original grievance will be returned to the incarcerated person in a sealed envelope, to protect anonymity, with the responder's initials and ID#.
3. Grievances that meet criteria to be accepted will be processed by the following procedure:
  - (a) The overseeing supervisor will answer the grievance and check the "Accepted" box.
  - (b) The overseeing supervisor will fill out the grievance log, noting their name, and the date it was responded to.
  - (c) The overseeing supervisor will make two photocopies of all documents. One copy will be placed in the grievance log behind its numerical matching tab. The second copy will be forwarded to the Custody Bureau Legal Clerk.
  - (d) The original grievance will be returned to the inmate in a sealed envelope, to protect anonymity, with the responder's initials and ID#. A Level-2 appeal form will be included in the envelope. The form shall include the assigned grievance number from Level-1.

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#### 620.3.4 APPEAL PROCEDURES

The process for collecting grievance appeals will mirror the collection process of initial grievance forms. Appeals will be routed to the next appropriate command level.

1. The appropriate command level responding to the appeal will verify the form is completed and determine if the grievance meets criteria to be accepted or denied as outlined in this policy. §620.2
2. Appeals that are denied will be processed by the following procedure:
  - (a) The overseeing supervisor will check the box "Denied". If it is for technical grounds (unrelated to the substance of the grievance), the supervisor will explain the technical deficiency to the incarcerated person, in writing, and provide the inmate 10 days to cure by correcting the error and resubmitting the grievance.
  - (b) The appropriate command level will assign a Correctional Sergeant to continue the appeal logging process.
  - (c) The Correctional Sergeant will fill out the grievance log, noting the command level's name, the date it was denied, and noting "Denied."
  - (d) The Correctional Sergeant will make two photocopies of all documents. One copy will be placed in the grievance log behind its numerical matching tab. The second copy will be forwarded to the Custody Bureau Legal Clerk.
  - (e) The original grievance will be returned to the incarcerated person in a sealed envelope, to protect anonymity. The Correctional Sergeant will initial and ID# the envelope.
3. Appeals that meet criteria to be accepted will be processed by the following procedure:
  - (a) The appropriate command level will answer the grievance and check the "Accepted" box.
  - (b) The appropriate command level will assign a Correctional Sergeant to continue the appeal logging process.
  - (c) The Correctional Sergeant will fill out the grievance log noting the command level's name and the date it was responded to.
    - i. For Level 3 – Final responses, note "Exhausted" in the final column of the grievance log.
  - (d) The Correctional Sergeant will make two photocopies of all documents. One copy will be placed in the grievance log behind its numerical matching tab. The second copy will be forwarded to the Custody Bureau Legal Clerk.
  - (e) The original grievance and appeal(s) will be returned to the incarcerated person in a sealed envelope to protect anonymity. The Correctional Sergeant will initial and ID# the envelope. An additional appeal form is not needed due to Level-2 and 3 forms being double sided. Verify Level-3 has the grievance number corresponding to Level-1 and Level-2.

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#### **620.4 ADA GRIEVANCE AND APPEAL RESOLUTION**

Inmates may file a grievance related to disability within 60 calendar days of an incident and it will be handled within the time frame consistent with this policy, §620.2 & §620.3.

The following considerations shall be made for ADA grievances:

Within 5 calendar days after receiving an ADA grievance, the ADA Compliance Officer or designee will meet with the inmate to discuss possible resolutions. Within 5 calendar days after the meeting, the ADA Compliance Officer or designee shall respond in writing, and where appropriate, in a language and format accessible to the inmate, such as large print, Braille, or verbal explanation of the county jail's position and offer options for a substantive resolution of the grievance. For any grievance that is denied, the inmate shall be given a copy of the San Luis Obispo County Jail's grievance appeal form. All resolutions of the grievances shall be documented in the grievance log.

Inmates may appeal the decision of any grievance to the next appropriate command level and within the set timeframe as outlined in this policy, §620.3 & §620.3.4.

The following consideration shall be made for ADA appeals:

Within 7 calendar days after receiving an ADA appeal, the Correctional Lieutenant, or Nurse Practitioner and ADA Compliance Officer will meet with the inmate to discuss possible resolutions if there is new information to be addressed. Within 7 calendar days after the meeting, the Correctional Lieutenant, or Nurse Practitioner shall respond in writing, and where appropriate, in a language and format accessible to the inmate, such as large print, Braille or a verbal explanation of the county jail's position and offer options for a substantive resolution of the grievance and appeal.

Inmates may appeal the findings of the Correctional Lieutenant, Nurse Practitioner, or designee if the response does not resolve the issue to the inmate's satisfaction. This appeal will be directed to the Correctional Captain, Medical Director, or designee within 15 calendar days after receipt of the appeal response.

Within 7 calendar days after receiving an ADA appeal, the Correctional Captain, or Medical Director and ADA Compliance Officer will meet with the inmate to discuss possible resolutions if there is new information to be addressed. Within 7 calendar days after the meeting, the Correctional Captain, or Medical Director shall respond in writing, and where appropriate, in a language and format accessible to the inmate, such as large print, Braille or a verbal explanation of the county jail's position and offer options for a substantive resolution of the grievance and appeal.

The individual reviewing an appeal cannot be the same individual who reviewed the initial grievance.

#### **620.5 RECORDING GRIEVANCES**

The Correctional Captain shall 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, in the Grievance Log. Periodic reviews of the log shall be made by the Administrative Correctional Sergeant to ensure that grievances are being handled properly and



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in a timely manner consistent with this policy. A copy of each grievance shall be filed with the Custody Bureau Legal Clerk.

All written grievances received by this facility, appeals of grievance decisions, and any responses from the county jail will be retained by the San Luis Obispo County Jail for the duration of the incarcerated person's incarceration or 5 years, whichever is longer. This facility shall maintain a log with a record of informal resolutions of requests before grievance forms were completed, the grievances, the nature of the grievances, any responses to the grievances, whether the grievances were denied or upheld, any appeals, and the results of any appeal. The log will also include the dates that grievances were submitted, responded to, appealed, and responded to an appeal. All information regarding the handling of an incarcerated person's grievance shall also be recorded in the incarcerated person's file.

A copy of the original grievance shall be retained in a file maintained by the Administrative Correctional Sergeant and shall be retained in accordance with established records retention schedules, indicated above.

#### **620.6 ABUSE OF THE GRIEVANCE SYSTEM**

If an incarcerated person files repetitive grievances that are frivolous in nature or concern an established policy or practice of the Sheriff's Office that the incarcerated person claims violate his / her rights, when no good faith legal argument exists that the policy or practice amounts to a violation of the incarcerated person's statutory or constitutional rights and/or are repetitive, burdensome, and unwarranted and meritless, this may be considered an abuse of the grievance system.

Only the Correctional Captain or his/her designee can determine what constitutes an abuse of the grievance system. If so, the incarcerated person's use of the grievance system shall be monitored for a period of 30 days. The timeline will be noted in the Grievance Log for record keeping purposes.

During this 30-day period, the incarcerated person shall continue to have the right to file grievances; however, his or her grievance may, at the discretion of the Correctional Captain or designee, be denied without any right of appeal.

1. The Correctional Lieutenant will note at the bottom of the grievance form; "This is a frivolous grievance," return a copy to the incarcerated person and forward a copy to the Custody Bureau Legal Clerk, and the Grievance Log for record keeping purposes.
2. If a grievance filed by an incarcerated person under 30-day monitoring is deemed frivolous, the incarcerated person shall have his or her 30-day period reset, and a new 30-day period shall commence. This action will be documented in the Grievance Log.

#### **620.7 GRIEVANCE AUDITS**

A Correctional Captain shall perform an audit biannually. The audit shall analyze grievances to ensure the timely resolution of grievances and identify any problematic trends such as no

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responses to multiple request slips, delays in specialty care, failure to provide accommodations, failure to identify a grievance as an ADA-based grievance, or delays in responding to grievances.

The Correctional Captain shall forward a memorandum to the Sheriff, via the Chain of Command, detailing the findings, including recommendations regarding any changes to policy or procedures or any additional training that might be warranted to reduce future grievances.

The Sheriff shall evaluate the recommendations and ensure appropriate action is taken.

Any training issues identified as a result of this audit should be forwarded to the Training Coordinator, who will be responsible for ensuring all necessary and required training is scheduled and completed.

#### **620.8 GRIEVANCES RELATED TO SEXUAL ABUSE**

This agency provides several ways an incarcerated person can report an allegation of sexual abuse. (28 CFR 115.51)

Incarcerated persons may submit a grievance regarding an allegation of sexual abuse at any time. The 60 calendar-day time frame outlined in this policy does not apply to grievances regarding the Prison Rape Elimination Act (PREA). (28 CFR 115.52)

Grievances may be submitted to any staff member and need not be submitted to the member who is the subject of the allegation. Staff receiving a grievance regarding PREA shall immediately forward the grievance to the on-duty Correctional Sergeant. It shall not be forwarded to any individual, including but not limited to a Correctional Sergeant, who is subject of the allegation.

The Correctional Sergeant receiving the grievance regarding a PREA allegation shall initiate a formal investigation as outlined in the Sheriff Office's PREA policy §612.8. Any grievance forms related to a PREA allegation will be logged by a Correctional Sergeant in the Grievance Log and noted "Referred for PREA." The grievance process will cease and the PREA investigation will commence.

Notwithstanding the above, all grievances related to sexual abuse or sexual harassment shall be referred for investigation in accordance with 28 C.F.R. § 115.22 and the Sheriff Office's PREA policy §612.9. In addition, incarcerated persons shall not be restricted from filing grievances related to sexual abuse unless an investigation determines that such a grievance is made in bad faith. (28 C.F.R. § 115.52(g))

#### **620.9 GRIEVANCE ALLEGING A PERSONNEL COMPLAINT**

If a grievance addresses the actions of a specific deputy or staff member, the supervisor who first receives the grievance, barring the supervisor is not the subject of the grievance, will use the criteria below to determine whether it is a grievance about jail conditions / practices, or a complaint about an employee. If it is determined to be a complaint against staff, the supervisor who first received the grievance will contact the complainant to obtain a detailed statement about the allegation(s) and document it on the grievance form, omitting the name(s) of the subject employees. For anonymous grievances the Correctional Sergeant will investigate the validity of

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the complaint to determine if there is any legitimacy to forward the complaint. The supervisor will then give the grievance and collected information to the Operations Correctional Lieutenant for review and to determine the appropriate action. If the Operations Correctional Lieutenant deems that a formal investigation is warranted, he or she will return the grievance and collected information to the supervisor who initially reviewed the grievance, and that supervisor will complete a Complaint Form. The completed Complaint Form, a copy of the original grievance, and all connected information will be forwarded to the Professional Standards Unit by that supervisor. Grievances shall not be forwarded to any individual who is the subject of the complaint.

## Voting for Incarcerated Persons

### 622.1 PURPOSE AND SCOPE

This policy establishes the requirement for providing eligible incarcerated persons the opportunity to vote during elections, pursuant to election statutes.

### 622.2 POLICY

Incarcerated persons who have not been convicted of a felony and are serving state prison time and are in custody during trial continue to have the right to vote. Except for individual incarcerated persons who have lost the right to vote, sentenced incarcerated persons also maintain this right. Because incarcerated persons are unable to access public voting polls, the Facility Manager or the authorized designee shall develop written procedures whereby the county registrar of voters allows qualified incarcerated persons to vote in local, state and federal elections, pursuant to election codes (15 CCR 1071).

Incarcerated persons should be advised of voting methods during the inmate orientation.

### 622.3 VOTING REQUIREMENTS

Individuals maintain their right to vote while incarcerated if they are:

- (a) A citizen of the United States.
- (b) A resident of the county.
- (c) At least 18 years of age at the time of the next election.
- (d) Not been declared mentally incompetent by a court.
- (e) Awaiting or on trial for a criminal offense.
- (f) Serving time for a traffic or misdemeanor offense or as a condition of probation.
- (g) Not convicted of a felony offense and sentenced to serve time in a state prison.
- (h) Not on parole as a result of a felony conviction.

### 622.4 PROCEDURES

Prior to each election, the Facility Manager will designate a deputy to be a liaison between the Office and the local Registrar of Voters. The designated deputy will be responsible for assisting incarcerated persons who have requested to vote.

#### 622.4.1 REGISTERING TO VOTE

An incarcerated person who is eligible to vote and requests to register should complete a voter application. The application should be submitted to the liaison deputy, who will forward the application to the local election official.

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##### 622.4.2 REQUESTING AN ABSENTEE BALLOT

An incarcerated person who will be in custody during an election and requests to vote by absentee ballot should complete an application. The completed application should be submitted to the liaison deputy, who will forward the application to the local election official.

##### 622.4.3 VOTING

All ballots received shall be delivered to incarcerated persons in a timely manner to ensure compliance with the incarcerated person's right to vote. Once the ballot has been delivered to the incarcerated person, it shall be the responsibility of the incarcerated person to mail their ballot in accordance with the state's voting requirements. If the incarcerated person is indigent, the jail will mail the ballot; if not, the incarcerated person is responsible for the postage.

## **Chapter 7 - Medical-Mental Health**

# Health Care Administrative Meetings and Reports

## 700.1 PURPOSE AND SCOPE

The Office recognizes that the delivery of effective health care requires open and frequent communication between the Responsible Health Authority and the Facility Manager. This policy provides guidelines for the continuous monitoring, planning and problem resolution in providing health care that addresses the medical needs of the incarcerated person 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 incarcerated person should be seen in a timely manner by a qualified health care professional. The incarcerated person 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 incarcerated persons 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 incarcerated person's particular condition.

**Responsible Health Authority-** The Responsible Health Authority, Health Services Administrator or their designee 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 incarcerated person 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.

**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.

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**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.

**Sick call**- The evaluation and treatment of an ambulatory patient, either on- or off-site, by a qualified health care professional.

**Special needs** - Health conditions that require regular care.

**Standing order**- Written orders issued by a physician that specify the same course of treatment for each patient suspected of having a given condition and the specific use and amount of prescription drugs (e.g., immunizations, insulin, seizure medications).

**Suicidal ideation** - Having thoughts of suicide or of taking action to end one's own life. Suicidal ideation includes all thoughts of suicide when the thoughts include a plan to commit suicide and when they do not.

**Treatment plan** - A series of written statements specifying a patient's particular course of therapy and the roles of qualified health care professionals in delivering the care.

**Triage** - The sorting and classifying of health care requests to determine priority of need and the proper place for health care to be rendered.

### **700.2 POLICY**

The Sheriff shall select the Responsible Health Authority in accordance with the Health Authority Policy. It is the policy of this facility that the Responsible Health Authority or their designee should meet with the Facility Manager at least quarterly. The Responsible Health Authority or their designee should be required to submit a report addressing the effectiveness of the health care system, a description of any environmental or access issues that require improvement, and detail any progress that has been made in previously reported areas. The quarterly meeting should be documented through formal minutes, which should include the names of attendees and a list of the topics discussed. The minutes should be retained in accordance with established records retention schedules.

The data for the quarterly report should be gathered by the Responsible Health Authority or their designee via monthly meetings with facility Shift Commanders and qualified health care professionals. The monthly meetings should cover the following topics:

- Health care services
- Quality improvement findings
- Infection control efforts



# San Luis Obispo County Sheriff's Office

## San Luis Obispo County SO Custody Manual

### San Luis Obispo County SO Custody Manual

#### *Health Care Administrative Meetings and Reports*

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- Incarcerated person grievances
- Environmental inspections report

#### 700.2.1 STATISTICAL REPORTS

In addition to the quarterly report described above, a statistical report will be provided annually to the Facility Manager. The statistical report will be prepared by the Responsible Health Authority or their designee and shall include, but not be limited to, the following (15 CCR 1202):

- (a) The number of incarcerated persons receiving health services by category of care
- (b) The number of referrals to specialists
- (c) Prescriptions written and medications dispensed
- (d) Laboratory and X-ray tests completed
- (e) Infirmary admissions, if applicable
- (f) On-site and off-site hospital admissions
- (g) Serious injuries or illnesses
- (h) Deaths
- (i) Off-site transports
- (j) Infectious disease monitoring
- (k) Emergency services provided to inmates
- (l) Dental visits provided
- (m) Number of health care grievances by category (e.g., medication error, missed appointment, health staff complaint) and whether the grievance was founded or unfounded

It is the responsibility of the Facility Manager or their designee to ensure that copies of the statistical reports and documentation of any remedies implemented are retained in accordance with established records retention schedules.

## Access to Health Care

### 702.1 PURPOSE AND SCOPE

The provision of adequate health services in a custody setting is a constitutional right afforded to all incarcerated persons. The purpose of this policy is to provide custody personnel and qualified health care professionals with a process to inform newly booked incarcerated persons of the procedure to access health care services and how to use the grievance system, if necessary.

### 702.2 POLICY

It is the policy of this office that all incarcerated persons, regardless of custody status or housing location, will have timely access to a qualified health care professional and receive a timely professional clinical judgment and appropriate treatment.

The San Luis Obispo County Sheriff's Office facility will provide medical, dental, and mental health services as necessary to maintain the health and well-being of incarcerated persons to a reasonable and socially acceptable standard (15 CCR 1200 et seq.; 15 CCR 1208).

### 702.3 ACCESS TO CARE

Inmate medical requests will be evaluated by qualified health care professionals. 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.
- Failing to provide necessary translation and accommodations to ensure the inmate has understanding of access to healthcare and to provide the opportunity to have questions answered and submit grievances.

All routine requests for medical attention shall be promptly routed to a qualified health care professional.

Any incident of an inmate refusing medical treatment will require the inmate to sign documentation refusing the treatment. The document will be added to the inmate's medical file.

### 702.4 HEALTH CARE GRIEVANCES

Custody personnel should authorize and encourage resolution of incarcerated person complaints and requests on an informal basis whenever possible. To the extent practicable, custody personnel

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should provide incarcerated persons with opportunities to make suggestions to improve programs and conditions.

Incarcerated persons will be informed of the grievance process during incarcerated person orientation. The grievance process is also explained in the incarcerated person handbook, which all incarcerated persons receive and which they should have additional access to in their housing units. Grievances will be handled in accordance with the Incarcerated Person Grievances Policy (15 CCR 1073(a)).

Incarcerated person grievances regarding health care issues will be investigated by an uninvolved member of the medical staff. If no such person is available or does not exist, an outside peer should be sought to investigate the grievance. The incarcerated person should be provided with a written response in accordance with the schedule set forth in the Incarcerated Person Grievances Policy. Responses to incarcerated person grievances should be based on the community standard of health care.

Copies of grievances and the facility's response shall be sent to the Facility Manager, who, in consultation with the Responsible Physician, shall serve as the final authority in response to all incarcerated person grievances.

If an inmate is not satisfied with the response, the incarcerated person may appeal the grievance as outlined in the Incarcerated Person Grievances Policy.

#### **702.5 POSTING AVAILABLE RESOURCES**

A listing of telephone numbers for medical, dental, mental health and ambulance services shall be posted at the facility's medical area and in the primary staff control station, along with a schedule of availability.

# Non-Emergency Health Care Requests and Services

## 704.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a daily triage system of incarcerated person requests for health care services. This is to ensure that the health needs of the population are addressed properly and in a timely manner.

## 704.2 POLICY

It is the policy of this office to provide daily access to qualified health care professionals in order for incarcerated persons to request medical services (15 CCR 1200). All health care requests will be documented, triaged and referred appropriately by medical staff. Qualified health care professionals will conduct sick call and clinics for health care services on a scheduled basis to ensure a timely response to requests for medical services (15 CCR 1211).

The Responsible Health Authority, in coordination with the Facility Manager or the authorized designee, is responsible for developing a process that includes:

- (a) A process for incarcerated persons 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 incarcerated persons upon request.
- (d) A system in which health care requests are documented, triaged and referred appropriately.
- (e) Restrictions that prohibit non-health services personnel from diagnosing or treating an illness.

## 704.3 HEALTH CARE REQUESTS

During the collection of health care requests from incarcerated persons, care should be taken to protect the confidentiality of the incarcerated person and the nature of the health issue. Only mental health or medical staff shall collect the Request for Medical Attention and/or the Request for Psychiatric attention slips. Mental health or medical staff shall date and initial the request when the collection takes place. The requests shall be triaged to determine the priority of need and the proper place for health care to be delivered.

Incarcerated persons will be instructed on how to obtain medical services during the incarcerated person orientation process and in the handbook. Incarcerated persons shall submit a medical request form mental health or medical staff.

Medical request forms should be available in languages representative of the population. Incarcerated persons who communicate in a language not available in printed form shall have access to interpreter services.

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Incarcerated persons with disabilities should be provided with appropriate assistance or accommodation to ensure they are able to request health care services.

#### **704.4 TRIAGE OF HEALTH CARE REQUESTS**

Qualified health care professionals shall perform a daily triage. Sick call shall be available to inmates at least five days a week and shall be performed by a qualified health care professional.

Other qualified health care professionals should schedule inmates in need of specialized treatment for the next available providers' clinic as clinically indicated. The wait for the next available providers' clinic should not exceed the community standard based on clinical indications. The qualified health care professional shall document the referral in the electronic health record.

The frequency and duration of sick call should be sufficient to meet the needs of the incarcerated persons population but should be conducted at least weekly by a qualified health care professional. If an incarcerated person's custody status precludes attendance at sick call, arrangements shall be made to provide sick call services in the place of the incarcerated person's detention (15 CCR 1211).

#### **704.5 GUIDELINES FOR ELECTIVE PROCEDURES OR SURGERY**

The Responsible Health Authority or their designee and the Facility Manager shall work cooperatively to develop guidelines that govern elective procedures or surgery for incarcerated persons. 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 incarcerated person over a period of time. Any discussion of this nature with the incarcerated person should be conducted in a language easily understood by the incarcerated person and should be carefully documented in the incarcerated person's medical record. This record should be maintained in accordance with established records retention schedules.

#### **704.6 REQUESTS FOR OUTSIDE MEDICAL CARE**

Incarcerated persons who request access to health care services outside the facility may do so with advance authorization from the Facility Manager or the authorized designee. The incarcerated person shall be required to provide proof of sufficient private funds available to pay for all costs associated with transportation to the off-site facility and all costs associated with the medical services, diagnostics, treatment plans, medications or any other costs associated with off-site medical care.

## Referrals and Coordination of Specialty Care

### 706.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process for referring incarcerated persons 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.

### 706.2 POLICY

It is the policy of this office that incarcerated persons 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 incarcerated persons when the need is determined by the Responsible Physician (15 CCR 1206(b); 15 CCR 1206(c)).

### 706.3 REFERRAL TO OFF-SITE MEDICAL CARE

A qualified health care professional shall evaluate the incarcerated person, and if indicated, shall recommend specialty appointments in writing on the order sheet in the incarcerated person'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 Health Authority.

A court order is generally required when an incarcerated person requires medical or surgical treatment necessitating hospitalization. A court order is not required for an incarcerated person in need of immediate medical or hospital care, but an application for a court order should be made as soon as practicable when the incarcerated person's condition requires them to be gone from the facility more than 48 hours (Penal Code § 4011.5).

### 706.4 OFF-SITE COORDINATION

The qualified health care professional is responsible for recommending off-site medical and psychiatric care for incarcerated persons, coordinating outside appointments and notifying supervisory custody staff of off-site transportation needs. The Facility Manager should establish a written transportation procedure that ensures incarcerated persons are transported securely and in a timely manner for medical, mental health, dental clinic or other specialty appointments. The procedure shall include the secure transfer of medical information to the receiving health care service.

Any conflicts that arise regarding off-site consultation trips will be communicated by the deputy responsible for transportation to the Responsible Health Authority and the Facility Manager 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 incarcerated persons to access appropriate medical care. Any issues

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identified shall be discussed and resolved between the Responsible Health Authority and the Facility Manager (15 CCR 1206(c); 15 CCR 1206(n)).

## Emergency Health Care Services

### 708.1 PURPOSE AND SCOPE

The purpose of this policy is to establish plans and procedures for responding to medical emergencies in the facility when the level of medical or mental health services exceeds the licensure or certification of staff who are on-duty, and to define staff training requirements.

### 708.2 POLICY

It is the policy of this office that emergency medical and mental health are available 24 hours a day. These services may include off-site health care services. Dental emergencies will be referred to the local emergency room.

### 708.3 PROCEDURES

The Facility Manager or the authorized designee shall work cooperatively with the Responsible Health Authority to develop plans and procedures for responding to emergency medical incidents that occur when the level of medical or mental health services needed exceeds the licensure or certification of staff who are on-duty. The plans should include: on-site emergency first aid, basic life support and crisis intervention; emergency evacuation of an inmate from the facility, including security procedures to ensure an immediate transfer when appropriate; on-call physicians, dentists and mental health professionals; predetermined back-up health care services when the emergency health facility is not located in a nearby community; and the identification of primary, secondary and tertiary acute care facilities.

The plan may additionally include, but is not limited to, these components:

- (a) Health-trained staff shall respond to all emergencies immediately upon notification.
- (b) Contact information for emergency on-call health care services, both on- and off-site, is available and accessible for facility supervisors.
- (c) Qualified health care professionals shall respond by reporting to the area of the emergency with the necessary emergency equipment and supplies.
- (d) Emergency equipment and supplies are regularly maintained and accessible to the qualified health care professionals and health-trained custody staff.
- (e) Most inmates will be stabilized on-site and then transferred to an appropriate health care unit, if necessary.
- (f) Notification of on-call physicians and mental health staff will be done as soon as the situation reasonably allows.
- (g) The qualified health care professionals will determine if the inmate needs to be transported to a local emergency room for treatment.
- (h) When necessary, facility staff shall activate 9-1-1 and notify a supervisor as soon as reasonably practicable.
- (i) The Facility Manager and the Responsible Health Authority will coordinate on the notification of the inmate's next of kin in cases of serious illness and injury. Death



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notifications will be made in accordance with the Inmate Death - Clinical Care Review Policy.

- (j) Procedures to implement a program wherein staff may possess and administer epinephrine medication according to Health and Safety Code § 1797.197a and 22 CCR 100019, including the retention of related records pursuant to Business and Professions Code § 4119.4.
- (k) Identifying when court orders to transport prisoners outside the facility for hospitalization may be required and the processes for obtaining those court orders (Penal Code § 4011.5).
- (l) Identifying who is responsible to seek a court order when an inmate is expected to be gone from the facility more than 48 hours for medical or surgical treatment necessitating hospitalization (Penal Code § 4011.5).

The goal of any emergency medical response plan is to provide emergency medical care to those in need as expeditiously as possible. While facility size and patient proximity to the health care service will vary, staff training will emphasize responding to medical emergencies as soon as reasonably possible.

#### **708.4 EMERGENCY PROCEDURES**

The Health Services Administrator or the authorized designee is responsible for ensuring the following information, equipment and personnel are available in the event an inmate requires emergency treatment (15 CCR 1206(c)):

- (a) A current list of names, addresses and telephone numbers of all persons and agencies to be notified in an emergency. The list should be available to all health care and custody staff at all times, and should be updated quarterly.
- (b) Emergency drugs, equipment and supplies should be readily available at all times and replenished after each use. An inventory control system should be in use to ensure the necessary supplies are present when needed and have not expired.
- (c) A physician, dentist and mental health professional should be available on-call 24 hours a day, seven days a week (this can include off-site health care services) and there should be a back-up health care services plan.
- (d) Ambulances should be accessed through the facility staff or by calling the appropriate emergency number. There should be a clear security plan in place for the transportation of inmates.
- (e) The Shift Commander 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.
- (g) Whenever reasonably possible, the on-call health care service should be notified prior to transporting the inmate to the hospital or other emergency care. However, in the event of a life- or limb-threatening emergency, the inmate shall be sent to the hospital

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in the most expedient way possible, which may require notifying the specific health care service after the inmate has been transported.

#### **708.5 FIRST-AID KITS**

The Responsible Health Authority 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 Health Authority shall also ensure that (15 CCR 1220):

- (a) The contents of each first-aid kit are:
  - 1. Approved by the Responsible Health Authority.
  - 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.

#### **708.6 TRAINING**

The Facility Manager shall ensure that all qualified health care professionals are trained in the delivery of emergency medical services in the custody environment during new employee orientation.

The Facility Manager or the authorized designee shall ensure that all facility staff members who have contact with inmates receive first-aid and basic life support training during new employee orientation, and that annual refresher training is conducted for the facility and qualified health care professionals. Training should include, but not be limited to:

- (a) The location of all emergency medical equipment and medications and the proper use of the equipment, such as AEDs.
- (b) How to properly summon internal and external emergency services.
- (c) Recognition of basic life support signs and symptoms and the actions required in emergency situations.
- (d) Administration of basic first aid.
- (e) Certification in CPR in accordance with the recommendations of the certifying health organization.

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- (f) Recognition of the signs and symptoms of mental illness, violent behavior and acute chemical intoxication and withdrawal.
- (g) Procedures for inmate transfers to appropriate medical facilities or health care service.
- (h) Suicide recognition, prevention and intervention techniques.

All records of the training provided, testing procedures and the results, and certificates achieved shall be maintained in each qualified health care professional's training file in accordance with established records retention schedules. The Responsible Health Authority should be bound by similar requirements in the contractual language between the Office and the vendor.

#### **708.7 AUTOMATED EXTERNAL DEFIBRILLATORS (AED)**

An Automated External Defibrillator (AED) is available in the facility and all staff members are trained in its use. The AEDs shall be inspected and tested at a frequency consistent with the manufacturer's recommendations to ensure functionality by the designated staff member.

## Sterilization of Incarcerated Persons

### 709.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for the Health Care needs and rights of incarcerated persons as they relate to Sterilization (CA §3440).

### 709.2 DEFINITION

**Sterilization-** A medical procedure (tubal ligation, hysterectomy, oophorectomy, etc) that removes some or all of an individual's reproductive parts and renders that individual permanently incapable of reproducing.

### 709.3 POLICY

It is the policy of this Office that no individual detained within the San Luis Obispo County Jail may be subject to sterilization as a method of birth control. Sterilization of an individual may only occur under the following circumstances:

- (a) The procedure is required for the immediate preservation of the incarcerated person's life in an emergency medical situation;
- (b) The sterilizing procedure is medically necessary, as determined by contemporary standards of evidence-based medicine, to treat a diagnosed condition, and all of the requirements, as set forth in Penal Code section 3440, subdivision (b)(2)(A)(C) are satisfied (e.g. less invasive procedure is non-existent or unsuccessful; a second opinion of an independent physician; the incarcerated person's consent).

### 709.4 NOTIFICATION

In the event a sterilization procedure occurs or will occur:

- (a) Any patient who is to undergo a sterilization procedure (except in the case of an emergency medical procedure) shall be provided with a written notification of his or her rights under Penal Code section 3440;
- (b) The notification shall include a statement of the incarcerated person's right to receive psychological consultation and medical follow-up from appropriately trained medical staff, which shall include hormone therapy to address the effects of surgical menopause, both pre- and post-procedure;
- (c) The Operations Correctional Lieutenant will provide annual data on all sterilizations that occur to the Board of State and Community Corrections.

#### 709.4.1 STERILIZATION RIGHTS

Absent the need for a sterilization procedure to be performed in an emergency situation, as provided in Penal Code section 3440, subdivision (b)(1), an incarcerated person has the following rights:

- (a) To refuse a sterilization procedure or treatment;
- (b) To choose a less invasive or less permanent treatment or procedure;

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- (c) To be provided all information necessary to make an informed decision as to whether to consent or to refuse treatment, which shall include the effects of sterilization, including the side-effects from the procedure itself, the permanence of sterilization, and the long-term impact of sterilization on the incarcerated person's health;
- (d) To request psychological and medical follow-up care.
- (e) The Sheriff's Office complies with all medical and reporting requirements with regard to the above statute. All individuals under the the custody and care of this Office's Custody Division are provided a PREA/Reproductive Rights brochure, as well as all employees who are involved in providing health care services, outlining their rights and responsibilities under the above listed section.
- (f) Any employee who reports the sterilization of an individual performed in violation of the the above section is entitled to the protection available under the California Whistle Blower Protection Act (Penal Code §6129(a)(2)(A) and (B)).

# Health Care for Pregnant and Lactating Incarcerated Persons

## 710.1 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.

## 710.2 POLICY

It is the policy of this office that a qualified health care professional should provide comprehensive prenatal and postpartum care for all pregnant 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).

## 710.3 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.

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- (f) The incarcerated person should be interviewed by a qualified health care professional for the following information, which should be written in the medical record:
  - 1. Last menstrual period (LMP)
  - 2. Estimated date of conception (EDC)
  - 3. Estimated due date (40 weeks from EDC)
  - 4. Number of pregnancies (gravidity)
  - 5. Number of live births (parity)
  - 6. Therapeutic abortions (TAB)
  - 7. Spontaneous abortions (SAB), aka miscarriages
  - 8. Prenatal care history
  - 9. Current medications
  - 10. Any current adverse symptoms: vaginal bleeding or discharge, abdominal cramping or pain (if yes, notify on-site or on-call physician)
  - 11. High-risk factors, if known: drug or alcohol use/abuse, smoking, previous pregnancy problems, other medical problems (cardiac issues, seizures, diabetes/DM, hypertension/HTN)
  - 12. If use of an opioid or methadone is identified, notify the on-site or on-call physician for orders. The incarcerated person shall be offered medication-assisted treatment and shall be provided information on the risks of withdrawal (Penal Code § 4023.8(i)).
- (g) Each pregnant incarcerated person should have:
  - 1. A completed special diet form ordering a pregnant diet.
  - 2. An appointment at the next available obstetric clinic if the person is 10 or more weeks gestation.
- (h) Each pregnant incarcerated person shall (Penal Code § 4023.8):
  - 1. Have access to daily prenatal vitamins in accordance with medical standards of care.
  - 2. Be assigned to the lower bunk and lower-tier housing for those housed in a multitier housing unit.

#### **710.4 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 Facility Manager and Responsible Physician shall develop a process by which perceived conflicts between medical orders/recommendations and safety and security

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interests of the jail can be discussed and resolved. Ultimately, the jail must provide adequate treatment for an incarcerated person's medical needs.

- (b) The Responsible Physician shall be consulted immediately if a patient is under 10 weeks gestation and has medical concerns.
- (c) Any pregnant 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 Facility Manager 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).

#### **710.5 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.

##### **710.5.1 REQUIRED PROCEDURES**

The health authority shall, in cooperation with the Facility Manager, 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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##### **710.6 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, when they have the financial ability to pay, 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. In these instances, alternative staff will be assigned promptly to prevent unreasonable delay to the procedure.

##### **710.6.1 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)) by submitting an *inmate request form* directly to health staff.

##### **710.6.2 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. Notice is also found in the Inmate Rule Book.

##### **710.7 LACTATING INMATES**

Inmates who remain in this office's custody for more than 72 hours and who wish to participate in human milk expression, disposal, and same-day storage for later retrieval and delivery to an infant or toddler by up to three approved parties with the approval of the facility administrator, can do so with the following procedure and resources.

##### **710.7.1 PARTICIPATION IN THE LACTATION PROCEDURE OUTLINED**

The Responsible Health Authority, in cooperation with the Facility Manager, shall develop a program with written procedures for lactating incarcerated persons 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 incarcerated person's release (Penal Code § 4002.5). Education and instruction on the importance of maintenance of lactation for breastfeeding persons, lactation diet, how to express milk, identify infections, cessation of lactating, transportation of stored breast milk with an approved transporter, and post-custody lactation education will be provided.

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#### *Health Care for Pregnant and Lactating Incarcerated Persons*

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##### 710.7.2 CESSATION OF LACTATION WEANING

Medical staff shall provide medically appropriate support and care related to the cessation of lactation or weaning that should include but is not limited to education and instruction on lactation cessation and weaning.

##### 710.7.3 INMATES PARTICIPATING IN THE LACTATION PROCEDURE

- A. Lactation procedures shall be conducted in the inmate's cell.
- B. A breast pump shall be provided to the inmate.
- C. Magnetic privacy cloths shall be provided to the inmate based on classification restrictions.
- D. Inmate is to notify the housing deputy when they are completed, and the Correctional Deputy shall retrieve milk for temporary storage.
- E. A lactating inmate shall be provided an opportunity to express milk with a pump at least every four hours.

##### 710.7.4 STORAGE

- A. Storage of breast milk shall be made available temporarily for no longer than 24 hours. Breast milk stored longer than 24 hours shall be discarded at the 26<sup>th</sup> hour.
- B. Breast milk shall be stored in a refrigerated setting and shall be labeled with the name of the inmate, the date and the time of when it was produced.
- C. The inmate and their approved transporter(s) shall be required to complete and sign a form, Commitment to Transfer of Breast Milk as seen in section §710.8. The form shall include a schedule of pick up and procedure for the inmate on how and who to contact should this schedule change.
- D. Custody staff is to forward copies of the completed form to:
  1. Original copy to go to Wellpath to be scanned into inmate's chart
  2. Copy to go to Custody Classification Unit
  3. Scanned copy to email group SH\_CS

##### 710.7.5 TRANSPORTATION

- A. Up to three approved parties shall be designated to pick up and transport breast milk.
- B. The approved party shall provide appropriate identification to custody staff and shall arrive with refrigerated storage for the breast milk.
- C. It is the responsibility of the approved parties to correctly and safely handle and transport the breast milk.

##### 710.7.6 POSTING AND NOTIFICATION

The infant and toddler breast milk feeding policy for lactating inmates shall be posted in all locations in the jail where medical care is provided, and the provisions of the policy shall be communicated to all staff persons who interact with or oversee pregnant or lactating inmates.

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#### 710.7.7 OTHER CONSIDERATIONS AND INFORMATION

- For a lactating woman who is detained for less than 72 hours, custody staff shall offer the inmate instruction on hand expression to relieve symptoms of engorgement.
- Pregnant patients with active opioid use disorder receive evaluation upon intake, including offering and providing medication-assisted treatment (MAT). See applicable Wellpath policy for procedures (HCD-110\_F-04 Medically Supervised Withdrawal and Treatment).
- If a female patient screens positive for opiate use during the receiving/booking process, she will be immediately referred to health care staff for further evaluation.

#### **710.8 COMMITMENT TO TRANSFER OF BREAST MILK FORM**

The San Luis Obispo County Sheriff's Office Custody Bureau recognizes the importance of breast milk for children in giving them a healthy start in life. When a breastfeeding mother is incarcerated, the County Jail tries to support a mother and the caregiver of the child in their efforts to maintain the supply of breast milk to the child. This requires commitment and work by both the breastfeeding mother and the caregivers.

This form can be located with Wellpath.

#### 710.8.1 MAINTENANCE FACTORS OF THE CHILD'S BREAST MILK SUPPLY

- Consistent efforts of the mother to pump her milk on schedule and protect the breast milk from contamination.
- The commitment and consistency of the caregivers of the child to come to the Jail and pick up the breast milk every day at the same time.

Continued support of breast milk for the child also depends on the ability to maintain breastfeeding support in the Jail setting. This sometimes may be a factor beyond the control of the County Jail that will necessitate the discontinuation of breast milk pumping. Breast milk will not be stored longer than 24 hours and will be discarded at the 26th hour if not picked up.

#### 710.8.2 PROCEDURAL INSTRUCTIONS

Caregivers of the child must provide to the County Jail the names of the persons who will come to the Jail to pick up the breast milk every day, to a maximum of three names.

To pick up the breast milk, the approved caregiver will go to the window in the Jail lobby, identify themselves, and state they have come to pick up the breast milk for the child and give the name of the mother.

The approved caregiver shall provide appropriate identification to custody staff and shall arrive with refrigerated storage for the breast milk.

It is the responsibility of the approved caregivers to correctly and safely handle and transport the breast milk.

Please direct all questions or arrangement changes to the San Luis Obispo County Jail by contacting 1-(805) 781-4600 and following the phone tree.

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#### 710.8.3 UNDERSTOOD AGREEMENT

The agreement on the *Commitment to Transfer of Breast Milk Form* reads:

I understand the information provided and what is required of the caregivers to enable breast milk to be provided to the child. I understand that the breast milk must be picked up consistently and on time and will be discarded at the 26th hour if it is not picked up within 24 hours.

#### **710.9 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, otherwise influence, or interfere with 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)).

#### **710.10 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).

#### **710.10.1 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)).

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##### 710.10.2 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

### 714.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the responsibility of the health authority as arranging for all levels of health services, assuring the quality of all health services, identifying lines of medical authority for the incarcerated person health program, and assuring that incarcerated persons 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 Health Authority,, Health Services Administrator, responsible for providing all health care services or coordinating the delivery of all health care services (see the Health Care Administrative Meetings and Reports Policy).

### 714.2 POLICY

The Responsible Health Authority is responsible and accountable for all levels of health care and has the final authority regarding clinical issues within this jail. The Responsible 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 Responsible Health Authority also approves all medical decisions and protocols.

### 714.3 SELECTION PROCESS

The Sheriff or the authorized designee shall select a Responsible Health Authority using an existing office procurement or selection process. The individual or organization selected shall be designated as the Responsible Health Authority for incarcerated person 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 Health Authority, 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.

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- (f) The roles and responsibilities of staff in ensuring that the contractor may adequately deliver services in a safe and secure environment.
- (g) A written plan for coordinating medical care from multiple health care services.
- (h) A written plan for the collection and maintenance of incarcerated person 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 incarcerated persons who may be questioning treatment plans.
- (j) Language and a plan addressing liability and indemnification for issues related to incarcerated person health care.

The Responsible 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 Responsible Health Authority is other than a physician, any final clinical judgments shall rest with a single, designated, Responsible Physician.

The Responsible Health Authority or the authorized designee will meet at least monthly with custody representatives to discuss the health care program and any issues that require correction or adjustment.

Security regulations are applicable to facility staff and health care personnel (15 CCR 1200(a)).

#### **714.4 PROVISION OF HEALTH CARE**

The Responsible Health Authority is responsible for arranging the availability of health care services. The qualified health care professionals should determine what medical services are needed on a case-by-case basis. The Facility Manager shall provide the administrative support for making the health care services available to incarcerated persons. Clinical decisions are the sole province of qualified health care professionals and should not be countermanded by non-health care professionals.

If routine health services are provided by medical personnel outside this facility, all office policies regarding treatment, transfer, transportation, or referral of emergencies shall be followed.

The Responsible Health Authority is responsible for ensuring that the health services manual complies with all applicable state and federal law and that a review and update is conducted annually.

An annual audit of the quality and adequacy of health care services shall be done, with corrective action taken when deficiencies are identified (15 CCR 1202).

#### **714.5 LACTATION PROGRAM**

The Responsible Health Authority, in cooperation with the Facility Manager, shall develop a program with written procedures for lactating incarcerated persons 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 incarcerated person's release (Penal Code § 4002.5).

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The Responsible 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 incarcerated persons (Penal Code § 4002.5).



## Health Appraisals

### 716.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the process for conducting health appraisals on all inmates following their arrival at this facility and for the continuity of care for inmates who remain in custody for extended periods. Further, it is to ensure the inmate's health care needs are met and that health care started at one facility continues as needed.

### 716.2 POLICY

It is the policy of this office that all inmates will receive a comprehensive health appraisal within 14 days of incarceration unless there is documented evidence that the inmate has received a health appraisal within the previous 90 days. In addition to the initial health appraisal, the inmate should have an annual evaluation to reassess his/her health status and to provide access to preventive medicine through education and lifestyle programs.

### 716.3 INITIAL HEALTH APPRAISAL

- (a) Qualified health care professionals shall have access to the daily inmate roster. From this, they can determine who needs a health appraisal and hands-on physical evaluation. The health appraisal should include:
  1. A review of earlier medical screening information.
  2. Recording of height and weight.
  3. Recording of vital signs (blood pressure, pulse, respiration rate and temperature).
  4. Ordering other tests or examinations as appropriate.
  5. The collection of any additional data needed to complete medical, dental, psychiatric and immunization histories.
- (b) Inmates shall be scheduled for a hands-on physical evaluation by a qualified health care professional within 48 hours of arrival at the jail. The evaluation shall include:
  1. Review of the medical screening.
  2. Review of the health history questionnaire.
  3. Review of all vital signs.
  4. A medical examination, including a review of mental and dental status.
  5. Initiation of treatment or therapy, as appropriate.
  6. Development and implementation of a treatment plan, including recommendations for housing, job assignment and program participation.

The Responsible Physician shall review and authorize all health appraisals within 72 hours.

## Healthy Lifestyle Promotion

### 718.1 PURPOSE AND SCOPE

The purpose of this policy is to affirm the Office's commitment to promote healthy lifestyle choices by inmates by providing health education and inmate self-care learning opportunities that include classes, audio and video presentations and brochures and pamphlets.

### 718.2 POLICY

This office will encourage inmates to maintain a healthy lifestyle by providing health education and wellness information.

### 718.3 HEALTH CARE ENCOUNTERS

During health care encounters, the qualified health care professional should instruct inmates at the time service is rendered on how to avoid preventable diseases, such as athlete's foot, flu and the common cold, tooth decay and sexually transmitted diseases. Such instruction should be documented in the health record. Documentation should include the topics discussed, the written materials provided, if any, and that the inmate acknowledged an understanding of the information.

Informative brochures from various health organizations should also be available to inmates in the medical unit.

Following are examples of appropriate topics for inmate education:

- Access to health care services
- Dangers of self-medication
- Personal hygiene and dental care
- Prevention of communicable diseases
- Education, smoking cessation
- Family planning
- Self-care for chronic conditions
- Self-examination for health concerns
- The benefits of physical fitness
- Chronic diseases and disabilities
- Counseling in preparation for release
- Domestic violence
- Medications
- Nutrition
- Sexually transmitted diseases

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#### *Healthy Lifestyle Promotion*

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- Substance abuse
- Tuberculosis

#### **718.4 GENERAL HEALTH PROMOTION INFORMATION**

Whenever possible, written materials, audio and video presentations should be made available to inmates for educational purposes. These materials are often available in bulk quantity through the public health department and other community-based organizations.

All items intended for distribution to the inmate population shall be approved by the Facility Manager to avoid any conflict with rules regarding contraband in the facility.

Classes should also be conducted to inform the inmate on various healthy lifestyles. Class schedules should be posted in advance, curriculum and lesson plans developed, and attendance rosters maintained.

All documentation regarding health education and inmate self-care should be retained in inmate medical files in accordance with established records retention schedules. Statistics on program offerings and attendance may be used to determine program effectiveness and interest.

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## Transfer Screening

### 718.1 PURPOSE AND SCOPE

This policy recognizes that incarcerated persons 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 incarcerated persons to ensure continuation of care and to avoid unnecessary diagnostics.

### 718.2 POLICY

It is the policy of this office that incarcerated persons 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 incarcerated person will be clearly communicated to the receiving facility, including the ongoing treatment plan, scheduled surgeries and outside appointments.

Incarcerated persons who are transferred to other facilities shall be sent with a discharge summary that includes information about the incarcerated person's medical and mental health condition, the current treatment plan and any medications, if needed (15 CCR 1206(n)).

### 718.3 TRANSFERS

Any incarcerated person being transferred to another correctional or health care facility may be medically screened prior to transfer as described below.

The medical screening should include:

- (a) A determination of whether the incarcerated person is being treated for a medical, mental health or dental problem.
- (b) A determination of whether the incarcerated person has any apparent, current medical, mental health or dental needs or complaints.
- (c) What medication, if any, the incarcerated person is presently prescribed.
- (d) Whether the incarcerated person has any evidence of abuse or trauma.
- (e) Whether the incarcerated person has any physical deformities or special daily living assistance needs.
- (f) The incarcerated person's classification and clearance status (i.e., general population, segregation).
- (g) Whether the incarcerated person has any pending follow-up appointments or requirements.

Completed discharge summaries, including the medical screening results, shall accompany incarcerated person being transferred to another office's jurisdiction to ensure that the receiving health care service can assume and continue necessary care. A release of information authorization is not required.

- Current health conditions

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- Current treatments and medications
- Upcoming appointments and diagnostic studies
- Allergies
- Copies of any health information that is critical to continuity of care

If the receiving facility requests a copy of the medical record, it will be supplied within five working days.

The discharge summary and any related medical records being transferred shall be placed in a file or envelope that maintains the confidentiality of the incarcerated person's medical information. The transporting personnel shall be provided separate written instructions regarding medication or health interventions, including necessary precautions that are required en route. The transporting personnel shall also document on the transfer log the date, time and name of the person receiving the incarcerated person and the medical records.

#### **718.3.1 EXTENDED TRANSPORTATION OF INCARCERATED PERSONS**

When an incarcerated person will be in transfer status for several days and housed temporarily at various custody facilities along the way, a medical transfer packet shall be prepared by the qualified health care professional in a form that will advise the temporary housing facilities of any medical needs of the incarcerated person. When medically appropriate, a small supply of medication should be provided with the medical transfer packet so it will be available to the temporary housing facility as needed.

#### **718.4 RECEIVING TRANSFERRED INCARCERATED PERSONS**

When an incarcerated person being transferred to this facility arrives without a full and comprehensive medical transfer packet from another facility, the incarcerated person shall be medically screened and receive a comprehensive health appraisal when indicated. The medical department of the sending facility should be promptly contacted to determine if the transferred incarcerated person has any medical needs that require immediate attention or any scheduled surgeries or appointments with community health care services. Arrangements should then be made with the sending facility for the delivery of a more detailed review of the incarcerated person's medical needs.

## Medical Screening

### 720.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a medical screening process for newly booked incarcerated persons so that medical, mental health, and dental issues are properly identified and addressed, and to obtain a medical clearance when necessary.

### 720.2 POLICY

It is the policy of this office that a medical screening be performed on all incarcerated persons upon arrival at the intake area to ensure that existing, emergent, and urgent health care, dental, or mental health needs are identified, risks are assessed, and incarcerated persons with contagious and communicable diseases are properly classified and housed for their health and the health of the general population (15 CCR 1051; 15 CCR 1206.5(a); 15 CCR 1207).

### 720.3 ELEMENTS OF MEDICAL SCREENING

The medical screening shall be performed by a qualified healthcare professional

Regardless of training, no incarcerated person should be allowed to conduct health care evaluations or provide treatment to any other incarcerated person.

All incarcerated persons shall complete a medical screening as part of the booking process. If an arrestee refuses to cooperate with the medical screening, the screener will complete as much of the health assessment as reasonably possible and the arrestee will be closely observed until he/she cooperates with the remainder of the screening process.

The Responsible Physician should work cooperatively with the Facility Manager to develop the medical screening forms, which should be applicable for general health, mental health and suicide screening purposes. The forms should be completed no later than 24 hours after the arrival of an incarcerated person but prior to an incarcerated person being housed in the general population. When clinically indicated, a qualified health care provider shall be alerted to those that need priority attention.

#### 720.3.1 MEDICAL SCREENING INQUIRY

The medical screening inquiry should include a review of the incarcerated person's prior jail medical record, if any, and document the following:

- History of infectious or communicable diseases that are considered serious in nature; current treatment, symptoms, medications, chronic illness, or health issues, including communicable diseases, or special health requirements and/or dietary needs (15 CCR 1051)
- Acute dental problems
- 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)

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- 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 COVID-19-related issues will be handled in accordance with the San Luis Obispo County Sheriff's Office, *COVID-19 Operational Plan for Custody and Field Operations Addendum*.
- Any other health issues as identified by the Responsible Physician

Qualified mental health care professionals should assist in developing specific mental health medical screening questions and should provide training in analyzing incarcerated person responses. The Responsible Physician should establish the role of the qualified health care professional in the medical screening process.

Should the medical screening identify a need for a more comprehensive medical assessment of the incarcerated person, a qualified health care professional should initiate appropriate follow-up action, which may include transporting the incarcerated person to an off-site medical facility.

#### 720.3.2 MEDICAL SCREENING OBSERVATION

The staff member completing the medical screening observation shall document the following observations:

- Appearance (e.g., sweating, tremors, anxious, disheveled)
- Behavior (e.g., disorderly, appropriate, insensible)
- State of consciousness (AVPU):
  - Alert - spontaneously responsive
  - Verbal - requires verbal stimulation to respond
  - Pain - requires painful stimulation to respond
  - Unresponsive - does not respond
- Ease of movement (e.g., body deformities, gait)

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- Breathing (e.g., persistent cough, hyperventilation)
- Skin (e.g., lesions, jaundice, rashes, infestations, bruises, scars, recent tattoos, needle marks or other indications of drug abuse)
- Any other observable health symptoms

The Facility Manager and the Responsible Physician should develop a procedure through which it can be reliably determined what prescription medications the incarcerated person is taking and the medical urgency for continuing those medications without interruption.

#### **720.3.3 DOCUMENTATION**

Written documentation of the medical screening should include the name of the screener, the date and time, and the following information:

- Immediate or scheduled referral to a medical, dental, or mental health professional
- Guidance regarding housing placement, including disciplinary detention if necessary (15 CCR 1051)
- Guidance regarding activity limitations and work assignment
- The incarcerated person's responses to questions asked by the interviewer
- Other individualized observations and recommendations

The initial medical screening should become part of the incarcerated person's medical record and should be retained in accordance with established records retention schedules.

#### **720.4 MEDICAL SCREENING DISPOSITIONS**

Persons who are brought to the facility and are obviously in need of immediate medical attention shall be referred to an emergency medical facility for clearance. Conditions that require a medical clearance prior to booking include but are not limited to the following:

- Unconsciousness
- Uncontrolled bleeding
- Significant injuries from a motor vehicle accident
- Significant injuries from an altercation
- Significant injuries from handcuffs or other restraint devices
- Knife wounds, gunshot wounds, or lacerations
- Exposure to pepper spray, TASER® device deployment, or blunt force trauma during arrest
- Intoxication to a degree that the individual cannot speak coherently or stand or walk unaided
- Recent drug overdose
- Suspected or known complications of pregnancy



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- Active seizures
- Suspected or known complications of diabetes
- Exhibits behavior indicating a potential danger to themselves or others
- Active tuberculosis or other serious contagious diseases
- Actively suicidal
- Any other medical condition which, in the opinion of the booking personnel, should be urgently referred for evaluation by medically trained personnel

Incarcerated persons with these medical conditions are not suitable for admission to the facility until medically cleared by a qualified health care professional. This office requires medical clearance from an outside entity when such incarcerated persons are identified.

Medical clearance documentation shall include the medical diagnosis, treatment received at the emergency medical facility, any medications prescribed, any ongoing medical requirements, and any follow-up medical care that may be indicated before the arrestee is accepted for booking.

The Facility Manager 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 incarcerated person shall be one of the following:

- General population or other appropriate cell assignment
- General population or other appropriate cell assignment and timely referral to appropriate health care services
- Immediate referral to health care services prior to housing

#### **720.4.1 MEMBERS CONDUCTING HEALTH SCREENINGS**

Medical screenings should be completed by licensed qualified health personnel with appropriate disposition based on responses to questions and observations made at the time of screening (15 CCR 1207)

#### **720.4.2 TELEHEALTH**

Telehealth may be incorporated into procedures used to identify and evaluate incarcerated persons who may be having a mental health crisis (15 CCR 1052)

## Mental Health Services

### 722.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure that all incarcerated persons have access to mental health services and that incarcerated persons identified as needing these services are referred appropriately.

#### 722.1.1 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.

### 722.2 POLICY

It is the policy of this office that a range of mental health services shall be available for any incarcerated person who requires them (15 CCR 1206(g); 15 CCR 1207; 15 CCR 1209).

### 722.3 MENTAL HEALTH SERVICES

In coordination with the health authority, the Responsible Health Authority, and the Facility Manager, mental health services shall include but are not limited to (15 CCR 1209):

- Identification and referral of incarcerated persons with mental health needs.
- Mental health treatment programs provided by qualified staff, including the use of telehealth.
- Crisis intervention.
- Basic mental health service provided to incarcerated persons as clinically indicated.
- Medication support services.
- Suicide prevention.
- Referral, transportation, and admission to licensed mental health facilities for incarcerated persons whose psychiatric needs exceed the treatment or housing capability of the facility (Penal Code § 4011.6; Penal Code § 4011.8).
- Provision of health services sufficiently coordinated such that care is appropriately integrated, medical and mental health needs are met, and the impact of any of these conditions on each other is adequately addressed.
- Obtaining and documenting informed consent.
- Release planning services.

### 722.4 BASIC MENTAL HEALTH SERVICES

Incarcerated persons may be referred to a qualified health care professional through a variety of methods, which include the medical screening process, the mental health appraisal process, and

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self-referral or staff referral. Qualified health care professionals should respond to all referrals in a timely manner and initiate the appropriate treatment services.

- (a) If the incarcerated person has received previous mental health treatment, the incarcerated person should be asked to complete a release of information form so that treatment records can be obtained.
- (b) Incarcerated persons who have been determined to be in need of ongoing mental health services after their release from this facility should be provided with information about community mental health treatment resources. Arrangements for more comprehensive mental health care may be made, if appropriate.
- (c) Incarcerated persons who are identified as being developmentally disabled should be evaluated for special housing needs. The qualified health care professional should work in cooperation with classification personnel to establish the best, reasonably available housing option.
- (d) Incarcerated persons who are suspected or known to have a developmental disability should receive a mental health appraisal by the qualified health care professional or health-trained custody staff as soon as reasonably practicable but no later than 24 hours after booking. Contact will be made with the regional center within 24 hours, excluding holidays and weekends, when an incarcerated person is suspected or confirmed to have a developmental disability. Incarcerated persons who have a developmental disability should be referred, where appropriate and available, for placement in non-correctional facilities or in units specifically designated for housing a developmentally disabled person (15 CCR 1057).
- (e) Incarcerated persons enrolled in mental health treatment, including psychiatric medication management, should be provided information regarding the risks and benefits to treatment. Informed consent documents should be signed by the incarcerated person to establish the incarcerated person's consent to treatment. The signed forms should be placed in the incarcerated person's health record and retained in accordance with established records retention schedules.
- (f) A treatment plan should be established for all incarcerated persons enrolled in mental health services.
  - 1. Psychiatric and special needs treatment plans shall be reviewed every 180 days, at a minimum. Incarcerated persons taking psychotropic medication should be seen by a psychiatrist or psychiatric nurse practitioner at least every 90 days. Incarcerated persons classified as requiring mental health special needs should be seen at least monthly by a qualified health care professional.
  - 2. Incarcerated persons enrolled in other ongoing forms of mental health treatment should have treatment plan updates completed every six months, at a minimum.
  - 3. Incarcerated persons who present to the qualified health care professional as having notable difficulty adjusting to the correctional environment, but who are not diagnosed with a serious mental illness, should be evaluated for the appropriateness of mental health treatment. Consideration should be given to the qualified health care professional and the facility staff working together to

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address the issues that may be affecting the incarcerated person's ability to adjust to incarceration.

- (g) The qualified health care professional should utilize a site-specific suicide prevention program to ensure the safety of incarcerated persons who present with a risk of self-harm.
  - 1. Qualified health care professionals should be assigned to daily rounds in the restrictive housing unit(s) to determine the mental health status of incarcerated persons housed there.
  - 2. Separated incarcerated persons 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 incarcerated person housed in the facility, the Responsible Health Authority shall be notified and the Responsible Physician shall be the decision-maker regarding the health care needs of the incarcerated person.
  - 1. The Responsible Physician may consult with a psychiatrist, specialist, or other health care service in determining whether the incarcerated person should be transferred to a facility that is better equipped to handle the incarcerated person's psychiatric needs.
  - 2. The Responsible Physician should notify the Facility Manager of the request to transfer the incarcerated person for medical treatment.
  - 3. The case review and disposition of the patient should be documented in the incarcerated person's health record and retained in accordance with established records retention schedules.

Incarcerated persons determined to be in need of substance abuse treatment services should be informed of the facility programs available and shall be provided information about community substance abuse treatment resources.

## Mental Health Screening and Evaluation

### 724.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the process by which all incarcerated persons receive an initial mental health screening by qualified mental health or medical 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 incarcerated person 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 incarcerated person are met.

### 724.2 POLICY

It is the policy of this office that all individuals booked into the facility shall receive an initial mental health screening by a qualified mental health professional, qualified mental health staff or health-trained. A more comprehensive medical and mental health 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 incarcerated person is in place (15 CCR 1052; 15 CCR 1209(a)(1)).

### 724.3 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 incarcerated person being placed in general housing and should include:

- (a) Inquiry into whether the incarcerated person 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
  3. Mental health emergency treatment

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This information shall be recorded on the receiving screening form. It will become part of the incarcerated person's health record and be retained in accordance with established records retention schedules.

#### **724.4 MENTAL HEALTH APPRAISAL**

All newly identified mental health risk incarcerated persons shall receive a mental health appraisal by a qualified mental health professional within 14 days, unless documentation exists that an appraisal has been completed within the previous 90 days. Mental health appraisals should include, but not necessarily be limited to the following assessments:

- Mental health status
- Suicide potential
- Violence potential
- Previous psychiatric treatment
- Any history of treatment with psychotropic medication or antidepressants
- Substance abuse or treatment for substance abuse
- Educational history
- Sexual abuse victimization (28 CFR 115.81)
- Predatory behavior or perpetrated sexual abuse (28 CFR 115.81)

#### **724.5 MENTAL HEALTH REFERRALS**

Qualified mental health staff should administer a complete and thorough evaluation of incarcerated persons referred for treatment as soon as practicable but no later than 14 days from the referral. The evaluation should include:

- Review of the incarcerated person's screening and appraisal information.
- Observations of the incarcerated person's behavior.
- Information gathered from interviews and testing to determine the incarcerated person's mental health condition, intellect, personality, problems and ability to deal with a custody environment.
- Collection of the incarcerated person'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 incarcerated person's needs.

## Special Needs Medical Treatment

### 726.1 PURPOSE AND SCOPE

This purpose of this policy is the proper treatment and management of incarcerated persons 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.

#### 726.1.1 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 incarcerated person 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.

### 726.2 POLICY

It is the policy of this office that all individuals identified as having chronic diseases or special needs are enrolled in a chronic disease program to decrease the frequency and severity of the symptoms, prevent disease progression and complication, and foster improved function.

When a qualified health care professional recognizes that an incarcerated person 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 incarcerated persons 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 incarcerated persons to custodial personnel in order for them to accurately classify and house incarcerated persons in the facility. It is the responsibility of the Facility Manager 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)).

### 726.3 CLINICAL PRACTICE GUIDELINES

The Responsible Health Authority 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

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- Communicable diseases
- Developmentally disabled incarcerated persons
- Diabetes
- Dialysis
- Frail or elderly incarcerated persons
- High blood cholesterol
- HIV
- Hypertension
- Mental illness
- Mobility impairments
- Pregnancy
- Seizure disorder
- Suicidal ideation
- Terminally ill
- Tuberculosis

#### **726.4 DOCUMENTATION**

Documentation in an incarcerated person'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 Health Authority or the authorized designee.



## Communicable Diseases

### 728.1 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 incarcerated persons 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 incarcerated persons, and for incarcerated persons or employees who have contracted a communicable disease from an ill person.
- (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.

#### 728.1.1 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, or tuberculosis 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 Safety and Health 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 incarcerated persons 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.

### **728.2 POLICY**

It is the policy of this office to maintain an effective program that focuses on the identification, education, immunization, prevention, surveillance, diagnosis, medical isolation (when indicated), treatment, follow-up and proper reporting to local, state and federal agencies of communicable

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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)).

##### 728.2.1 EXPOSURE CONTROL OFFICER

The Facility Manager 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 Facility Manager 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 incarcerated person 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. The updated ECP can be found on the mySLO website under the Human-Resources-Policy-Library section.

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.

##### 728.2.2 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 Health Authority, 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 Responsible Health Authority also shall coordinate with the local public health entity on appropriate policy and procedure when indicated.
- (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.

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- (e) Communicating with employees, other employers, and the local health officer regarding the suspected or diagnosed infectious disease status of referred incarcerated persons, including notification of exposed employees.
- (f) Reducing the risk of ATDs through the ECP and reviewing the plan at least annually.
- (g) Reducing the risk of exposure to BBPs (HIV, hepatitis).
- (h) Providing a system of medical services for employees who may become exposed to communicable diseases during the course of their employment.
- (i) Ensuring that all employees who have occupational exposure to communicable diseases participate in a training program at the time of their initial assignment, at least annually thereafter, and any time there is a change in working conditions.
- (j) Making all exposure and treatment plans available for employees, employee representatives, and NIOSH review.
- (k) Establishing procedures to ensure that members request exposure notification from health facilities after potential exposure to a person who may have a communicable disease who has been transported to a health facility and that the employee is notified of any exposure as required by Health and Safety Code § 1797.188.
- (l) Informing members of the provisions of Health and Safety Code § 1797.188 (exposure to communicable diseases and notification).
- (m) Acting as the designated officer liaison with health care facilities regarding communicable disease or condition exposure notification. The designated officer should coordinate with other office members to fulfill the role when not available. The designated officer shall ensure that the name, title, and telephone number of the designated officer is posted on the office website (Health and Safety Code § 1797.188).
- (n) Coordinating with the Department of Human Resources to provide required notices to members regarding COVID-19 exposures (Labor Code § 6409.6).

### **728.3 COMMUNICABLE DISEASE PROGRAM COMPONENTS**

#### **728.3.1 SURVEILLANCE**

Surveillance takes place throughout the period of the incarcerated person's confinement 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 incarcerated person 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 incarcerated person for obvious signs of infection (15 CCR 1206.5(a)).
- (b) **Health assessment** - Incarcerated persons shall have a health assessment within the first 14 days of incarceration. The health assessment process includes screening for symptoms of communicable disease. Incarcerated persons will have a Purified Protein

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Derivative (PPD) test or a chest X-ray for TB. STD testing is available upon request. Voluntary HIV testing is provided based on identified risk.

- (c) **Periodic health assessments** - Annual testing for TB is performed on all incarcerated persons who are in the facility for one year or more.
- (d) **Sick call and referrals** - At any time during incarceration, an incarcerated person may request to be evaluated for an infectious disease through the sick call process. Health and correctional staff can request that an incarcerated person be evaluated if they notice any signs of potentially infectious disease.
- (e) **Contact investigation** - When an incarcerated person housed in the general population develops symptoms of an infectious disease, the Responsible Physician should work cooperatively with the Facility Manager or the authorized designee and the public health department to provide appropriate screening and testing of potentially exposed persons.
- (f) **Environmental health and safety inspections** - The health and safety of the facility environment shall be inspected by the local public health entity and reported to the Facility Manager at least annually in a written report. Conditions identified as adversely affecting the health and safety of the incarcerated persons and/or employees or visitors shall be promptly addressed and corrected.

#### 728.3.2 IDENTIFICATION

Any incarcerated person suspected of having a communicable disease will be evaluated by a qualified health care professional as soon as reasonably practicable. Incarcerated persons 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 incarcerated persons and staff. These incarcerated persons 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)).

#### 728.3.3 TREATMENT

Qualified health care professionals shall provide care as directed by the Responsible Health Authority and consistent with scientific evidence-based medicine (15 CCR 1206.5(a)).

- (a) The Responsible Health Authority and the Facility Manager 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 incarcerated persons who are suspected or confirmed as having a communicable disease will be entered into the incarcerated person's health record.

#### 728.3.4 COMMUNICATION

The Responsible Health Authority 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)):

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- (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, the Exposure Control Officer, and the Facility Manager shall be kept informed of any incidence of communicable disease.
- (c) The Facility Manager shall be apprised of any medical situation that raises the risk of disease level for incarcerated persons, correctional officers, or any other staff members.

#### 728.3.5 CONTINUOUS QUALITY IMPROVEMENT

A continuous quality improvement (CQI) committee shall be formed consisting of the Responsible Health Authority, the Exposure Control Officer, the Facility Manager or the authorized designee, and a representative from the public health entity, when necessary. The purpose of the committee is to monitor infection control issues and evaluate infection control processes to ensure effectiveness.

Monthly statistics should be collected by health care services and assembled into a report presented by the Responsible Health Authority or the authorized designee, detailing surveillance activities, disease identification, and cases treated. The committee should meet quarterly and should discuss topics specific to infection control and communicable disease. Minutes of the meetings should be retained in accordance with established records retention schedules.

#### 728.3.6 EMPLOYEE TRAINING

The Responsible Health Authority or the authorized designee shall provide education to all correctional staff who have contact with infected incarcerated persons during the initial employee orientation and annually thereafter. The Training Coordinator shall schedule this training and shall retain all associated records in accordance with established records retention schedules.

#### 728.3.7 DATA COLLECTION AND REPORTING

The health authority shall be responsible for ensuring the systematic collection and analysis of data to assist in the identification of problems, epidemics, or clusters of nosocomial infections. All reportable illnesses as defined by the public health department shall be reported as required (15 CCR 1206.5(b)).

#### 728.3.8 UNIVERSAL PRECAUTIONS

Universal precautions shall be used by health care practitioners to minimize the risk of exposure to blood and bodily fluids of potentially 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.

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- 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.

#### 728.3.9 TRANSMISSION-BASED PRECAUTIONS

Transmission-based precautions may be needed in addition to universal precautions for selected patients who are known or suspected to harbor certain infections. These precautions are divided into three categories that reflect the differences in the way infections are transmitted. Some diseases may require more than one category.

- (a) Airborne precautions are designed to prevent the spread of ATDs, which are transmitted by minute particles called droplet nuclei or contaminated dust particles. These particles, because of their size, can remain suspended in the air for long periods of time, even after the infected person has left the room. Some examples of diseases requiring airborne precautions are TB, measles, and chicken pox.
  1. An incarcerated person 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 incarcerated person must move from the isolation room to another area of the facility, the incarcerated person should wear a mask during transport. Anyone entering the isolation room to provide care to the incarcerated person 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 incarcerated person. These particles are produced when an incarcerated person 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 incarcerated person. Incarcerated person movement should be restricted to the minimum necessary for effective facility operations. The incarcerated person should wear a mask during transport.
- (c) Contact precautions are designed to prevent the spread of organisms from an infected incarcerated person through direct (touching the incarcerated person) or indirect (touching surfaces or objects the incarcerated person touched) contact. Examples of

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incarcerated persons 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 incarcerated persons are being transported. Incarcerated persons shall receive training on the disease transmission process and will be provided with appropriate barrier devices.

#### Precautions for Incarcerated Person Contact and Transportation

	<b>GLOVES</b>	<b>SURGICAL MASKS</b>	<b>N95 MASKS</b>	<b>ISOLATION GOWNS</b>
<b>Contact</b>				
Incarcerated Person	No	No	No	No
Personnel	Yes	No	No	Yes
<b>Droplet</b>				
Incarcerated Person	No	Yes	No	No
Personnel	Yes	Yes	No	Yes
<b>Airborne</b>				
Incarcerated Person	No	Yes	No	No
Personnel	Yes	No	Yes	No

#### 728.3.10 ENVIRONMENTAL HEALTH AND SAFETY

The Responsible Health Authority 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.

#### 728.3.11 REGULATED WASTE

The Responsible 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



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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.

#### **728.4 ECTOPARASITE CONTROL**

Ectoparasite control will be initiated, where clinically indicated, immediately following the medical screening or when the incarcerated person manifests signs and symptoms of lice or scabies (15 CCR 1212).

- (a) Any incarcerated person who indicates parasitical infection upon entering the facility shall be treated by a qualified health care professional.
- (b) Any incarcerated person suspected of having lice/scabies may be referred to sick call by a deputy.
- (c) An incarcerated person may access sick call if the person believes there is a problem with lice/scabies.
- (d) A qualified health care professional shall evaluate any incarcerated person with a lice/scabies complaint. If there are positive findings, the incarcerated person shall be treated for the infestation accordingly.
  1. The lice and scabies treatment guidelines will be followed by the qualified health care professional, if a physician's order for the medication administration is obtained.
    - (a) The prescribing physician shall be notified if the incarcerated person is pregnant, as certain medications are contraindicated for pregnant persons. 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 incarcerated person's clothing and linen shall be removed from the person's 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

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- (b) Storage in a plastic bag for non-washable items for 14 days.
  - 1. An incarcerated person with scabies should be housed in a single cell until 24 hours after beginning treatment. An incarcerated person with lice should be housed in a single cell until no more nits are identified in a comb out after treatment. The exception to housing alone is if everyone in the cell is being treated for the same infection.
  - 2. Gloves are to be used for direct contact until the incarcerated person 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 incarcerated person should be evaluated for prophylactic treatment because of the long incubation period of the scabies parasite.

#### **728.5 EMPLOYEE EXPOSURE CONTROL**

All facility staff who 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 incarcerated person and when handling the personal belongings of an incarcerated person.

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, personal items in general) while wearing disposable gloves in a potentially contaminated environment. All procedures involving blood or other potentially infectious materials shall be done in a way to minimize splashing, spraying, or otherwise generating droplets of those materials.

Eating, drinking, smoking, applying lip balm, and handling contact lenses shall be prohibited in areas where the potential for exposure exists.

#### **728.5.1 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 that 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 incarcerated person 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

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sign a consent form. Employees may reverse their decision to decline at any time by signing a consent form.

#### 728.5.2 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.

#### 728.5.3 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.

#### 728.5.4 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 the employee's 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

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or decontamination area. Cleaning shall not be done in the kitchen, bathrooms, or other locations not designated as a cleaning or decontamination area.

#### 728.5.5 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 follow policy to secure a dry cleaner that is capable of cleaning contaminated clothing, who should be informed 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.

#### 728.5.6 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.

#### 728.5.7 DECONTAMINATION OF THE CLEANING AREA

Policy shall designate a location in the facility that will serve as the area for cleaning/decontamination. This area is to be used to keep equipment clean and sanitary and for employees to wash any potential contamination from their bodies. This area is to be thoroughly cleaned after each use and to be maintained in a clean and sanitary order at all times between each use. The application of cosmetics, smoking of cigarettes and consumption of food and drink are prohibited in this area at all times.

### **728.6 SHARPS AND ITEMS THAT CUT OR PUNCTURE**

All personnel shall avoid using or holding sharps (needles) unless they are assisting medical personnel or collecting them for evidence. Unless required for reasons related to evidence preservation, employees are not to recap sharps. If recapping is necessary, a one-handed method shall be employed to avoid a finger prick. Disposal, when possible, shall be into a puncture-proof biohazard container.

All sharps and items that cut or puncture (e.g., broken glass, razors and knives) shall be treated cautiously to avoid cutting, stabbing or puncturing one's self or any other person. In addition, if a sharp object contains known or suspected blood or other body fluids, that item is to be treated as a contaminated item. If the item is not evidence, touching it with the hands shall be avoided. Rather, use a device such as tongs or a broom and a dustpan to clean up debris. If the material must be touched, protective gloves shall be worn.

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#### **728.7 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.

##### **728.7.1 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)).

##### **728.7.2 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.

##### **728.7.3 MEDICAL CONSULTATION, EVALUATION, AND TREATMENT**

Any employee who was exposed or who suspects the employee 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.

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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.

#### 728.7.4 COUNSELING

Human Resources/Risk Management shall provide the exposed employee (and the employee's family if necessary) the opportunity for counseling and consultation.

#### 728.7.5 CONFIDENTIALITY OF REPORTS

Most of the information involved in this process must remain confidential. Human Resources shall ensure that all records and reports are kept in the strictest confidence. Human Resources/Risk Management shall be responsible for maintaining records containing the employee's treatment status and the results of examinations, medical testing and follow-up procedures.

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)).

#### 728.7.6 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.

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- (d) Seeking a court order when the person who may be the source of an exposure will not consent to testing and the exposure does not fall under a statutory scheme for testing. This covers testing for any communicable disease as deemed appropriate by a qualified health care professional and documented in the request for the court order.
- (e) Under certain circumstances, a court may issue a search warrant for testing an adult when an employee of the San Luis Obispo County Sheriff's Office qualifies as a crime victim.

#### 728.7.7 EXPOSURE FROM A NON-INCARCERATED PERSON

Upon notification of an employee's exposure to a non-incarcerated person (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 the person's 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.

#### 728.7.8 EXPOSURE FROM AN INCARCERATED PERSON

If the ECO receives notification from an employee of a potential exposure from an incarcerated person, the ECO, or designee, should take the following steps:

- (a) Seek consent from the person who was the source of the exposure and seek a court order, if consent is refused.
- (b) Take reasonable steps to immediately contact the county health officer and provide preliminary information regarding the circumstances of the exposure and the status of the involved individuals to determine whether the county health officer will order testing.
- (c) Remain in contact with the county health officer to determine whether testing of the incarcerated person 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 incarcerated person 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.

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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-incarcerated person.



## Aids to Impairment

### 730.1 PURPOSE AND SCOPE

This policy acknowledges the high priority of incarcerated person health and recognizes that some incarcerated persons will require adaptive devices to assist them with daily living activities on a temporary or permanent basis.

The San Luis Obispo County Sheriff's Office has established this policy for the Responsible Health Authority and Health Services Authority to review and evaluate the need for adaptive devices, while considering facility security concerns regarding the use of such items.

When the Responsible Health Authority or Health Services Authority determines that the medical condition of an incarcerated person 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.

#### 730.1.1 DEFINITIONS

Definitions related to this policy include:

**Adaptive device** - Any orthotic, prosthetic or aid to impairment that is designed to assist an incarcerated person with the activities of daily living or that is clinically appropriate for health, as determined by the Responsible Health Authority.

**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.

### 730.2 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 incarcerated person 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 Health Authority (15 CCR 1206(d); 15 CCR 1207).

### 730.3 FACILITY-OWNED MEDICAL EQUIPMENT

All adaptive devices belonging to the Office shall be marked and numbered, identifying them as office property.

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- (a) The medical equipment shall be documented on the property sheet the intake deputy for all medical equipment issued to the incarcerated person, regardless of who owns the property.
- (b) Upon the release of an incarcerated person, the releasing deputy shall review the medical equipment issued to the incarcerated person and contact the medical staff for instructions regarding any office-owned adaptive device.

#### **730.4 MEDICAL OR DENTAL ORTHOSES, PROSTHESES, OR ADAPTIVE DEVICES**

The following applies to incarcerated persons with any orthopedic or prosthetic devices (Penal Code § 2656):

As required by Penal Code Section 2656, incarcerated persons shall be allowed to retain possession of their orthopedic or prosthetic appliance if such appliance has been prescribed or recommended and fitted by a physician. If, however, the On-Duty Sergeant has probable cause to believe possession of such orthopedic or prosthetic appliance constitutes an immediate risk of bodily harm to any person in the facility or threatens the security of the facility, such appliance may be removed. If such appliance is removed, the incarcerated person shall be deprived of such appliance only during such time as the facts which constitute probable cause for its removal continue to exist; if such facts cease to exist, then the On-Duty Sergeant shall return such appliance to the incarcerated person. The removal of any appliance and the return of such appliance shall be document in a *Jail Incident Report* When such appliance is removed, the incarcerated person shall be examined within 24 hours after such removal. If the examining physician determines that removal is or will be injurious to the health or safety of the incarcerated person, they shall so inform the incarcerated person and Operations Correctional Lieutenant. Upon receipt of the physician's opinion, the Operations Correctional Lieutenant shall either return the appliance to the incarcerated person or refuse to return such appliance to the incarcerated person, informing the physician and the incarcerated person of the reasons for such refusal and promptly providing the incarcerated person with a form, as specified in subdivision (c) of PC2656, by which the incarcerated person may petition the superior court for return of the appliance.

Once an adaptive device has been approved for use, the qualified health care professional shall enter the authorization into the incarcerated person's health file. If the incarcerated person 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 incarcerated person sign in the medical record that they received the prosthesis.

Any prostheses that are brought to the facility by family members or others after the incarcerated person has been incarcerated shall be subject to a security check.

#### **730.5 REQUESTS FOR MEDICAL AND DENTAL PROSTHESES**

All requests for new or replacement medical or dental prostheses shall be individually evaluated by the Responsible Health Authority and reviewed for approval by the Facility Manager or authorized designee. Considerations for approval shall be based upon:

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- Medical needs of the incarcerated person.
- The anticipated length of incarceration.
- The safety and security of the facility.

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## Detoxification and Withdrawal

### 732.1 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.

#### 732.1.1 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.

### 732.2 POLICY

Withdrawal from alcohol or drugs can be a life-threatening medical condition requiring professional medical intervention. It is the policy of this office to provide proper medical care to inmates who suffer from drug or alcohol overdose or withdrawal.

To lessen the risk of a life-threatening medical emergency and to promote the safety and security of all persons in the facility, staff shall respond promptly to medical symptoms presented by inmates.

The Responsible Health Authority shall develop written medical protocols on detoxification symptoms necessitating immediate transfer of the inmate to a hospital or other medical facility, and procedures to follow if care within the facility should be undertaken (15 CCR 1213).

Inmates who are booked into the facility who are participating in a narcotic treatment program shall, with the approval of the director of the program, be entitled to continue in the program until conviction (Health and Safety Code § 11222).

### 732.3 STAFF RESPONSIBILITY

Staff should remain alert to signs of drug and alcohol overdose and withdrawal. These symptoms include, but are not limited to, sweating, nausea, abdominal cramps, anxiety, agitation, tremors, hallucinations, rapid breathing and generalized aches and pains. Any staff member who suspects that an inmate may be suffering from overdose or experiencing withdrawal symptoms shall

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promptly notify the Shift Commander, who shall ensure that a qualified health care professional is promptly notified.

#### **732.4 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.

#### **732.5 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.

#### **732.6 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 Health Authority, 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 Health Authority. Qualified health care professionals shall evaluate and provide care to patients utilizing written procedures and/or physician orders.

#### **732.7 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.

	<b>MILD</b>	<b>MODERATE</b>	<b>SEVERE</b> (Delirium Tremens)
<b>ANXIETY</b>	Mild restlessness and anxiety	Obvious motor restlessness	Extreme restlessness and agitation with appearance of intense fear is common
<b>APPETITE</b>	Impaired appetite	Marked anorexia	Often rejects all food and fluid except alcohol

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<b>BLOOD PRESSURE</b>	Normal or slightly elevated systolic	Usually elevated systolic	Elevated systolic and diastolic
<b>CONFUSION</b>	Oriented, no confusion	Variable confusion	Marked confusion and disorientation
<b>CONVULSIONS</b>	No	May occur	Severe convulsions are common
<b>HALLUCINATIONS</b>	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
<b>MOTOR CONTROL</b>	Inner "shaky"	Visible tremulousness	Gross uncontrollable shaking
<b>NAUSEA</b>	Nausea	Nausea and vomiting	Dry heaves and vomiting
<b>PULSE</b>	Tachycardia	Pulse 100-120	Pulse 120-140
<b>SLEEP</b>		Marked insomnia and nightmares	Total wakefulness
<b>SWEATING</b>	Restless sleep or insomnia	Obvious	Extreme

# Involuntary Administration of Psychotropic Medication

## 734.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines under which an inmate may be given a court ordered involuntary antipsychotic medication dose for treatment and recovery pursuant to 1368 PC and 1369.1 PC.

### 734.1.1 DEFINITIONS

- (a) **Jail Based Competency Treatment Program (“JBCT”)**: a collaboration between California Department of State Hospitals, San Luis Obispo County Sheriff’s Office, and San Luis Obispo County’s contracted medical provider to restore competency to mentally ill inmates so they can stand trial.
- (b) **Involuntary Antipsychotic Medication Order (“Order”)**: a court order authorizing the administration of involuntary antipsychotic medication to an inmate.
- (c) **Involuntary Antipsychotic Medication Review Order**: a court order requiring a review hearing of an inmate’s status prior to ordering involuntary medication.
- (d) **JBCT Staff**: mental health professionals working in conjunction with correctional staff and the County’s contracted medical provider to restore competency of mentally ill inmates to stand trial.
- (e) **Behavioral Health Unit Deputy**: correctional deputy assigned to the JBCT Program who works in partnership with staff from the California Department of State Hospitals, to facilitate programs and treatment to restore competency of mentally ill inmates to stand trial.
- (f) **Behavioral Health Unit Sergeant**: correctional sergeant assigned to supervise the JBCT Program who works in partnership with staff from the California Department of State Hospitals, to facilitate programs and treatment to restore competency of mentally ill inmates to stand trial.
- (g) **Custody Emergency Response Team**: correctional deputies with specialized training in the safe and lawful application of force and calculated use of force tactics.
- (h) **Mental Health Prescribers**: licensed psychiatrists or psychiatric nurse practitioners contracted to provide mental health and program services within the County’s adult detention facilities.
- (i) **Medical Provider or Medical Staff**: San Luis Obispo County’s contracted medical service provider who provides licensed medical services to the inmate population in the County’s adult detention facilities; positions include psychiatrists, psychiatric nurse practitioners, registered nurses, and psychiatric technicians.
- (j) **Treatment Facility**: a facility designated to provide medically approved medication to inmates found to be mentally incompetent and unable to provide informed consent due to a mental disorder pursuant to California Penal Code Section 1367, et seq

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##### **734.2 POLICY**

Pursuant to Resolution No. 2018-\_\_\_\_\_, dated May 1, 2018, of the San Luis Obispo County Board of Supervisors, the jail is designated as a Treatment Facility and may provide medically approved involuntary medication to inmates found to be (1) mentally incompetent, (2) unable to provide informed consent due to a mental disorder, and (3) under an order from the San Luis Obispo County Superior Court. This Policy will clarify procedures to ensure the rights and safety of the inmate are protected and the safety of staff is assured. This Policy is limited to administration of involuntary psychotropic medication orders for PC 1370 inmates due to (lack of) capacity.

- I. An antipsychotic medication order issued by the San Luis Obispo County Superior Court is required before any involuntary antipsychotic medication is administered to a mental health inmate confined to the custody of the Sheriff.
- II. The maximum period an inmate may be treated under the same involuntary medication order shall not exceed six months.
  1. Upon completion of the six-month treatment period, an antipsychotic medication review hearing shall be held by the judicial court of jurisdiction to determine a continued treatment period, if any.
- III. Only licensed medical prescribers may prescribe involuntary medications.
- IV. Only licensed medical providers or medical staff shall administer medications to inmates.
  1. Facility medical staff or emergency medical first responders may administer lifesaving medications in exigent circumstances to all inmates without consent.
- V. If mechanical restraint devices are used to maintain the safety of the inmate and facility staff, use shall be in accordance with established Use of Force policy.
- VI. Administration of psychiatric medication on an involuntary basis shall not be administered to an inmate in view of other inmates unless:
  1. The inmate refuses to comply with involuntary medication procedure, in which case medical staff and custodial staff may determine the safest location possible to administer involuntary



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medications. For example, medical exam room, extraction cell, or the inmate's cell.

(a) Please refer to **734.3.2 STABILIZATION AND INVOLUNTARY TRANSFER** for more information on this procedure.

VII. After administration of involuntary medication, monitoring procedures shall take place.

1. Please refer to **734.3.3 CARE AFTER MEDICATING** for more information on this procedure.

#### **734.3 PURPOSE**

The purpose of the involuntary medication administration procedure is to ensure the safety and security of the inmate, the medical staff, and the custodial staff. As such, it shall be executed with respect and clear communication.

#### **734.3.1 PROCEDURES**

I. Custodial personnel will complete the following procedures when assisting mental health clinicians and medical staff in administering involuntary antipsychotic medication to an inmate.

II. Planning administration

1. A contact person will be selected to lead conversation with the inmate.

(a) The contact person preferably has an established relationship with the inmate.

2. A second person will be selected to provide support to the contact person.

(a) The preferred second person is a Behavioral Health Unit Deputy.

1. If a Behavioral Health Unit deputy is the contact person, then another custodial staff member may be the second person.

3. JBCT Staff, Behavioral Health Unit deputies and/or medical staff will notify the on-duty sergeant when an Order is issued.

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4. The on-duty sergeant will coordinate with the following staff in developing a plan to identify a time and location for administering the medication:
    - (a) Custody staff
    - (b) JBCT Staff
    - (c) Inmate
    - (d) Medical and mental health provider
- III. Compliant Inmate Medication Procedure:
1. The contact person will check the inmate's armband and verify their identity matches the Order.
  2. The contact person will communicate with the identified inmate to notify the inmate that an Order has been issued to administer medication.
  3. If the inmate voluntarily complies to receive medication, he/she shall ambulate to the defined location where the medication shall be administered.
  4. Custodial staff will place restraints on the inmate and escort the inmate to the defined location where medical staff will administer the medication.
  5. Medical staff will administer the medication.
  6. The on-duty sergeant, medical and mental health staff will determine if the inmate will be returned to his/her cell or placed into an appropriate cell for observation.
  7. Once involuntary medication is administered, monitoring procedures shall take place.
  8. If during the attempt to gain voluntary compliance the inmate becomes agitated to the extent that force is needed to contain his/her physical actions:
    - (a) Staff will stabilize the inmate's movement.
    - (b) Staff will make a final attempt to gain voluntary compliance with medication.
    - (c) If the inmate continues to refuse, then medical staff will safely administer involuntary antipsychotic medications.

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9. Please refer to **734.3.3 CARE AFTER MEDICATING** for more information on this procedure.
- IV. Non-Compliant Inmate Medication Procedure:
1. Staff will verify the inmate's identity matches the Order.
  2. JBCT Staff and Behavioral Health Unit deputies or authorized designee will communicate with the inmate that an Order has been issued to administer involuntary psychotropic medication.
  3. Behavioral Health Unit deputies or designee will attempt to gain voluntary compliance for the administration of medication; if the inmate refuses to take the medication,
    - (a) For a non-compliant inmate; the preferred location remains the Day Room but may be elsewhere based on exigent circumstances.
    - (b) At the on-duty sergeant's discretion and in accordance with this Policy, medication may also be administered for safety reasons in the inmate's cell or elsewhere in the facility as deemed necessary by the sergeant for safety reasons.
  4. If the inmate refuses at least three more verbal requests for voluntary compliance, staff shall inform the inmate that medications can and will be administered involuntarily.
    - (a) Staff will again offer oral medications three to four times.
    - (b) If the inmate continues to refuse, custody may use force necessary to stabilize the inmate so that medical staff can safely administer the involuntary medications.
    - (c) The on-duty sergeant may activate the Custody Emergency Response Team to implore an entry plan for an extraction of the inmate.
    - (d) The full event and administering of medication shall be video recorded.
    - (e) If extracted, the inmate is to be escorted to an appropriate cell where medical staff or a mental health prescriber will administer the ordered medication.

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- (f) The inmate is to be medically cleared unless the inmate refuses examination and is uncooperative.
5. The on-duty sergeant will confer with medical and mental health staff to determine if the inmate is to be returned to their cell or placed into a safety cell in for observation.
6. Inmate will be monitored after administration of involuntary medication.
  - (a) Please refer to **734.3.2 STABILIZATION AND INVOLUNTARY TRANSFER** for more information on this procedure.
7. When any involuntary medication is administered, a detailed Jail Incident Report is to be completed by the CERT leader or on-duty sergeant's designee.
8. Nursing staff shall ensure that an Involuntary Medication Log is maintained in which is recorded each occasion of involuntary medication administered to any inmate.
9. The log entries shall identify the inmate by name and number and shall include the reason for medication and the time and date of medication.
10. This information shall be maintained as part of an electronic medical record system.
11. Upon request, such logs shall be made available for review by department medical and mental health executives

#### 734.3.2 STABILIZATION AND INVOLUNTARY TRANSFERS

All efforts will be made to encourage the inmate to safely cooperate with the administration of involuntary medication; that is, medical and custodial staff will encourage the inmate to voluntarily ambulate to appropriate quarters for administration of involuntary medication. However, stabilization and involuntary transfer may be required to ensure safety if the inmate refuses to cooperate with the transfer and administration procedure.

- I. Custody staff will escort inmate to area for medication.
  1. Medical staff will first ask inmate to ambulate to that location.

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2. If inmate refuses to ambulate to the location, medical staff will inform the inmate that custodial staff may use calculated force to stabilize and transfer the inmate.
  3. If the inmate continues to refuse to cooperate with the process, custodial staff may use calculated force to stabilize the inmate.
  4. Once the inmate is stabilized, custodial staff shall ask the inmate if the inmate is willing to ambulate to the agreed upon location.
  5. If the inmate refuses to ambulate and it is safe to do so, custodial staff may use calculated force to transfer the inmate to the agreed upon location.
  6. If the transfer poses a significant danger of harm to the inmate or staff, then administration can take place without transfer.
  7. Medical and mental health staff will use clinical judgment when it is safe to administer medications.
  8. Custodial staff will remain nearby to ensure inmate's physical stability during administration process.
  9. Custodial staff, medical staff, and mental health staff will continuously offer verbal comfort to the inmate during the stabilization and relocation process.
- II. Once involuntary medication is administered, monitoring procedures shall take place; please see below ("Care After Medicating")
1. In the event the inmate develops side effects from the medication, monitoring staff shall contact a psychiatrist or psychiatric nurse practitioner immediately.
  2. Monitoring staff shall immediately initiate emergency response procedures if the inmate develops emergent or life-threatening side effects.
  3. In all cases where it is both feasible and medically desirable, a fast-acting medication shall be utilized to facilitate the inmate's rapid transfer to a licensed medical facility

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##### 734.3.3 CARE AFTER MEDICATION ADMINISTRATION

It is important to monitor the inmate after administration of involuntary medication to track effectiveness of medication, to address any side-effects, and to monitor overall health of the inmate.

- I. Custodial staff will monitor the inmate twice every 30 minutes for the first hour or under the direction of the on-duty sergeant. Adhere to **508 Inmate Safety Checks**.
- II. Medical staff shall monitor the inmate after medication administration as per the appropriate policy.
- III. Mental health prescribers and medical staff shall note their observations and decisions in writing in the medical record.
- IV. Inmates subject to an involuntary medication order are also subject to monitoring to ensure their safety, health, and changing psychiatric presentation. Monitoring may take various forms and is at the discretion of the medical provider.
- V. If a significant adverse reaction to the medication occurs, emergency care shall be given, and the inmate shall be immediately transferred to a higher level of care.
- VI. In addition to the above monitoring procedures, all standard procedures shall be followed in accordance with established policy.
  1. For example, if the inmate is placed in a safety cell at any point, then safety cell procedures, monitoring, and documentation will take place as normal.

# Clinical Performance Enhancement

## 738.1 PURPOSE AND SCOPE

This office recognizes the importance of ensuring that qualified health care professionals are competent in their clinical skills and that the clinical performance enhancement review addresses areas in need of improvement.

### 738.1.1 DEFINITIONS

Definitions related to this policy include:

**Clinical performance enhancement review** - The process of having a qualified health care professional's work reviewed by another professional (peer review) of at least equal training in the same general discipline, e.g., review of the facility's physicians by the Responsible Physician.

**Independent review** - The assessment of a qualified health care professional's compliance with discipline-specific and community standards. The review is an analysis of a practitioner's clinical practice. This review may be conducted by someone who may or may not be directly employed by the institution. However, if the review was prompted by an inmate complaint, the reviewing practitioner must not have been previously involved in the care of that inmate.

## 738.2 POLICY

It is the policy of this office to conduct a biannual peer review of all qualified health care professionals. The clinical performance enhancement review process is neither an annual performance review nor a clinical case conference process. It is a professional review focused on the qualified health care professional's clinical skills. Its purpose is to enhance competence and address areas in need of improvement.

An immediate peer review may be authorized by the Responsible Physician if serious problems of practice arise with a specific qualified health care professional.

## 738.3 COMPONENTS OF THE CLINICAL PERFORMANCE ENHANCEMENT

The clinical performance enhancement review process is to be conducted biannually on all qualified health care professionals. The result of these reviews shall be kept confidential. Documentation from the review shall include:

- Name of the individual being reviewed.
- Date of the review.
- Name and credentials of the reviewer.
- Confirmation that the review was shared with the qualified health care professional.
- Summary of findings and corrective action, if any.

If a clinical performance enhancement review identifies a serious concern, the Responsible Physician shall implement an independent review by someone who is not directly employed by

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this office. The result of this review shall be shared with the appropriate health care service by the Responsible Physician, and a plan of correction shall be implemented.

The Responsible Physician will keep a log of clinical performance enhancement reviews of all qualified health care professionals to ensure compliance with this policy.

#### **738.4 HEALTH CARE COMPLAINTS**

The Facility Manager, in cooperation with the Responsible Physician, shall be responsible for developing and implementing a process by which inmates may submit complaints about the health care services they have received. There shall also be a means of collecting and analyzing the observations of other qualified health care professionals, correctional staff or other nonmedical staff regarding the delivery of health care services.

The Responsible Physician shall convene a panel of independent physicians to review the practice of the physician about whom complaints or observations have been made. The Responsible Physician shall take appropriate action at the recommendation of the panel.

#### **738.5 RECORDS**

All clinical performance enhancement review reports and complaint investigations shall be considered confidential. The contents of such files shall not be revealed to other than the involved employee or authorized personnel, except pursuant to lawful process or as otherwise authorized or required by statute.



# Involuntary Emergency Psychotropic Medication Administration

## 736.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for the administration procedure of involuntary emergency psychotropic medication for an inmate.

## 736.2 PROCEDURE

Custodial personnel will complete the following procedures when assisting mental health clinicians and medical staff in the administration of involuntary emergency psychotropic medication:

- (a) Mental health clinicians will determine if involuntary emergency psychotropic medication is needed for an inmate having an acute mental health crisis causing imminent dangerousness, combativeness, or a need to maintain safety and security.
- (b) Custodial staff will evaluate if custodial restraints, such as handcuffs, waist chains and/or leg irons, are sufficient to maintain control of the inmate and prevent harm to both staff and the inmate.
- (c) Should custodial restraints not be sufficient to maintain safety and security, the WRAP restraint may be used.
- (d) If the inmate requires more than one injection, the inmate will be placed on a WIC 5150 hold and transported to the hospital for medical evaluation.

## 736.3 INJECTIONS IN THE WRAP

If an inmate is administered involuntary emergency psychotropic medication while in the WRAP, custodial staff shall adhere to the following procedure:

- (a) Direct observation will be maintained on the inmate at all times.
- (b) The inmate will be removed from the WRAP as soon as the inmate's behavior is such that there is no risk of self harm or danger to staff. This time will not exceed two hours.

## 736.4 AFTER CARE

Once an inmate has been removed from either the WRAP restraint or custodial restraints, custodial staff will monitor the inmate in accordance with **Policy 734.3.3 Care After Medication Administration**.

## Clinical Decisions

### 737.1 PURPOSE AND SCOPE

This policy recognizes that a coordinated effort between the Responsible Physician and the Facility Manager 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.

#### 737.1.1 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.

### 737.2 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 Facility Manager 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)).

### 737.3 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.

### 737.4 PROBLEM RESOLUTION

Any issues arising because of the clinical decision process shall be reviewed under the provisions of the Continuous Quality Improvement Policy using medical records, grievances, staff complaints and any other relevant data.

## Health-Trained Staff

### 738.1 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.

### 738.2 POLICY

It is the policy of this office that a designated health-trained staff member shall be responsible for coordinating the delivery of health care services in the facility any time that qualified health care professionals are not available on-site (15 CCR 1028).

### 738.3 DUTIES OF THE HEALTH-TRAINED STAFF

The Chief Medical Officer or the authorized designee, in coordination with the Responsible Health Authority, 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.

### 738.4 TRAINING

The Chief Medical Officer or their designee, and the Responsible Health Authority 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.

### 738.5 UNREASONABLE BARRIERS

No member of the San Luis Obispo County Sheriff's Office correctional facility shall create unreasonable barriers to an inmate's access to health care services. The following are examples of conduct that are likely to create unreasonable barriers and are prohibited:

- (a) Punishing inmates for seeking care for their serious health needs.
- (b)
- (c) Deterring inmates from seeking care for their serious health needs by scheduling sick call at unreasonable times.

# Licensure, Certification and Registration Requirements

## 740.1 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, per the National Commission on Correctional Health Care, (NCCHC), J-C-01.

## 740.2 POLICY

It is the policy of this office that all qualified health care professionals who provide health care services to inmates meet the same standards as those working in the community, including required licenses, certifications and restrictions, including those defining the recognized scope of practice specific to the profession (15 CCR 1203). Job descriptions shall include minimum qualifications and specific duties and responsibilities, and shall be approved by the Responsible Health Authority

The current credentials and job descriptions for all qualified health care professionals are on file at the with Wellpath Human Resources retained in accordance with established records retention schedules.

Any health care provided to inmates at the facility that is not provided by a Responsible ualified Health Authority 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).

## 740.3 CREDENTIALING AND FILE MAINTENANCE

A completed file of current licenses, certifications, registration, credentials, reference checks and applications shall be maintained by the Office Department of Human Resources and by the Responsible Health Authority.

- (a) The Responsible Health Authority or the authorized designee should obtain confirmation of current licensure, certification and registration prior to making any offer of employment. It is helpful for the Responsible Health Authority to keep copies of these documents on-site and readily accessible.
- (b) Inquiries into any sanctions or disciplinary actions of state boards, employers and the U.S. Department of Health and Human Services' National Practitioner Data Bank should be conducted prior to making any offer of employment.
- (c) Individuals should be required to pass a job related pre-employment background investigation. Employment references may be obtained via mail or over the telephone with documentation.
- (d) Each employee should be held responsible for providing renewal verification of licenses, certificates and registration prior to the expiration date.

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- (e) Any group or individual providing health care services must complete the credentialing process that is appropriate for their profession and must provide the facility a copy of current licensure and, when appropriate, a Drug Enforcement Administration certificate to prescribe controlled substances.
- (f) To be eligible for hire, all clinical health care personnel must possess and maintain a current CPR certification and provide documentation to the Responsible Health Authority or the authorized designee.
- (g) The credential verification process includes inquiry regarding sanctions or disciplinary actions of state boards and, for prescribers, the National Practitioner Data Bank (NPDB).
- (h) Procedures for periodic reconfirmation of current credentials by the Responsible Health Authority.
- (i) Background checks for child and sexual abuse are required by law in some states.

#### **740.4 STUDENTS AND/OR INTERNS**

If the health care services provided to an inmate are performed by any intern, resident or student who is authorized to provide specific health care services as part of a formal medical training program, the individuals in training will work under the control and supervision of a qualified health care professional. Assigned tasks shall be commensurate with the intern, student or resident's level of training.

There shall be a written agreement between the facility and the entity sponsoring the training program that covers the scope of work, duration of the agreement and any legal or liability issues.

Any student, intern or resident working in the facility shall participate in a facility orientation that includes, but is not limited to, topics such as fire safety, facility security, items considered contraband and inmate culture.

All students, interns or residents shall be required to agree in writing to abide by all facility policies, including those relating to hostages, facility security and the confidentiality of information.

All training provided, written agreements and/or contracts shall be maintained in the intern, resident or student's file by the Responsible Health Authority or the authorized designee in accordance with established records retention schedules. If students are utilized, students are properly oriented and identified.

## **Inmate Assistants**

### **746.1 PURPOSE AND SCOPE**

The purpose of this policy is to provide guidelines and establish parameters for the appropriate use of inmates as assistants in the provision of health care services.

### **746.2 POLICY**

It is the policy of this office that all inmate assistants shall be under direct supervision and used in a manner that does not give them control or authority over other inmates, access to confidential medical information, or authority to make treatment decisions or provide patient care. Inmate assistants shall not be used as a substitute for qualified health care professionals.

### **746.3 INMATE ASSISTANTS**

Inmates who have received appropriate training may perform limited duties involving assistance to other inmates however, only while under the direct supervision of qualified health care professionals. The duties that inmate assistants may perform include the following:

- Peer support and education
- Emotional support activities for inmates who are ill
- Assisting disabled inmates with of daily living activities such as providing escort assistance or assistance with bathing and dressing to inmates who are blind or physically disabled
- When qualified and properly trained and when participating in a formal suicide prevention plan, inmate assistants may serve as a companion to other inmates who are at risk of suicide

### **746.4 PROHIBITED DUTIES**

Inmate assistants shall not be used for any direct patient care activities, diagnostic or treatment decisions, dispensing of medications, scheduling health care appointments or any form of patient care normally provided by a qualified health care professional.

### **746.5 TRAINING**

Inmate assistants assigned to health care services shall receive education and training specific to their anticipated duties to ensure that they understand and can perform their duties in a safe and lawful manner.

## Suicide Prevention and Intervention

### 743.1 PURPOSE AND SCOPE

This policy establishes the suicide prevention and intervention program to identify, monitor and, when necessary, provide for emergency response and treatment of incarcerated persons who present a suicide risk while incarcerated at the office detention facilities.

This policy is intended to reduce the risk of self-inflicted injury or death by providing tools to the staff that will allow a timely and organized emergency response to suicide, suicide attempts, or an incarcerated person's unspoken indications that suicide is being considered. The three key components of this plan are evaluation, training, and screening with intervention.

### 743.2 POLICY

It is the policy of this office to minimize the incidence of suicide by establishing and maintaining a comprehensive suicide prevention and intervention program designed to identify incarcerated persons who are at risk of suicide and to intervene appropriately whenever possible. The program shall be developed by the Facility Manager or the authorized designee and the Responsible Physician, approved by the local public health entity, and reviewed annually by the Facility Manager. A copy of this policy shall be maintained in each unit of the facility where it can be easily accessed by all staff members (15 CCR 1029(a)(8); 15 CCR 1030).

### 743.3 STAFF TRAINING

All facility staff members who are responsible for supervising incarcerated persons shall receive initial and annual training on suicide risk identification, prevention, and intervention, to include, at minimum (15 CCR 1030):

- The provisions of this policy.
- Identification of the warning signs and indicators of potential suicide, including training on suicide risk factors.
- Identification of the demographic and cultural parameters of suicidal behavior, including incidence and variations in precipitating factors.
- Responding to suicidal and depressed incarcerated persons.
- Communication between corrections staff, court staff, and health care personnel.
- Using referral procedures.
- Housing observation and suicide watch-level procedures.
- Follow-up monitoring of incarcerated persons who attempt suicide.
- Communication between members and arresting/transporting deputies.
- A plan for mental health consultation following return from court as needed.

Recommendations for modification to suicide training should be directed to the Facility Manager, who shall review the recommendations and approve, if appropriate.

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#### **743.4 SCREENING AND INTERVENTION**

All incarcerated persons shall undergo medical and mental health screening during the intake process (15 CCR 1030). A portion of the intake medical screening is devoted to assessing incarcerated persons at risk for suicide. Upon an incarcerated person entering the jail, they should be assessed by a registered nurse for the ability to answer medical and mental health screening questions.

Any incarcerated person who appears to be unable to answer the initial medical screening questions may be transferred to a hospital or Psychiatric Health Facility, (PHF). The incarcerated person should receive medical clearance before acceptance into the jail and if transported to the PHF a medical clearance may also be required. Incarcerated persons who refuse to answer these questions shall be placed under observation until the screening can be completed, or until sufficient information is obtained to allow the staff to make appropriate decisions concerning housing and care. Staff should pay close attention to newly admitted arrestees in the Intake and Release Center as arrestees are at a high rate of suicide upon their initial booking into the jail.

Risk factors are characteristics or situations that could increase an individual's likelihood to attempt/complete suicide. Some risk factors include:

- Gender: Males are more likely to die by suicide than females.
- Sexual orientation and gender identity: 40% increase of suicide.
- Military service: 21% increase of suicide.
- Mental health disorders, particularly mood disorders (depression, bipolar disorder).
- Limited social support; bad news.
- Family or personal history of suicide.
- History or trauma; recent humiliation (sexual assault).
- First-time arrest or conviction for a violent offense. Separation/Single-Cell Housing.
- Lengthy sentence.

Warning signs are "red flag" behaviors that alert correctional staff that an individual may be at risk for attempting/completing suicide. Some warning signs include;

- Making statements or threats to harm/kill themselves.
- Talking, writing, or drawing about wanting to die.
- Looking to secure means to complete suicide.
- Displaying dramatic mood changes.
- Sleeping all the time or unable to sleep.
- Expressing uncontrolled anger or aggression.
- Withdrawing from family, friends, activities.



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- Giving away possessions.
- Engaging in behavior that requires isolation or segregated housing.

Stressors are feelings or situations unique to being in a correctional environment that could heighten an individual's likelihood to attempt/complete suicide. Some stressors include:

- Guilt or shame over incarceration.
- Loss of family/friends.
- Loss of personal choice, privacy, and control over their lives.
- Fear for personal safety.
- Problems with other inmates or staff.

Monitoring is probably the most important role of staff in suicide prevention and response. This involves monitoring arrestees/incarcerated persons in the general population to identify stressors and warning signs, as well as observing those placed on suicide precautions. Precautions could include special considerations related to:

- Housing assignments.
- Observation intervals.
- Clothing, bedding, and hygiene products.
- Privileges.

Staff members shall promptly refer any incarcerated person who is at risk for suicide to the On-Duty Sergeant. Classification, health services and mental health services should also be notified. The incarcerated person shall remain under direct and constant observation in a safe setting until Healthcare staff and the On-Duty Sergeant makes appropriate health care and housing decisions (15 CCR 1030).

Special situations may arise where a screening and intervention is appropriate for an incarcerated person when the person is placed in restrictive housing, following a hearing, and after a transfer or change in classification (15 CCR 1030).

#### **743.5 SUICIDE WATCH**

Incarcerated persons should only be housed on suicide watch in a safety cell with the approval of a qualified mental health care professional or the Correctional Sergeant, (refer to Policy 536/ Safety and Sobering Cells). If a qualified health care professional is not present, the Correctional Sergeant may make the decision to place an incarcerated person on suicide watch in a safety cell but should notify a qualified health care professional as soon as practicable. Incarcerated persons placed on suicide watch shall be closely monitored and housed in a safety cell which has been designed to be suicide resistant. Prior to housing the incarcerated person, the staff should carefully inspect the cell for objects that may pose a threat to the incarcerated person's safety. The incarcerated person will be provided either a safety cell non-tear gown or blanket. Articulate facts

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must be documented on the Special Observation Log by the On-Duty Sergeant if the incarcerated person is not given a non-tear gown or blanket.

Qualified health care professionals are primarily responsible for the treatment of incarcerated persons on suicide watch. Correctional Staff are responsible for the physical safety of incarcerated persons. All staff members should coordinate their efforts to ensure that incarcerated persons do not have the means or the opportunity to injure themselves. During meals, staff shall wear protective gloves and provide incarcerated persons a safety burrito and make a notation on a Special Observation Log as to how much the incarcerated person ate. The incarcerated person should also be offered water every 2 hours; this shall be documented on the Special Observation Log. No items shall be left in the safety cell as it could pose a choking hazard to the incarcerated person.

A Special Observation Log shall be maintained for each incarcerated person on suicide watch. Staff members shall make a direct visual observation of the incarcerated person twice every 30 minutes at no less than 15-minute intervals. In many cases, incarcerated persons are placed in the safety cell because they are on suicide watch and as such, when staff are completing direct visual observation checks, they shall ensure the incarcerated person is breathing; this may require arousing the incarcerated person during each check. A Correctional Sergeant and a qualified health care professional,, must observe the incarcerated person at least once every four hours to assess continued retention in the safety cell. Each staff member who is required to observe the incarcerated person shall make notations in the Special Observation Log documenting the time of observation and a brief description of the incarcerated person's behavior.

An incarcerated person classified as actively suicidal must be continuously monitored by direct visual observation; the On-Duty Correctional Sergeant must be immediately notified as well as qualified healthcare staff. The determination will then be made to either transfer the incarcerated persons to the hospital or Psychiatric Health Facility While monitoring may be supplemented by video monitoring, it may never be a substitute for direct visual monitoring. Continuous direct visual observation will continue until a qualified mental health professional determines the patient is no longer actively suicidal.

The status of suicidal incarcerated persons should be readily identifiable in a manner discernible by staff. The incarcerated person shall be supplied with a non-tear gown or blanket that is designed to promote incarcerated person safety and not cause unnecessary humiliation and degradation. Use of the non-tear security garment shall be documented in the incarcerated person's health record and on the Special Observation Log. Suicidal incarcerated persons shall not be permitted to retain undergarments or any other item that can be fashioned into an implement for hanging (e.g., plastic bags, shoelaces or sheets). Incarcerated persons shall not be permitted to keep personal property while housed on suicide watch and shall not be permitted to possess razors or other sharp objects, such as pencils, items with staples or any other item that may be used to cause a self-inflicted injury. Physical restraints should only be used as a last resort measure in compliance with Policy 523/Use of Restraints . The decision to use or discontinue use of restraints should be made in consultation with qualified health care professionals.

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A Special Observation Log shall be maintained on incarcerated persons who are not actively suicidal but who have expressed suicidal thoughts or have a recent history of self-injurious behavior and are housed in the safety cell, shall be observed by staff at irregular intervals, twice every 30 minutes at no less than 15-minute intervals.

#### **743.5.1 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 incarcerated person to injure themselves, and should consider establishing and maintaining a non-threatening conversation with the incarcerated person while awaiting assistance. If a qualified health care professional is not immediately available, the incarcerated person should be placed in an appropriate and safe location until such time as qualified health care professionals are 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. If the suicide attempt requires the incarcerated person to be transported to the hospital, the On-Duty Correctional Sergeant should notify the Watch Commander, request a case number and patrol deputy to respond to the jail to investigate the incident.

#### **743.5.2 NOTIFICATION**

In the event of an attempted or completed suicide, the Facility Manager should be promptly notified. The Facility Manager should notify the Sheriff and Chief Medical Officer.

The location where a suicide or attempted suicide has occurred should be treated as a crime scene after the incarcerated person has been removed from the cell or after emergency medical care is rendered. The area should be secured and access-controlled to preserve evidence until the appropriate investigation can be completed.

All suicides or attempted suicides shall be documented in an incident report. Any injury must be documented in an incarcerated person injury report (15 CCR 1030).

All in-custody deaths, including those resulting from suicide, should be investigated and documented in accordance with the Reporting In-Custody Deaths Policy (15 CCR 1030).

#### **743.6 FOLLOW-UP**

Qualified health and mental health care professionals should evaluate any incarcerated person placed in suicide watch within 4 hours of placement or at the next available physician's visit, whichever is earliest. After evaluation, qualified mental health care professionals should make a recommendation whether to keep the incarcerated person on suicide watch. Only a qualified mental health care professional may remove an incarcerated person from suicide watch; however, if an incarcerated person is injuring themselves in the safety cell, the On-Duty Sergeant may make the determination to remove the incarcerated person for placement in restraints, per Policy

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523/Use of Restraints, or have the incarcerated person transported to the hospital for medical evaluation or the Psychiatric Health Facility for evaluation. Healthcare staff will be notified of the removal and present to assist with the incarcerated person.

All changes in incarcerated person status should be reported to the qualified health and mental health care professional to ensure the incarcerated person receives appropriate care. The incarcerated person's health record should be updated to reflect all contacts, treatment and any other relevant information, and the records maintained in accordance with established records retention schedules.

Although the goal of this program is to significantly reduce the risk of in-custody deaths, the ongoing care of suicidal incarcerated persons after release must also be considered. Incarcerated persons who are at risk for suicide should work with local or area mental health resources and incarcerated person families after release.

#### **743.6.1 DEBRIEFING**

Any suicide attempt or death of an incarcerated person or on-site staff member requires a staff debriefing. Information will be communicated to the oncoming Correctional Sergeant and staff to apprise them of the incident and the actions taken with regard to the incident. Such debriefing will be noted in the Correctional Sergeants' Log. Following a suicide attempt requiring hospital transport, a Suicide Prevention Debriefing shall be completed within 14 business days. A *Completed Suicide or Suicide Attempt Review* form shall be completed and retained in Custody Administration. The review team should consist of the Captain, Operations Lieutenant, Support Services Lieutenant, Classification Sergeant, Compliance Officer, Training Coordinator, Chief Medical Officer, Health Services Administrator and Mental Health Supervisor or their designees. During the debriefing areas of concern will be discussed and corrective action taken if applicable. Following a completed suicide, a *Completed Suicide or Suicide Attempt Review* form shall be completed at the In-Custody Death Review within 30 days.

#### **743.7 TRANSPORTATION**

Incarcerated persons at risk for suicide pose additional challenges during transport and while being held in court holding facilities. The transportation staff should take reasonable steps to closely monitor at-risk incarcerated persons whenever they are transported or held in any cell that is not designated as a suicide-watch cell. All additional security and monitoring measures implemented by the staff should be documented either in the incarcerated person's Classification file or on a Special Observation Log.. 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

### 745.1 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.

#### 745.1.1 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.

### 745.2 POLICY

It is the policy of this office that all in-custody deaths are reviewed to determine the appropriateness of the clinical care provided, to determine whether existing policies are appropriate or if revision is necessary and to identify any other issues associated with the circumstances of the death. A postmortem examination should be performed according to the laws of the jurisdiction if the cause of death is unknown, if the death occurred under suspicious circumstances or if the inmate was not under current medical care (15 CCR 1046(a)).

### 745.3 NOTIFICATIONS

In the event of an in-custody death, all authorities with jurisdiction, including the Forensic Pathologist the authorized designee shall immediately be notified by the Watch Commander or the authorized designee at the time of death.

The Chief Medical Officer should also be notified and should coordinate with the Facility Manager, who will be responsible for notifying his/her chain of command regarding all medical issues surrounding the in-custody death.

Information regarding the individual designated by the deceased inmate for notification should be provided to the Coroner or the authorized designee, who is charged with the responsibility of making such notifications.

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##### **745.4 DOCUMENTATION**

The qualified health care professional on-duty at the time of the in-custody death shall ensure that all witnessed facts concerning the death are documented on the inmate's health record. Written documentation should include, but is not limited to, the time of death, the preceding circumstances surrounding the death, nature of the death, treatment rendered and who was notified of the death and by whom.

The Chief Medical Officer should initiate a death report and document it in accordance with the Continuous Quality Improvement Policy.

##### **745.5 CLOSING THE MEDICAL RECORD**

The Chief Medical Officer should review the inmate's health record to ensure appropriate entries have been made, and within 24 hours of the death have the original and a complete copy of the medical record made and delivered as follows (see the Reporting Inmate Deaths Policy):

- (a) Seal the original in an envelope and retain in the custody of the Responsible Physician.
- (b) Send the copy to the facility for inclusion into the inmate file and retain in accordance with established records retention schedules.

##### **745.6 DEATH BY SUICIDE**

In the event of a suspected inmate suicide, the qualified health care professional shall make a report within 24 hours to the Chief Medical Officer containing:

- (a) The inmate's known mental health history.
- (b) The most recent known mental health treatment.
- (c) All known circumstances surrounding the suicide.

A psychological autopsy should be conducted by a qualified mental health care professional if the cause of death is determined to be a suicide.

The initial CMR should be conducted by the Responsible Physician and, if available, a mental health care professional. The CMR should be finalized within 30 days by the Chief Medical Officer. The findings should be shared with the treating staff.

##### **745.7 DEATH REVIEW**

All death reviews should be started in accordance with Policy Section 532.5. The review shall consist of an administrative review, a CMR and a psychological autopsy if the death was by suicide.

Treating staff shall be informed of the CMR and the administrative review findings at the quarterly continuous quality improvement meeting.

Corrective actions identified through the CMR should be implemented and monitored in accordance with the Continuous Quality Improvement Policy for systemic issues and the Inmate Safety Policy for staff-related issues.

## Nursing Assessment Protocols

### 747.1 PURPOSE AND SCOPE

The purpose of this policy is to establish standards for evaluating and treating inmates with medical issues that are easily and effectively treated or triaged by nursing personnel who have been properly trained in the use of nursing assessment protocols.

#### 747.1.1 DEFINITIONS

Definitions related to this policy include:

**Nursing assessment protocols** - Written instructions or standardized nursing procedures that specify the steps to be taken in evaluating an inmate's health status and providing medical treatment. Protocols or standardized nursing procedures may include first-aid procedures for the identification and care of ailments that ordinarily would be treated with over-the-counter (OTC) medication or through self-care. These standardized nursing procedures also may address more serious symptoms, such as chest pain, shortness of breath or intoxication. The protocols provide a sequence of steps to evaluate and stabilize an inmate until a qualified health care professional is contacted and orders for further care are received.

### 747.2 POLICY

It is the policy of this office that medical care performed by personnel other than a physician shall be performed pursuant to a written protocol or standardized nursing procedure of the Responsible Health Authority.

### 747.3 PROTOCOL DEVELOPMENT AND AUTHORIZATION

The facility's Responsible Health Authority or the authorized designee shall develop, review and authorize all nursing protocols and standardized nursing procedures used for the treatment of inmates, and shall develop, deliver or procure appropriate training for the nurses on their use. Each nursing assessment protocol or standardized nursing procedure will have a signed declaration indicating it has been reviewed and approved by the nursing administrator and the Responsible Health Authority.

The standardized nursing procedure developed shall be appropriate for the training and experience of the health care services staff members who will deliver the services. Each standardized nursing procedure shall comply with the standards of practice for the level of care the health care services staff members are authorized to provide.

The Responsible Health Authority shall review the nursing assessment annually, revising as necessary and dating and signing approved protocols (15 CCR 1204).

### 747.4 TRAINING

Nurses will be trained and approved in the nursing assessment protocols and standardized nursing procedures prior to their use. The training shall be documented and should include:

- (a) Evidence that new nurses have been trained.

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- (b) Demonstration of knowledge and skills.
- (c) Evidence of annual review of skills.
- (d) Evidence of retraining when protocols are introduced or revised.

#### **747.5 AUTHORIZED USE OF PROTOCOLS AND STANDARDIZED NURSING PROCEDURES**

Nursing staff may use a nursing assessment protocol and standardized nursing procedure only after they have been trained and authorized by the Responsible Health Authority. Nursing assessment protocols and standardized nursing procedure shall only be used after a nurse fully evaluates the inmate's complaint and the inmate's condition meets the appropriate criteria.

Inmates may only be treated using a nursing protocol and standardized nursing procedure for the same condition on two consecutive visits. If the inmate requests service for the same condition a third time, the inmate should be referred to a physician's assistant, nurse practitioner, registered nurse or physician.

A registered nurse (RN) is considered the minimum certification level required to independently initiate medical treatment. The RN must be present to physically assess the inmate; an assessment cannot be done via telephone or electronically.

Licensed Vocational Nurses (LVNs) or Mental Health Therapists (MHTs) are generally prohibited from independently initiating any standardized protocol or standardized nursing procedure. Under very specific circumstances (e.g., early detoxification, a history of a seizure disorder), it may be acceptable for an LVN or MHT to initiate care following a telephone consultation with a physician, physician's assistant, psychiatrist, dentist or other person who meets the minimum certification level to initiate such orders. Under these circumstances, it is essential that the inmate be personally evaluated within 24 hours by a physician's assistant, nurse practitioner, registered nurse or Health Services Administrator, or Responsible Health Authority.



## Infirmary Care

### 754.1 PURPOSE AND SCOPE

This policy recognizes that some inmates will need care for an illness or diagnosis that requires daily monitoring, daily medication and/or therapy, or assistance with daily activities at a level that requires skilled nursing intervention. Such inmates are best served in an area expressly designed and operated for providing medical care in close proximity to qualified health care professionals.

#### 754.1.1 DEFINITIONS

Definitions related to this policy include:

**Infirmary** - An area specifically designed and operated for providing medical care to inmates who need skilled nursing care for a period of 24 hours or more. It is expressly intended for inmates who do not need hospitalization or placement in a licensed nursing facility, but whose care cannot be managed safely in an outpatient setting. It is not the area itself but the scope of care provided that makes the bed an infirmary bed.

**Infirmary care** - Care provided to patients with an illness or diagnosis that requires daily monitoring, medication and/or therapy, or assistance with daily activities at a level requiring skilled nursing intervention.

**Within sight or sound of a qualified health care professional** - The patient can gain the professional's attention through visual or auditory signals.

### 754.2 POLICY

It is the policy of this office that infirmary care is provided when appropriate to meet the serious medical needs of inmates. The Responsible Physician shall be responsible for developing and maintaining an infirmary manual, that shall be available in the infirmary. The infirmary manual shall include, but is not limited to:

- Nursing care procedures.
- A definition of the scope of infirmary care services available.
- Provisions for a physician to be on-call or available 24 hours a day.
- Guidelines regarding the availability of health care personnel, who shall be on-duty 24 hours a day when inmates are present and shall have access to a physician or registered nurse.
- Provisions ensuring that all inmates are within sight or sound of a staff member.
- Provisions for an infirmary record that is separate from the complete medical record of the inmate.
- Requirements for compliance with applicable state statutes and local licensing.

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Admission to and discharge from the infirmary shall be controlled by medical orders or protocols issued by a qualified health care professional after a clinical evaluation and the establishment of a treatment plan.

#### **754.3 DOCUMENTATION REQUIREMENTS FOR INFIRMARY PATIENTS**

A complete inpatient health record shall be kept for each inmate housed in the infirmary and should include:

- The admitting order that includes the admitting diagnosis, medications, diet, activity restrictions, diagnostic tests required and frequency of vital sign monitoring and other follow-up.
- Complete documentation of the care and treatment given.
- The medication administration record.
- A discharge plan and discharge notes.

#### **754.4 INFIRMARY REQUIREMENTS**

Inmates in the infirmary shall have access to operable washbasins with hot and cold running water at a minimum ratio of one basin for every 12 inmates, unless state or local building or health codes specify differently. Sufficient bathing facilities shall be provided in the infirmary to allow inmates to bathe daily. At least one bathing facility shall be configured and equipped to accommodate inmates who have physical impairments or who need assistance to bathe. Water for bathing is thermostatically controlled to temperatures ranging from 100 to 120 degrees.

Inmates in the infirmary shall have access to toilets and hand-washing facilities 24 hours a day and can use the toilet without staff assistance. Toilets are provided at a minimum ratio of one for every 12 inmates in the male infirmary and one for every eight inmates in the female infirmary. Urinals may be substituted for up to one-half of the toilets in the male infirmary. All housing units with three or more inmates shall have a minimum of two toilets.

## Medical Equipment and Supply Control

### 750.1 PURPOSE AND SCOPE

This policy outlines the control and inventory process to be utilized in accounting for all medical equipment and supplies. Medical equipment and supplies can pose a hazard for both the inmate population and the staff. Unauthorized possession of medical equipment and supplies constitutes possession of contraband. Unauthorized use of medical equipment and supplies violates inmate rules detailed in the inmate handbook. Since it is necessary to have a well-stocked medical space within the secure perimeter of the facility, there must be a plan to ensure that equipment and medical supplies are accounted for and tightly controlled.

### 750.2 POLICY

It is the policy of this office that all medical equipment, including sharps, dental instruments, needles and other items must be tightly controlled so they cannot be used as weapons or to facilitate the injection of drugs or other substances. Additionally, these tools and supplies must be controlled to prevent exposure to biohazards.

### 750.3 STAFF RESPONSIBILITIES

It is the responsibility of their designee to ensure that the inmate handbook clearly defines the unauthorized possession and/or use of medical equipment and supplies as a rule violation that may result in discipline.

The Responsible Health Authority or the authorized designee shall create and maintain an inventory log for all medical equipment and supplies. This log will be utilized by medical personnel who work within the facility to track and control medical equipment and supplies. When not in use, all medical equipment and supplies shall be stored in a secure manner to prevent unauthorized access.

At the beginning of each shift, the qualified health care professional shall inventory the medical supplies and equipment within their control. Any time a disposable item is used, the log shall reflect its use and disposal. At the end of each shift, the qualified health care professional will conduct another inventory using the supply and equipment log, and reconcile any disposable supplies used during their shift.

If there is a discrepancy that indicates that medical supplies or equipment are missing, the Shift Commander shall be immediately notified. The Shift Commander shall initiate a search for the missing supplies and/or equipment. The Shift Commander shall document the incident and any actions taken and provide the Facility Manager with a complete report.

## Continuation of Care

### 752.1 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.

### 752.2 POLICY

It is the policy of this office that all incarcerated persons shall have access to the continuation of care for a health issue, provided the treatment plan meets community standards. The incarcerated person's health care needs will be assessed by qualified health care professionals and continued as determined or referred after release (15 CCR 1206.5(a); 15 CCR 1210).

### 752.3 CONTINUATION OF CARE

The Facility Manager is responsible for coordinating with the Responsible Health Authority 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 Health Authority or their authorized designee, who is a licensed prescriber.
- (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.
  - 4. Custody staff is informed of the treatment plan when necessary to ensure coordination and cooperation in the ongoing care of the incarcerated person.

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- (e) Reasonable effort should be made to obtain information and records relating to previous health care professionals, with the consent of the incarcerated person, if the incarcerated person is currently under medical care.
- (f) Upon transfer to another facility, a medical discharge summary of the incarcerated person's current condition, medications, and treatment plan will be forwarded in a sealed envelope (to maintain confidentiality) to the receiving facility.
- (g) Response to requests for health information from medical facilities and health care professionals, with the incarcerated person's written consent.
- (h) When incarcerated persons are sent out of the facility for emergency or specialty medical treatment, written information regarding the incarcerated person's reason for transfer, pertinent medical problems, and list of current medications should be sent with the incarcerated person and may be given to those providing care upon request. The name and telephone number of a contact person the medical facility can call should be included with the patient's health information. Upon the incarcerated person's return to the facility, treatment recommendations should be reviewed by the Responsible Physician or the authorized designee and appropriate plans should be made for continuing care in the facility based on the treating facility's diagnosis, recommended medications, and other treatment.
- (i) Upon release from the facility, incarcerated persons should be given written instructions for the continuation of care, including but not limited to:
  - 1. The name and contact information of health care facilities for follow-up appointments.
  - 2. Prescriptions and/or an adequate supply of medication for those with chronic medical or psychiatric conditions.

## Continuous Quality Improvement

### 754.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a Continuous Quality Improvement (CQI) process of health care review in an effort to identify improvement needs in policies, processes or staff actions, and to develop and implement better health care strategies to improve the processes and outcomes of the health care services delivered at this facility.

### 754.2 POLICY

It is the policy of this office that an internal review and CQI process for inmate health care delivery and outcomes is developed and maintained, measurable goals and objectives are established and reviewed annually, and that the process itself is periodically reviewed and updated as needed. The process should be supervised by the Responsible Health Authority and/or the Health Services Administrator. The data evaluated should result in more effective access to services, an improved quality of care and a better utilization of resources.

### 754.3 CQI TECHNIQUES AND MONITORING

The CQI process may be applied to any aspect of health care delivery and health service outcomes, including, but not limited to, monitoring and reviewing the following:

- Quality of the medical charts, by the Responsible Health Authority or the authorized designee
- Investigations of complaints and grievances
- Corrective action plans and plan outcomes
- Deaths in custody, suicide attempts, sentinel events, and incident and management of serious communicable disease outbreaks
- Plans for employee education and training, using investigation findings
- Records of internal review activities
- Quarterly reports to the Responsible Health Authority and Facility Manager
- Legal requirements for confidentiality of medical records
- Credentialing (assessing and confirming qualifications), privileging (authorization to provide services), and training of employees and the associated peer review processes
- Condition and effectiveness of the care environment
- Adequacy and quality of supplies and equipment
- Quality of care provided to individual patients
- Accuracy and efficiency of pharmacy services and medication administration
- Ease of access to care

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- Risk minimization tactics
- Data describing the types, quality and quantity of care provided
- Accreditation compliance

#### **754.4 CQI COMMITTEE MEETINGS**

The jail CQI committee should meet quarterly under the direction of both the committee chair and the Responsible Health Authority and/or the Health Services Administrator. The CQI meetings may be conducted at the same time as quarterly administrative meetings, but CQI minutes must be produced and maintained separately from any other minutes.

The CQI minutes are not subject to disclosure outside of the CQI program, including requests from local, regional and national entities. Other interested parties with a need to know are only entitled to the disclosure of information that includes:

- (a) Problems that may have been identified.
- (b) Solutions that have been agreed upon.
- (c) Persons responsible for implementing the corrective action.
- (d) The time frame for implementing the corrective actions.

# Informed Consent and Right to Refuse Medical Care

## 756.1 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.

### 756.1.1 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.

## 756.2 POLICY

It is the policy of this office that generally, all health care examinations, treatments and procedures shall be conducted with the informed consent of the inmate. Exceptions include emergencies, life-threatening conditions and a court order (15 CCR 1214).

## 756.3 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.

## 756.4 REFUSAL OF TREATMENT

When an inmate refuses medical, mental health or dental treatment or medication, he/she shall be counseled regarding the necessity of the treatment/medication and the consequences of



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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 Health Authority or their designee.

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.

#### 756.4.1 STERILIZATION

This office shall not perform any sterilization procedure on an inmate, without the inmate's consent, unless the procedure is necessary to save the inmate's life. A sterilization procedure may be performed with the inmate's consent under the following conditions (Penal Code § 3440(b)):

- (a) Less invasive measures are not available, have been refused by the inmate or have been deemed unsuccessful.
- (b) A second physician, approved to provide medical services for the facility, but not employed by the county, confirms the need for the procedure.
- (c) The inmate has been advised of the impact and side effects of the procedure, and that refusal will not affect his/her ability to receive future medical treatment.

If a sterilization procedure is performed, this office shall provide psychological consultation before and after the procedure, as well as the appropriate medical follow-up (Penal Code § 3440(c)).

The Records Manager shall also submit data annually to the Board of State and Community Corrections regarding the race, age, medical justification and method of sterilization for any sterilization procedure performed (Penal Code § 3440(d)).

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#### **756.4.2 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 Health Authority 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.

#### **756.5 RECORDS**

The Facility Manager or the authorized designee shall work with the Responsible Health Authority or authorized designee 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

### 758.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a uniform manner of maintaining the active health records of incarcerated persons for easy accessibility during clinical treatment, and the storage methods for inactive health records. This policy also addresses practices that will ensure the confidentiality of health record information by separating it from custody records.

#### 758.1.1 DEFINITIONS

Definitions related to this policy include:

**Protected health information** - Information that relates to the incarcerated person's past, present, or future physical or mental health or condition, the provision of medical care to the incarcerated person, or the past, present, or future payment for the provision of health care to the incarcerated person (45 CFR 160.103).

### 758.2 POLICY

It is the policy of this office to maintain the confidentiality of incarcerated persons' protected health information. Incarcerated person health records will be maintained separately from custody records and under secure conditions, in compliance with all local, state, and federal requirements.

The Responsible Physician or the authorized designee will establish standardized facility procedures for recording information in the file and for the control and access to incarcerated person health records. Incarcerated person workers shall not have any access to incarcerated person health records.

### 758.3 INITIATING A HEALTH RECORD

Following the initial medical screening process, the qualified health care professional shall initiate a health record for each incarcerated person. The Responsible Physician shall be responsible for developing and implementing procedures for standardized record formatting (15 CCR 1205 et seq.).

### 758.4 CONFIDENTIALITY OF AN INCARCERATED PERSON'S HEALTH RECORDS

Information regarding an incarcerated person's health status is confidential. Active health records shall be maintained separately from custody records. Access to an incarcerated person's health record shall be in accordance with state and federal law (Health Insurance Portability and Accountability Act (HIPAA) of 1996, Public Law 104-191 and the implementing regulations) (15 CCR 1205).

The incarcerated person's protected health information may be disclosed, with the incarcerated person's written authorization, to any person so designated. A fully completed authorization for release and/or a disclosure of protected health information form shall be required prior to disclosure based upon informed consent (15 CCR 1205).

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The incarcerated person's protected health information may be disclosed by the qualified health care professional without the incarcerated person's authorization under certain circumstances and when approved by the Responsible Physician or the authorized designee. Those circumstances include:

- (a) To known qualified health care professionals who are members of the health care team responsible for the incarcerated person's care.
- (b) To custody staff regarding incarcerated persons as reasonably necessary to protect the safety, security, and good order of the facility. Examples may include information that the incarcerated person may be:
  - 1. Suicidal.
  - 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 incarcerated person is part of a communicable disease investigation.
- (d) Pursuant to a court order or valid subpoena duces tecum, accompanied by satisfactory assurance that the incarcerated person has been given notice and an opportunity to file an objection or efforts have been made to secure a protective order as required under HIPAA (45 CFR 164.512).
- (e) To a law enforcement officer for purposes of a criminal investigation, to avert a serious threat to the health or safety of any person or to fulfill mandatory reporting requirements.
- (f) To a law enforcement officer when the incarcerated person has died as a result of criminal conduct.

The incarcerated person's limited protected health information may also be disclosed to a law enforcement officer for purposes of identifying or locating a suspect or when the incarcerated person is a victim of a crime. When reasonably possible, the approval of the Facility Manager should be obtained prior to disclosure.

Attorneys requesting health record information regarding an incarcerated person shall be advised that an authorization for release and/or a disclosure of medical information form or an attorney release form signed by the inmate is required.

Family members may be informed of the incarcerated person's custody status and whether the incarcerated person is receiving medical care. Family members requesting additional information must provide a proper authorization for release and/or a disclosure of medical information form.

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The Facility Manager, in consultation with the Responsible Physician, shall designate personnel who will be responsible for reviewing all requests for access to medical records and who will propose related policies and procedures and other activities designed to facilitate proper documentation of health care and access to records.

#### **758.4.1 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).

#### **758.5 HEALTH RECORD CONTENTS**

- (a) To standardize record keeping and to identify responsibilities, the following should apply to incarcerated person health records (15 CCR 1205):
  - 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 incarcerated person from any offsite visit and filed in the incarcerated person's medical record.
- (b) Incarcerated persons' health records shall minimally contain but are not limited to:
  - 1. Identifying information (e.g., incarcerated person name, identification number, date of birth, gender) on each sheet in the file.
  - 2. Completed incarcerated person medical/mental health screening forms and evaluation reports.
  - 3. Health appraisal information and data forms.
  - 4. Complaints of illness or injury.
  - 5. A problem summary, containing medical and mental health diagnoses and treatments as well as known allergies.
  - 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.
  - 9. X-ray and laboratory reports and diagnostic studies.

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10. A record of the date, time, and place of each clinical encounter with incarcerated persons.
11. Health service reports.
12. Individualized treatment plans when available or required.
13. Consent and refusal forms.
14. Release of information authorization forms (including HIPAA forms).
15. Results of specialty consultations and off-site referrals.
16. Special needs treatment plans, if applicable.
17. Names of personnel who treat, prescribe, and/or administer/deliver prescription medication.

#### **758.6 ACTIVE INCARCERATED PERSONS HEALTH RECORDS**

Active incarcerated person health records will be accessible to qualified health care professionals as necessary for the provision of medical treatment and other uses allowed by law, or the Facility Manager or the authorized designee under exigent circumstances, to protect the safety, security, and good order of the facility.

All entries in the incarcerated person's health record will have the place, date, time, signature and title of each individual providing care and should be legible.

Documentation in the incarcerated person's health record is done in the subjective, objective, assessment, and plan (SOAP) format. An incarcerated person's health record is initiated at the first health encounter following the initial medical screening.

If an incarcerated person has been previously incarcerated, the previous health record should be reactivated. If a new record has been initiated and a previous record exists, medical records personnel should merge the two records in order to compile a complete history, unless mandated statutory retention schedules have provided for the destruction of one file and there is a need to create a new file.

New information shall be entered on the health record at the completion of each encounter.

All the incarcerated person's health records shall be returned to the file prior to the end of each watch.

#### **758.7 INACTIVE MEDICAL RECORDS**

When an incarcerated person is released from custody, medical records personnel should remove the incarcerated person'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 incarcerated person health records, in accordance with established records retention schedules but no less

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than 10 years 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 incarcerated person.

#### **758.8 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.

#### **758.9 HIPAA COMPLIANCE**

The Facility Manager, 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**

### **760.1 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.

### **760.2 POLICY**

It is the policy of this office that effective communication shall occur between the Facility Manager and the treating qualified health care professionals regarding any significant health issues of an inmate. All health issues should be considered during classification and housing decisions in order to preserve the health and safety of the occupants of this facility.

When a qualified health care professional recognizes that an inmate will require accommodation due to a medical or mental health condition, custody personnel shall be promptly notified in writing.

The Facility Manager or their designee 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 Facility Manager should review the documents annually for any necessary revisions or updates in support of continuous improvement in the delivery of health care services.

### **760.3 MANAGING SPECIAL NEEDS INMATES**

Upon an inmate's arrival at the facility, the qualified health care professional, in conjunction with the custody staff, should determine if the inmate has any special needs.

- (a) If staff determines that an inmate has special needs, a communication form or other appropriate documentation relating to special needs should be completed and sent to classification personnel, the Shift Commander and the Compliance Officer. 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 Health Authority or a qualified health care professional at least once every 90 days to evaluate his/her continued designation as a special needs inmate.
- (d) Inmates who have been determined by qualified health care professionals to require a special needs classification should be seen at least once monthly by a qualified health care professional.
- (e) Prior to transfer to another facility, a medical transfer summary should be completed detailing any special requirements that should be considered while the inmate is



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in transit and upon his/her arrival at the destination. Discharge planning should be included, as appropriate.

- (f) A treatment plan should be developed for each inmate and should include, at a minimum:
  - 1. The frequency of follow-up for medical evaluation and anticipated adjustments of the treatment modality.
  - 2. The type and frequency of diagnostic testing and therapeutic regimens.
  - 3. When appropriate, instructions about diet, exercise, adaptation to the correctional environment and using prescribed medications.
- (g) When clinically indicated, the qualified health care professionals and the custody personnel should consult regarding the condition and capabilities of inmates with known medical and/or psychiatric illnesses or developmental disabilities prior to any of the following:
  - 1. Housing assignment
  - 2. Program or job assignment
  - 3. Admissions to, and transfers from or between institutions
  - 4. Disciplinary measures for mentally ill patients
- (h) Qualified health care professionals and custody personnel should communicate about inmates who require special accommodation. These include, but are not limited to, inmates who are:
  - 1. Chronically ill
  - 2. Undergoing dialysis
  - 3. In an adult facility, as an adolescent
  - 4. Infected with a communicable disease
  - 5. Physically disabled
  - 6. Pregnant
  - 7. Frail or elderly
  - 8. Terminally ill
  - 9. Mentally ill or suicidal
  - 10. Developmentally disabled

#### **760.4 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.

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#### **760.5 NOTIFICATION TO THE SHERIFF FOR MEDICAL RELEASE**

Supervisors, through the chain of command, should advise the Sheriff when a terminally ill inmate may be appropriate for early release or medical probation under Government Code § 26605.6 because the inmate would not reasonably pose a threat to public safety and the inmate has a life expectancy of six months or less, or the inmate requires 24-hour care or acute long-term inpatient rehabilitation services.

## Forensic Evidence

### 762.1 PURPOSE AND SCOPE

The purpose of this policy is to maintain credibility between the inmates and the facility's qualified health care professionals by establishing clear guidelines restricting facility health care professionals from participating in the collection of forensic evidence for disciplinary or legal proceedings.

#### 762.1.1 DEFINITION

Definitions related to this policy include:

**Forensic evidence** - Physical or psychological data collected from an inmate that may be used against the inmate in disciplinary or legal proceedings.

### 762.2 POLICY

Qualified health care professionals of this facility are generally prohibited from participating in the collection of forensic evidence or performing psychological evaluations for disciplinary or legal proceedings.

Qualified health care professionals of this facility should not be involved in the collection of forensic evidence except when complying with state laws requiring the collection of blood samples from inmates, provided the inmate has consented to the procedure and staff are not involved in any punitive action against the inmate.

Qualified health care professionals of this facility may collect blood or urine for testing for alcohol or drugs when it is done for medical purposes and under a physician's order. Qualified health care professionals of this facility may conduct inmate-specific, court-ordered laboratory tests and examinations or radiology procedures with the consent of the inmate.

Qualified health care professionals of this facility are prohibited from being involved in the following procedures:

- (a) Body cavity searches
- (b) Psychological evaluations for use in adversarial proceedings
- (c) Blood draws for lab studies ordered by the court, without inmate consent
- (d) Any medical procedure, except emergency lifesaving measures, that does not have the inmate's written consent

It shall be the responsibility of the Sheriff or the authorized designee to arrange for appropriately trained professionals to collect forensic evidence for disciplinary or legal proceedings.

## Oral Care

### 764.1 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.

#### 764.1.1 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.

### 764.2 POLICY

It is the policy of this office that oral care is provided under the direction of a dentist licensed in this state and that care is timely and includes immediate access for urgent or painful conditions. There are established priorities for care when, in the dentist's judgment, the inmate's health would otherwise be adversely affected (15 CCR 1215).

### 764.3 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.

#### **764.4 DENTAL CARE OPTIONS**

Inmates should be offered a dental screening by a qualified health care professional or a dentist within 14 days of incarceration, unless such a screening was completed within the past six months. This dental screening should include an evaluation of the current dental status and instruction on oral hygiene and preventive oral education.

Inmates should be offered a dental examination, supported by diagnostic X-rays if necessary, by a dentist within 12 months of incarceration.

Inmates who are scheduled to be incarcerated for less than 12 months should have access to the treatment of dental pain, fillings, extractions of non-restorable teeth, cleaning and treatment of symptomatic areas and repair of partials and dentures.

## Pharmaceutical Operations

### 766.1 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.

#### 766.1.1 DEFINITIONS

Definitions related to this policy include:

**Administration** - The act of giving a single dose of a prescribed drug or biological substance to an incarcerated person. 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 incarcerated person, according to the written instructions, by any qualified health care professional.

**Dispensing** - Those acts of processing a drug for delivery or administration to an incarcerated person 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 incarcerated person drug therapy, and the provision of incarcerated person/patient drug information.

#### **766.2 POLICY**

It is the policy of this office that pharmaceutical operations meet all federal, state, and local legal requirements and be sufficient to meet the needs of the facility population (15 CCR 1216).

#### **766.3 PHARMACEUTICAL OPERATIONS**

- (a) The Responsible Physician, in conjunction with the pharmacist, shall establish a list of all prescription and non-prescription medications available for incarcerated person 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 professionals. An incorrect count shall be reported immediately to the Shift Commander. Medications shall be stored under proper conditions of security, separation, and environmental control at all storage locations. The site medical director, the Sheriff's Chief Medical Officer and a Correctional Lieutenant or Captain will be advised on the next business day if there remains a narcotic count discrepancy.
  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 incarcerated persons 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 incarcerated person shall be returned to the pharmacy for disposition.
  3. Returned, non-controlled substances that have been in the possession of the incarcerated person, 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.
- (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 incarcerated persons shall be stored in a locked room that meets similar requirements.



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- (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 Facility Manager.

#### **766.4 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 incarcerated persons may be permitted to possess and self-administer some medications when monitored and controlled, in accordance with this policy. These medications are often referred to as "keep on person meds" (KOP).
- (e) Apparent adverse drug reactions shall be recorded in the incarcerated person's health record by the qualified health care professional.
- (f) The qualified health care professional shall notify the Shift Commander of all known medication errors in a timely manner. Medication error reports shall be completed on all known medication errors.

#### **766.5 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 incarcerated persons on a per dose basis.

- (a) Each medication ordered on a per dose basis for individual incarcerated persons shall be kept in the medication room of the facility.
- (b) Medication dispensing envelopes bearing the incarcerated person's name, booking number, housing location, and the medication and its dosing schedule shall be generated for each incarcerated person receiving per dose medication. These shall be administered from the individually packaged supply and delivered to the patient at each scheduled medication time.

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- (c) The qualified health care professional or health-trained custody staff member will confirm the incarcerated person's identity prior to administering the medication by comparing the name/booking number on the dispensing envelope with the incarcerated person's identification badge/armband.
  - 1. Incarcerated persons 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 incarcerated person taking the medication to prevent "cheeking" or "palming."
  - 3. The qualified health care professional or health-trained custody staff member should inspect the incarcerated person's mouth after the incarcerated person swallows the medication to ensure it was completely ingested. If the incarcerated person appears to be "cheeking" the medication, a chart entry will be made and a notation entered on the medication envelope, as well as the Medication Administration Record (MAR) comments section. Custody staff shall be immediately notified of the suspected "cheeking" and shall follow-up with the appropriate security, corrective, and/or disciplinary action.
- (d) The qualified health care professional shall record each medication administered in the electronic MAR. Pre-charting is not allowed. In the event of a problem with the electronic MAR, a paper MAR may be utilized with appropriate documentation and scanned into the electronic health record.
  - 1. In the event that medication cannot be administered (for example, the incarcerated person is in court or the medication is not in stock), a note explaining the situation and planned action shall be made on the back of the MAR or on a progress note.
- (e) The qualified health care professional shall have incarcerated persons who refuse their medication sign a refusal form at the medication round. If the incarcerated person willfully refuses to sign the refusal form, the qualified health care professional or health-trained custody staff member shall advise custody staff, who should attempt to resolve the situation through voluntary compliance, by reminding the incarcerated person that a refusal to sign may lead to disciplinary action. The qualified health care professional shall also:
  - 1. Note the refusal on the medication log including the date and time.
  - 2. Review the medication logs for prior refusals.
  - 3. Document patterns of refused medications on the incarcerated person's medical record.
  - 4. Make a reasonable effort to convince the incarcerated person to voluntarily continue with the medication as prescribed.
  - 5. Report continued refusals to the Responsible Physician and have the incarcerated person complete and sign a medication refusal form.
- (f) No incarcerated person shall be deprived of prescribed medication as a means of punishment.

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##### **766.6 SELF-ADMINISTRATION OF MEDICATION (KEEP ON PERSON)**

Upon approval of the Responsible Physician or qualified health care professional, incarcerated persons 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 incarcerated person regarding potential side effects and the proper use of the medication (15 CCR 1216(d)).

- (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 incarcerated person may have concerning the person's medication should be addressed at this time.
- (c) The incarcerated person shall be instructed to carry medication at all times or to secure it in designated areas within the housing unit.
- (d) All self-administered medications are to be documented on the MAR.
- (e) Upon receipt of the medication, the qualified health care professional should issue the medication as follows:
  - 1. The qualified health care professional issuing the medication should confirm correct identity by comparing the name/booking number of the self-administer package to the incarcerated person's identification badge/armband.
  - 2. When issuing self-administered medication, documentation in the electronic MAR should include the number of pills issued and the individual who delivered the medication to the patient.
- (f) The continuous quality improvement coordinator or RHA designee should monitor incarcerated person compliance by randomly interviewing incarcerated persons about the name, purpose, dose, schedule, and possible side effects of their prescription medication and will inspect the incarcerated persons' self-administered medication and review their medical records. Any violation of the rules will be reported to the custody liaison.
- (g) Any self-administered medication may be changed to per-dose at the discretion of the medical staff if the incarcerated person 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 incarcerated persons complying with the conditions and rules for self-administered medication.
- (h) Incarcerated persons 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. A Medical Treatment Order will be generated by the Responsible Physician or qualified health care professional and provide it to Custody Staff.

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- (i) The Responsible Physician or qualified health care professional will be responsible for distributing the medication to the inmates after a Keep On Person agreement form has been signed by the inmate.
- (j) The inmate is responsible to notify the Responsible Physician or qualified health care professional, via medical request form, one (1) week before the medication runs out and needs to be refilled.

#### **766.7 NON-PRESCRIPTION MEDICATION**

Any over-the-counter non-prescription medication available to incarcerated persons for purchase in the facility commissary shall be approved by the Facility Manager and the Responsible Physician and reviewed annually (15 CCR 1216(c)).

The Facility Manager and the Responsible Physician should establish a limit on the amount of non-prescription medication an incarcerated person may purchase and have in the person's possession at any time. Incarcerated persons with medication in an amount above the proscribed limit may be subject to disciplinary sanctions.

#### **766.8 TRAINING**

Custody staff members shall be trained in assisting with medication distribution by qualified health care professionals.

## Release Planning

### 768.1 PURPOSE AND SCOPE

This office 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.

#### 768.1.1 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.

### 768.2 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 Facility Manager 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.
- (e) Family Planning Services with 60 days of release (Penal Code § 4023.5(a)).

### 768.3 PREPARATION FOR RELEASE

Upon notification of the imminent release of an inmate who has been identified as having serious medical or mental health needs, release planning shall include the following:

- (a) A medical screening shall be conducted to assess the inmate's immediate medical needs, and arrangements should be made for community follow-up where needed, including sufficient medication.
- (b) With the inmate's written consent, the qualified health care professional should:
  1. Share necessary information with health care services.
  2. Arrange for follow-up appointments.

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3. Arrange for the transfer of health summaries and relevant parts of the health record to community health care services or others who are assisting in planning for or providing services upon the inmate's release.
  - (c) Contact with community health care services shall be documented via an administrative note in the inmate's health record.
  - (d) Inmates with serious mental health issues, including those receiving psychotropic medication, shall be informed about community options for continuing treatment and provided with follow-up appointments, when reasonably possible.
  - (e) Medication will be provided as appropriate.

#### **768.4 RELEASE PLANNING RECORDS**

All records of community referrals, transfer forms, logs, documentation of release planning, lists of medication provided, records release authorization forms and any other relevant documents shall be maintained in the inmate's health file and retained in accordance with established records retention schedules.

## Privacy of Care

### 770.1 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.

#### 770.1.1 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.

### 770.2 POLICY

It is the policy of this office that, in order to instill confidence in the health care system by the inmate population, all discussions of health-related issues and clinical encounters, absent an emergency situation, will be conducted in a setting that respects the inmate's privacy and encourages the inmate's continued use of health care services.

### 770.3 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.

### 770.4 REPORTING INAPPROPRIATE ACCESS OF MEDICAL INFORMATION

The Facility Manager and Responsible Health Authority shall establish a process for staff, inmates or any other persons to report the improper access or use of medical records.

### 770.5 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 Coordinator 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 San Luis Obispo County Sheriff's Office has established a plan to promote and comply with the environmental safety and sanitation requirements established by applicable laws, ordinances and regulations. This policy establishes a plan of housekeeping tasks and inspections required to identify and correct unsanitary or unsafe conditions or work practices in this facility.

### 800.2 RESPONSIBILITIES

The Facility Manager 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 incarcerated 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 incarcerated persons 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 by contract with private firms or county maintenance.

Incarcerated persons engaged in sanitation duties shall do so only under the direct supervision of qualified custody staff. When incarcerated 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. Correctional Sergeants will conduct cleaning inspections during rounds. The Facility Manager or the authorized designee will conduct weekly safety and sanitation inspections of the facility.

### 800.3 WORK ORDERS

All reports of unsafe or unsanitary conditions, as well as repairs needed to the physical plant and equipment, shall be documented in a work order. The Facility Manager will designate a staff person to receive these work orders and take appropriate action to ensure the repairs are made or

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action is taken. All work and action taken will also be documented. Requests for budget resources above and beyond already budgeted maintenance items shall be reported to the Facility Manager or authorized designee.

#### **800.4 SAFETY DATA SHEETS**

Materials and substances used in the operation and maintenance of the facility may qualify as hazardous material. Hazardous material is required to have a companion Safety Data Sheet (SDS) that is provided by the manufacturer or distributor of the material. The SDS provides vital information on individual hazardous materials and substances, including instructions on safe handling, storage, disposal, prohibited interactions and other details relative to the specific material.

The Facility Manager 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 incarcerated persons 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 incarcerated persons 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 incarcerated persons shall sign the acknowledgement form kept with each SDS in their work area.
- (c) Staff and incarcerated persons 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. They 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 incarcerated persons shall be readily accessible and maintained in the same manner as an SDS (Labor Code § 6398.5; Health and Safety Code § 108952(f); Health and Safety Code § 108954.5(c)).

#### **800.5 POLICY**

It is the policy of the Office to maintain a safe and sanitary facility. To accomplish this goal, the Office will maintain a written plan that contains schedules and procedures for conducting weekly and monthly sanitation inspections of the facility.

## Hazardous Waste and Sewage Disposal

### 802.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a system for disposing of hazardous waste. The Office recognizes that the effectiveness of a disposal system depends not only on the written policies, procedures and precautions, but on adequate supervision and the responsible behavior of the staff and incarcerated persons. It is the responsibility of everyone in the facility to follow hazardous waste disposal instructions, utilizing prescribed precautions and using safety equipment properly.

#### 802.1.1 DEFINITION

Definitions related to this policy include:

**Hazardous waste** - Material that poses a threat or risk to public health or safety or is harmful to the environment (e.g., batteries, paints, solvents, engine oils and fluids, cleaning products).

### 802.2 POLICY

It is the policy of this office that any sewage and hazardous waste generated at the facility shall be handled, stored and disposed of safely and in accordance with all applicable federal and state regulations and in consultation with the local public health entity. The Facility Manager or the authorized designee shall be responsible for:

- Contracting with a hazardous waste disposal service.
- Developing and implementing a storage and disposal plan that has been reviewed and approved by a regulatory agency.
- Including hazardous waste issues on internal health and sanitation inspection checklists.
- Developing and implementing procedures for the safe handling and storage of hazardous materials until such time as the contractor removes the items from the facility.
- Ensuring the staff is trained in the proper identification of hazardous waste and the appropriate handling, storage and disposal of such items.

### 802.3 DISPOSAL PROCEDURE

#### 802.3.1 SEWAGE DISPOSAL

All sewage and liquid waste matter must be disposed of into a public system of sewerage or, if public sewerage is not available, into a private system of sewage disposal in accordance with the requirements of the local public health entity.

The institution's use of the private system must be discontinued and the private system must be properly abandoned when public sewerage becomes available.

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#### *Hazardous Waste and Sewage Disposal*

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##### **802.3.2 HAZARDOUS WASTE**

Hazardous waste generated in the facility shall be properly disposed of in designated containers and stored until removed by the contractor. Staff shall use universal standard precautions when in contact with hazardous materials, at a minimum, unless directed otherwise.

##### **802.4 SAFETY EQUIPMENT**

The Facility Manager or the authorized designee shall ensure that appropriate safety equipment is available. All supervisors shall be knowledgeable in how to access the safety equipment at all times. The county may coordinate with local fire departments or contracted vendors to obtain the necessary safety equipment.

##### **802.5 TRAINING**

The Training Coordinator shall be responsible for ensuring that all facility personnel receive appropriate training in the use of appropriate safety equipment and the identification, handling and disposal of hazardous waste. Training records shall be maintained, including the course roster, curriculum, instructor name and credentials, and testing instruments.

##### **802.6 SUPERVISOR RESPONSIBILITY**

Supervisors are responsible for monitoring any hazardous waste containment issue, ensuring that employees have the appropriate safety equipment, that any exposed persons receive immediate medical treatment, and that the appropriate measures are taken to lessen the exposure of others. Supervisors shall ensure that incident reports are completed and forwarded to the Facility Manager in the event of an exposure to staff, incarcerated persons or visitors.

## Housekeeping and Maintenance

### 804.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines to ensure that the facility is kept clean and in good repair in accordance with accepted federal, state and county standards.

### 804.2 POLICY

The Facility Manager 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 incarcerated persons to ensure proper implementation of the procedures and to ensure that no incarcerated person supervises or assigns work to another incarcerated person.
- Development and implementation of an overall sanitation plan (e.g., cleaning, maintenance, inspection, staff training, inmate supervision).
- Development of inspection forms.
- All incarcerated person responsibilities, which should be included in the handbook.
- A process to ensure that deficiencies identified during inspections are satisfactorily corrected and documented.
- Detailed processes for the procurement, storage and inventory of cleaning supplies and equipment.
- A process for the preventive maintenance of equipment and systems throughout the facility.
- Staff supervision of the provision and use of cleaning tools and supplies.

To the extent possible, cleaning and janitorial supplies shall be nontoxic to humans. Any poisonous, caustic or otherwise harmful substances used for cleaning shall be clearly labeled and kept in a locked storage area.

### 804.3 SANITATION SCHEDULE

A daily cleaning schedule will be established by each of the housing unit correctional deputies working on the night shift. Monthly cleaning schedules encompassing all areas of the facility shall be established by an appointed Correctional Sergeant. 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, warehouse, common areas). The following recommendations include, but are not limited to, specific areas and items:

- (a) Daily cleaning:
  1. Sweep and wet mop the jail floor
  2. Collect trash from cells and empty all trash receptacles

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3. Clean used mattresses (mattresses are to be cleaned prior to being issued to a new incarcerated person)
  4. Clean empty cells in housing units. Prior to incarcerated being housed in a cell the cell shall be cleaned and disinfected
  5. Incarcerated workers to clean Intake Release Center
  6. Clean all showers
  7. Clean all toilets and sinks
- (b) Weekly cleaning:
1. Cleaning supplies offered to incarcerated persons, weekly as scheduled
  2. Exercise Yards
  3. Jail Corridors
- (c) Periodic Cleaning
1. Dust bars and window ledges
  2. Clean air conditioning/heating grates
  3. Pour water down floor drains to test for flow
  4. Walls
  5. Ceilings
  6. Bunk pans

#### **804.4 INSPECTION CHECKS**

Correctional Sergeants should do cursory checks of facility cleanliness and maintenance issues on a daily basis. This can be accomplished during daily visits to housing units and may include interviews with staff or incarcerated persons on basic facility conditions.

## Physical Plant Compliance with Codes

### 806.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the timeline, process and responsibilities for facility maintenance, inspections and equipment testing in compliance with all applicable federal, state and local building codes.

### 806.2 POLICY

It is the policy of this office that all construction of the physical plant (renovations, additions, new construction) will be reviewed and inspected in compliance with all applicable federal, state and local building codes. All equipment and mechanical systems will be routinely inspected, tested and maintained in accordance with applicable laws and regulations.

### 806.3 COMPLIANCE WITH CODES AND STATUTES

Plumbing, sewage disposal, solid waste disposal and plant maintenance conditions will comply with rules and regulations imposed by state regulatory entities governing such practices.

### 806.4 RESPONSIBILITIES

The Facility Manager shall be responsible for establishing and monitoring the facility maintenance schedule, the inspection schedules of the Shift Commanders and correctional deputies, and ensuring that any deficiencies discovered are corrected in a timely manner.

Copies of the local jurisdiction's applicable health and sanitation codes shall be kept in the facility by the Facility Manager or the authorized designee. The Facility Manager or the authorized designee is responsible for developing internal health and sanitation inspection checklists, for maintaining valid licensing and sanitation certificates and inspection reports, and for proof of corrective actions.

### 806.5 PROCEDURE

All safety equipment (e.g., emergency lighting, generators, and an uninterruptible power source (UPS)) shall be tested at least quarterly. Power generators and UPS equipment should be inspected weekly and load-tested quarterly or according to the manufacturer's instructions. All completed inspection forms shall be kept on file for review by the appropriate office committees or external agencies.

Any remodeling or new construction shall have prior approval of the local fire, building and health authorities. Any required plans and permits will be procured prior to the commencement of any changes to the facility.

The following areas of the facility shall be inspected and evaluated for functionality, wear, and rodent or pest infestation. The list is not meant to be all inclusive:

- Intake
- Food services



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- Incarcerated person housing
- Laundry
- Loading dock/trash storage
- Water systems and plumbing
- Emergency generators
- Fire safety equipment
- The entire physical structure of the facility, including, roof, walls, exterior doors, mechanical systems and lighting

#### **806.6 PLUMBING - FLOOR DRAINS**

Floor drains must be flushed weekly and all traps must contain water to prevent the escape of sewer gas. Grids and grates must be present.

## Water Supply

### **808.1 PURPOSE AND SCOPE**

The San Luis Obispo County Sheriff's Office recognizes the importance of providing the facility with safe, potable water. The purpose of this policy is to establish guidelines for testing the facility's water to ensure that the water is safe to consume.

### **808.2 POLICY**

In compliance with standards set by law, this facility will ensure the continued supply of safe potable water for use by incarcerated persons, staff and visitors through rigorous annual testing of water supplies (42 USC § 300f et seq.).

### **808.3 PROCEDURE**

The Facility Manager shall ensure that the facility's potable water source is tested by an independent public or private testing service at least once each year. Water quality will be certified to be in compliance with all state and local regulations. Corrective measures shall be promptly taken if the test results fall below acceptable regulatory standards.

In the event that water testing reveals any significant hazards to the incarcerated persons or staff at the facility, the Sheriff, Facility Manager and the County Public Works Division shall take immediate action to mitigate the problem.

The testing results, valid certificates of the sampling entity and the testing laboratory shall be kept in accordance with established records retention schedules.

Where the facility's water supply is obtained from a private source, the source shall be properly located, constructed and operated to protect it from contamination and pollution and the water shall meet all current standards set by the applicable state and/or local authority regarding bacteriological, chemical and physical tests for purity.

For facilities not served by a public or regulated private water supply, the water should be tested daily by the County Public Works Division within the facility's jurisdiction.

### **808.4 EMERGENCY PLAN**

The Facility Manager and the County Public Works Division shall develop a plan for the supply of potable water for drinking and cooking in the event that a man-made or natural disaster interrupts the regular water supply. The plan shall address methods for providing clean potable water for a minimum of three days, and should have contingency plans for emergencies lasting longer than three days. The plan should also include contingencies for the use of non-potable water to flush toilets and remove effluent from the facility.

## Vermin and Pest Control

### 810.1 PURPOSE AND SCOPE

The purpose of this policy is to establish inspection, identification and eradication processes designed to keep vermin and pests controlled in accordance with the requirements established by all applicable laws, ordinances and regulations of the local public health entity.

### 810.2 POLICY

It is the policy of this office that vermin and pests be controlled within the facility (15 CCR 1280). The Facility Manager 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 incarcerated persons clothing, personal effects and living areas, with specific guidelines for treating an infested incarcerated person (15 CCR 1264).

### 810.3 PEST CONTROL SERVICES

The Facility Manager or the authorized designee shall be responsible for procuring the services of a licensed pest control professional to perform inspections of the facility at least quarterly or when there is evidence of an infestation and to treat areas as required to ensure that vermin and pests are controlled.

### 810.4 PREVENTION AND CONTROL

Many infestations and infections are the result of a recently admitted incarcerated person 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. Incarcerated persons with lice or mites should be treated with approved pediculicides as soon as the infestation is identified to avoid spreading it. To reduce the chance of further transmission, separate quarters for inmates undergoing treatment for lice should be used as described in the Communicable Diseases Policy.

Because the use of the treatment chemicals can cause allergic reactions and other negative effects, treatment should be done only when an infestation is identified and not as a matter of routine.

Clothing, bedding and other property that is suspected of being infested shall either be removed from the facility or cleaned and treated by the following methods, as appropriate or as directed by the pest control provider or the Responsible Physician (15 CCR 1264):

- Washing in water at 140 degrees for 20 minutes
- Tumbling in a clothes dryer at 140 degrees for 20 minutes
- Dry cleaning
- Storing in sealed plastic bags for 30 days
- Treating with an insecticide specifically labeled for this purpose

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Head lice and their eggs are generally found on the head hairs. There may be some uncertainty about the effectiveness of some available pediculicides to kill the eggs of head lice. Therefore, some products recommend a second treatment seven to 10 days after the first. During the interim, before the second application, eggs of head lice could hatch and there is a possibility that lice could be transmitted to others.

Pubic lice and their eggs are generally found on the hairs of the pubic area and adjacent hairy parts of the body, although they can occur on almost any hairy part of the body, including the hair under the arm and on the eyelashes.

Pubic lice and their eggs are generally successfully treated by the available pediculicides. However, when the eyelashes are infested with pubic lice and their eggs, a physician should perform the treatment.

Successful treatment depends on careful inspection of the incarcerated person and proper application of the appropriate product. The area used to delouse incarcerated persons needs to be separate from the rest of the facility. All of the surfaces in the treatment area must be sanitized. There must be a shower as part of the delousing area.

The supervisor shall document the date of treatment, the area treated, the pest treated and the treatment used.

#### **810.5 LABELING AND SECURE STORAGE OF COMPOUNDS**

Containers of pest exterminating compounds shall be conspicuously labeled for identification of contents. The containers shall be securely stored separately from food and kitchenware, and shall not be accessible by incarcerated persons.

## **Incarcerated Person Safety**

### **812.1 PURPOSE AND SCOPE**

The purpose of this policy is to establish a safety program to reduce incarcerated person injuries by analyzing causes of injuries and identifying and implementing corrective measures.

### **812.2 RESPONSIBILITIES**

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 (15 CCR 1280):

- A system to identify and evaluate hazards, including scheduled inspections to identify unsafe conditions.
- Analysis of incarcerated person injury reports to identify causes and recommend corrective actions.
- Establishment of methods and procedures to correct unsafe and/or unhealthful conditions and work practices in a timely manner.

### **812.3 INVESTIGATION OF REPORTED INCARCERATED PERSON INJURY**

Whenever there is a report of an injury to an incarcerated person that is the result of accidental or intentional acts, other than an authorized use of force by custody staff, the Sheriff or the authorized designee will initiate an investigation to determine the cause of the injury and develop a plan of action whenever a deficiency is identified. Injuries resulting from use of force incidents will be investigated and reported in accordance with the Use of Force Policy.

### **812.4 INVESTIGATION REPORTS**

The Correctional Sergeant shall ensure that reports relating to an incarcerated person's injury are completed and should include the following:

- Incident reports
- Any other relevant documents

### **812.5 ANNUAL REVIEWS**

The Sheriff or the authorized designee shall conduct an annual review of all injuries involving incarcerated persons for the purpose of identifying problem areas and documenting a plan of action to abate circumstances relating to incarcerated person 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.

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The Sheriff shall consult with the Office risk manager to coordinate corrective action or to seek managerial/administrative guidance for implementing corrective action.

#### **812.6 POLICY**

It is the policy of the San Luis Obispo County Sheriff's Office to provide a safe environment for individuals confined at this facility, in accordance with all applicable laws, by establishing an effective safety program, investigating incarcerated person injuries, and taking corrective actions as necessary to reduce accidents and injury.

## Incarcerated Person Hygiene

### 814.1 PURPOSE AND SCOPE

This policy outlines the procedures that will be taken to ensure the personal hygiene of every incarcerated person in the San Luis Obispo County Sheriff's Office jail is maintained. The San Luis Obispo County Sheriff's Office recognizes the importance of each incarcerated person maintaining acceptable personal hygiene practices by providing adequate bathing facilities and hair care services, and the issuance and exchange of clothing, bedding, linens, towels, and other necessary personal hygiene items.

### 814.2 POLICY

It is the policy of the San Luis Obispo County Sheriff's Office facility to maintain a high standard of hygiene in compliance with the requirements established by all state laws, ordinances, and regulations (15 CCR 1069). Compliance with laws and regulations relating to good incarcerated person hygiene practice is closely linked with good sanitation practices. Therefore, the need to maintain a high level of hygiene is not only for the protection of all incarcerated persons, but for the safety of the correctional staff, volunteers, contractors, and visitors.

### 814.3 STORAGE SPACE

There should be adequate and appropriate storage space for incarcerated person bedding, linen, or clean clothing. The inventory of clothing, bedding, linen, and towels should exceed the maximum incarcerated person population so that a reserve is always available (15 CCR 1263).

The facility should have clothing, bedding, personal hygiene items, cleaning supplies, and any other items required for the daily operation of the facility, including the exchange or disposal of soiled or depleted items. The assigned staff shall ensure that the storage areas are properly maintained and stocked. The Facility Manager should be notified if additional storage space is needed.

#### 814.3.1 BEDDING ISSUE

Upon entering a living area of the San Luis Obispo County Sheriff's Office jail, every incarcerated person who is expected to remain overnight shall be issued bedding and linens including but not limited to (15 CCR 1270):

- (a) Sufficient freshly laundered blankets to provide comfort under existing temperature conditions. Blankets shall be exchanged and laundered in accordance with facility operational laundry rules.
- (b) One clean, firm, nontoxic, fire-retardant mattress (16 CFR 1633.1 et seq.).
  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 incarcerated person is released or upon reissue.

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2. Mattresses shall meet the most recent requirements of the State Fire Marshal, the Bureau of Home Furnishings' test standard for penal mattresses, and any other legal standards at the time of purchase (15 CCR 1272).
  3. Mattresses shall be free of holes and tears. Mattresses with holes, tears, or that lack sufficient padding shall be replaced upon request with mattresses that meet the requirements of 15 CCR 1270 (15 CCR 1271).
- (c) One sheet or one clean mattress cover.
1. Two blankets or a sleep bag may be issued in place of one mattress cover or one sheet at the request of the incarcerated person.
- (d) One clean bath towel.

Linen exchange, including towels, shall occur at least weekly and shall be documented in the daily activity log (15 CCR 1271). The Correctional Sergeant shall review the daily activity log at least once per shift.

The Facility Manager or the authorized designee shall conduct both scheduled and unannounced inspections of the facility to ensure that bedding issuance policies and procedures are carried out in accordance with the applicable laws and regulations.

#### 814.3.2 CLOTHING ISSUE

An incarcerated person admitted to the facility for 72 hours or more and assigned to a living unit shall be issued a set of facility clothing. The issue of clothing appropriate to the climate for incarcerated persons shall include but is not limited to: (15 CCR 1260):

- Clean socks.
- Clean outer garments.
- Clean undergarments (e.g., shorts, undershirt, bra and two pairs of panties).
- Footwear.

Incarcerated persons who are issued a change of clothing upon admission to the facility may have their personal clothing returned after laundering, at the discretion of the Facility Manager.

All issued and exchanged clothing shall be clean and free of holes or tears, reasonably fitted, durable, and easily laundered and repaired. Undergarments shall be clean, free of holes or tears, and substantially free of stains. Individuals shall be able to select the garment type more compatible with their gender identity and gender expression (15 CCR 1260).

All exchanges shall be documented on the daily activity log. The Shift Commander or unit supervisor shall review the daily activity log at least once per shift.

Additional clothing may be issued as necessary for changing weather conditions or as seasonally appropriate. An incarcerated person's personal undergarments and footwear may be substituted for the institutional undergarments and footwear, provided there is a legitimate medical necessity for the items and they are approved by the medical staff.



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Each incarcerated person assigned to a special work area, such as food services, medical, farm, sanitation, mechanical, and other specified work, shall be clothed in accordance with the requirements of the job, including any appropriate protective clothing and equipment, which shall be exchanged as frequently as the work assignment requires. All issued clothing shall be clean, free of holes and tears (15 CCR 1261).

The Facility Manager or the authorized designee shall conduct both scheduled and unannounced inspections of the facility to ensure that clothing issuance policies and procedures are carried out in accordance with the applicable laws and regulations.

The Facility Manager or the authorized designee shall ensure that the facility maintains a sufficient inventory of extra clothing to ensure each incarcerated person shall have neat and clean clothing appropriate to the season.

An incarcerated person's excess personal clothing shall be mailed, picked up by, or transported to a designated family member or stored in containers designed for such purpose. All incarcerated person personal property shall be properly identified, inventoried, and secured. Incarcerated persons shall sign and receive a copy of the inventory record.

#### **814.4 LAUNDRY SERVICES**

Laundry services shall be managed so that daily clothing, linen and bedding needs are met.

#### **814.5 INCARCERATED PERSON ACCOUNTABILITY**

To ensure incarcerated person accountability, incarcerated persons are required to exchange item for item when clean clothing, bedding, and linen exchange occurs.

Prior to being placed in a housing unit, incarcerated persons shall be provided with an incarcerated person handbook listing this requirement.

#### **814.6 PERSONAL HYGIENE OF INCARCERATED PERSONS**

Personal hygiene items, hair care services, and facilities for showers will be provided in accordance with applicable laws and regulations. This is to maintain a standard of hygiene among incarcerated persons in compliance with the requirements established by state laws as part of a healthy living environment.

Each incarcerated person held more than 24 hours, who does not have the following personal care items because of either indigency or the absence of an incarcerated person canteen, shall be issued the following items (15 CCR 1265):

- Toothbrush
- Dentifrice
- Soap
- Comb
- Shaving implements

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- Sanitary pads, panty liners, and tampons as requested at no cost and no maximum allowance (Penal Code § 4023.5)

Upon request, each inmate shall also be allowed to continue to use materials necessary for personal hygiene with regard to their menstrual cycle and reproductive system, including, but not limited to, sanitary pads, panty-liners and tampons at no cost to the incarcerated person. In addition, they shall be allowed two (2) birth control measures as prescribed by a physician, nurse practitioner, certified nurse midwife or physician assistant.

The Facility Manager or the authorized designee may modify this list to accommodate the use of liquid soap and shampoo dispensers. Personal hygiene items should be appropriate for the incarcerated person's gender. Additional hygiene items shall be provided to incarcerated persons upon request, as needed.

Personal care items shall be issued within the first 12 hours of a housing. Incarcerated persons shall not be required to share personal care items or disposable razors (15 CCR 1265). Used razors are to be disposed into approved sharps containers. Other barbering equipment capable of breaking the skin must be disinfected between individual uses, as prescribed by the California Board of Barbering and Cosmetology to meet the requirements of 16 CCR 979 and 16 CCR 980 (15 CCR 1267(c)).

Incarcerated persons, except those who may not shave for reasons of identification in court, shall be allowed to shave daily (15 CCR 1267(b)). The Facility Manager or the authorized designee may suspend this requirement for any incarcerated person who is considered a danger to him/herself or others.

#### **814.6.1 SHAVING IMPLEMENTS-SUPERVISION**

Inmates will be issued shaving implements, upon request, by utilizing an *Request Slip, kiosk or tablet*. An incarcerated person's classification status shall determine whether the request for possession of shaving implements is approved or denied. Incarcerated persons designated as high risk shall not be allowed to possess shaving implements including disposable razors without direct supervision. High risk incarcerated persons will be allowed supervised shaves, upon request, under the following circumstances:

- The incarcerated person is not considered an immediate danger to themselves or others.
- There is sufficient staff on-duty to directly supervise the use and possession of the shaving implement for the entire time it is being used.

#### **814.7 BARBER AND COSMETOLOGY SERVICES**

The Facility Manager or the authorized designee shall be responsible for developing and maintaining a schedule for hair care services provided to the incarcerated person population and will have written policies and procedures for accessing these services (see the Grooming Policy). The Facility Manager shall ensure that the rules are included in the incarcerated person handbook.

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#### **814.7.1 SCHEDULE FOR HAIR CARE SERVICES**

Incarcerated persons shall have the ability to receive hair care services once per month (15 CCR 1267(b)). Records of hair care services shall be documented in the daily activity log.

Prior to being placed in a housing unit, incarcerated persons will be given an incarcerated person handbook, which details how to request hair care services.

#### **814.7.2 HAIR CARE SPACE**

Due to sanitation concerns, the hair care services should be located in a room that is designated for that purpose. The floors, walls, cabinets, countertops and ceilings should be smooth, non-absorbent and easily cleanable.

Each room should have all the equipment necessary for maintaining sanitary procedures for hair care, including approved, covered containers for waste, disinfectants and a means of separating sanitized equipment from soiled equipment.

After each haircut, all tools that came into contact with the inmate shall be thoroughly cleaned and sanitized according to established guidelines and regulations.

Any person infested with head lice shall not be given hair care service until cleared by the medical staff.

The hair care services area shall be maintained and kept clean according to the requirements of the state or local board of barbering and cosmetology and the health department standards.

#### **814.8 AVAILABILITY OF PLUMBING FIXTURES**

Incarcerated persons confined to cells or sleeping areas shall have access to toilets and washbasins with hot and cold running water that is temperature controlled. Access shall be available at all hours of the day and night without staff assistance.

The minimum number of plumbing fixtures provided for incarcerated persons in housing units is:

- One sink/washbasin for every 10 incarcerated persons (24 CCR 1231.3.2(2)).
- One toilet to every 10 incarcerated persons (urinals may be substituted for up to one-third of the toilets in facilities for male incarcerated persons) (24 CCR 1231.3.1).

#### **814.9 INCARCERATED PERSON SHOWERS**

Incarcerated persons will be allowed to shower upon assignment to a housing unit and at least every other day thereafter, or more often if possible. Absent exigent circumstances, no person shall be prohibited from showering at least every other day following assignment to a housing unit. If showering is prohibited, it shall be approved by the Facility Manager or the authorized designee, and the reasons for prohibition shall be documented (15 CCR 1266).

There should be one shower for every 20 incarcerated persons unless federal, state, or local building or health codes differ. Showering facilities for incarcerated persons housed at this facility shall be clean and properly maintained. Water temperature shall be periodically measured to

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ensure a range of 100 to 120 degrees for the safety of incarcerated persons and staff, and shall be recorded and maintained (24 CCR 1231.3.4).

Transgender and intersex incarcerated persons shall be given the opportunity to shower separately from other incarcerated persons (28 CFR 115.42).

#### **814.10 DELOUSING MATERIALS**

Delousing materials and procedures shall be approved through consultation with the Responsible Physician or qualified health care professionals.

#### **814.11 RESPONSIBILITIES**

The Facility Manager shall ensure the basic necessities related to personal care are provided to each incarcerated person upon entry into the general population. Appropriate additional personal care items may be available for purchase from the incarcerated person commissary.

#### **814.12 ADDITIONAL PRIVACY REQUIREMENTS**

Incarcerated persons shall be permitted to shower, perform bodily functions, and change clothing without non-medical staff of the opposite sex viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Staff of the opposite sex shall announce their presence when entering an incarcerated person housing unit (28 CFR 115.15).

## **Chapter 9 - Food Services**

## Food Services

### 900.1 PURPOSE AND SCOPE

The Office recognizes the importance of providing nutritious food and services to incarcerated persons to promote good health, to reduce tension in the 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 incarcerated persons housed in the facility.

### 900.2 POLICY

It is the policy of this office that food services shall provide incarcerated persons with a nutritionally balanced diet in accordance with federal, state, and local laws, and with regulations for daily nutritional requirements (15 CCR 1241 et seq.).

The food services operation shall be sanitary and shall meet the acceptable standards of food procurement, planning, preparation, service, storage, and sanitation in compliance with Food and Drug Administration (FDA) and United States Department of Agriculture (USDA) requirements and standards set forth in Health and Safety Code § 113700 et seq. (15 CCR 1245(a)).

### 900.3 FOOD SERVICES SUPERVISOR

The food services supervisor shall be responsible for oversight of the day-to-day management and operation of the food services area, including:

- Developing, implementing, and managing a budget for food services.
- Ensuring sufficient staff is assigned and scheduled to efficiently and safely carry out all functions of food services operations.
- Establishing, developing, and coordinating appropriate training for staff and incarcerated person workers.
- Developing a menu plan that meets all nutrition and portion requirements and can be produced within the available budget.
- Developing procedures for food found to be contaminated, expired, showing signs of spoilage, or otherwise not fit for human consumption (15 CCR 1243).
- Other duties and activities as determined by the Facility Manager.

### 900.4 MENU PLANNING

All menus shall be planned, dated, and available for review at least one month in advance of their use. Records of menus and of foods purchased shall be kept on file for one month. Menus shall provide a variety of foods and should consider food flavor, texture, temperature, appearance, and palatability. Menus shall be approved by a registered dietitian or nutritionist before being served to ensure the recommended dietary allowance for basic nutrition meets the needs of the appropriate age group. The dietitian shall ensure that the meals meet the nutritional and hot food requirements of 15 CCR 1240 and 15 CCR 1241(15 CCR 1242).

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Any changes to the meal schedule, menu, or practices should be carefully evaluated by the food services manager in consultation with the Facility Manager, dietician, medical staff, and other professionals, and shall be recorded. All substitutions will be of equal or better nutritional value and meet the caloric requirements set forth in 15 CCR 1241. If any meal served varies from the planned menu, the change shall be noted in writing on the menu and/or production sheet.

Menus as planned, including changes, shall be evaluated by a registered dietitian at least annually (15 CCR 1242). Facility menus shall be evaluated at least quarterly by the food services supervisory staff to ensure adherence to established daily servings.

Copies of menus, foods purchased, annual reviews, and quarterly evaluations should be maintained by the food services manager in accordance with established records retention schedules.

#### **900.5 FOOD SAFETY**

Temperatures in all food storage areas should be checked and recorded at the beginning of each shift, but shall be checked and recorded at least once daily. Holding temperatures for cold and hot foods shall be checked and recorded every two hours. Hot food shall be reheated to 165 degrees if it falls below 135 degrees at any time.

All reach-in or walk-in refrigerators and cold storage must maintain food temperature as outlined in the Food Storage Policy.

One sample for each meal served shall be dated and maintained under refrigeration for testing in the event of a food-borne illness outbreak. Sample meals shall be discarded at the end of three days if no food-borne illness is reported.

Food production shall be stopped immediately if there is any sewage backup in the preparation area or if there is no warm water available for washing hands. Food production shall not resume until these conditions have been corrected (15 CCR 1245(a)).

#### **900.6 THERAPEUTIC DIETS**

The food services supervisor shall be responsible for ensuring that all incarcerated persons who have been prescribed therapeutic diets by qualified health care professionals are provided with compliant meals. A therapeutic diet manual, which includes samples of medical diets, shall be maintained in the health services and food services areas for reference and information.

More complete information may be found in the Prescribed Therapeutic Diets Policy.

Persons who are known to be pregnant or lactating shall be provided a balanced, nutritious diet approved by a physician (15 CCR 1248).

#### **900.7 RELIGIOUS DIETS**

The food services supervisor, to the extent reasonably practicable, will provide special diets for incarcerated persons in compliance with the parameters of the Religious Programs Policy and the Religious Land Use and Institutionalized Persons Act (RLUIPA).

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When religious diets are provided, they shall conform to the nutritional and caloric requirements for non-religious diets (15 CCR 1241).

#### **900.8 FOOD SERVICES REQUIREMENTS**

All reasonable efforts shall be made to protect incarcerated persons from food-borne illness. Food services staff shall adhere to sanitation and food storage practices and there shall be proper medical screening and clearance of all food handlers in accordance with the Food Services Workers' Health, Safety and Supervision Policy (15 CCR 1230).

Food production and services will be under staff supervision. Food production, storage, and food-handling practices will follow the appropriate federal, state, or local sanitation laws (15 CCR 1246).

#### **900.9 MEAL SERVICE PROCEDURE**

Incarcerated person meals that are served in a day room should be provided in space that allows groups of incarcerated persons to dine together, with a minimum of 15 square feet of space per inmate. A day room area shall not contain toilets or showers in the same room without appropriate visual barriers.

Meals shall be served at least three times during each 24-hour period. At least one meal must include hot food. Any deviation from this requirement shall be subject to the review and approval of a registered dietitian to ensure that incarcerated persons receive meals that meet nutritional guidelines.

Incarcerated persons must be provided a minimum of 15 minutes dining time for each meal. There must be no more than 14 hours between a substantial evening meal and breakfast. A substantial evening meal is classified as a serving of three or more menu items at one time to include a high quality protein, such as meat, fish, eggs or cheese. The meal shall represent no less than 20 percent of the day's total nutrition requirements. If more than 14 hours pass between meals, approved snacks will be provided. If a nourishing snack is provided at bedtime, up to 16 hours may elapse between the substantial evening meal and breakfast. A nourishing snack is classified as a combination of two or more food items from two of the four food groups, such as cheese and crackers or fresh fruit and cottage cheese.

Incarcerated persons who miss, or may miss, a regularly scheduled meal must be provided with a beverage and a sandwich or substitute meal. Approved snacks should be served to inmates on medical diets in less than the 14-hour period if prescribed by the Responsible Physician or registered dietitian. Incarcerated persons on medical or therapeutic meals who miss their regularly scheduled meal will be provided with their prescribed meal (15 CCR 1240).

As the meal time approaches, facility staff should direct the incarcerated persons to get dressed and be ready for meals. Staff should be alert to signs of injury or indications of altercations, and should investigate any such signs accordingly. Staff should remain alert to the potential for altercation during incarcerated person movement and meals. Meals shall be served under the direct supervision of staff.



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Staff should direct an orderly filing of incarcerated persons in the day room. Staff should identify incarcerated persons who have prescribed therapeutic or authorized religious diets so those incarcerated persons receive their meals accordingly.

It shall be the responsibility of the correctional deputies to maintain order and enforce rules prohibiting excessive noise and intimidation of other incarcerated persons to relinquish food during mealtime.

In the interest of security, sanitation and vermin control, incarcerated persons shall not be allowed to take food from the day room area to their cells or bunks.

#### 900.9.1 STAFF MEALS

Custodial Staff have the option to order free on-duty meals during normal inmate meal times. The Custodial Staff member requesting the meal shall order the appropriate staff meal no less than two hours before the scheduled inmate meal time. The Kitchen will be responsible for delivering the meal to the appropriate duty station the staff member is posted.

#### **900.10 EMERGENCY MEAL SERVICE PLAN**

The food services supervisor shall establish and maintain an emergency meal service plan for the facility (15 CCR 1243(k)).

Such a plan should ensure that there is at least a seven-day supply of food maintained in storage for incarcerated persons. In the event of an emergency that precludes the preparation of at least one hot meal per day, the Facility Manager 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 supervisor shall assign a registered dietician to ensure that minimum nutritional and caloric requirements are met (15 CCR 1242). The Facility Manager shall notify the Board of State and Community Corrections (BSCC) in writing in the event the suspension lasts longer than three days. The emergency suspension of food service standards shall not continue more than 15 days without the approval of the chairperson of the BSCC (15 CCR 1012).

In the event that the incarcerated person food supply drops below that which is needed to provide meals for two days, the Facility Manager or the authorized designee shall purchase food from wholesale or retail outlets to maintain at least a four-day supply during the emergency.

Depending on the severity and length of the emergency, the Sheriff should consider requesting assistance from allied agencies through mutual aid or the National Guard.

## Food Services Training

### 902.1 PURPOSE AND SCOPE

The purpose of this policy is to reduce the risk of potential injury to staff, contractors and incarcerated workers in the food services areas by developing and implementing a comprehensive training program in the use of equipment and safety procedures.

### 902.2 POLICY

The San Luis Obispo County Sheriff's Office ensures a safe and sanitary environment is maintained for the storage and preparation of meals through the appropriate training of food services staff and incarcerated workers (15 CCR 1230; 15 CCR 1243(g); 15 CCR 1245(a)).

### 902.3 TRAINING

The Food Services Supervisor, under the direction of the Facility Manager, 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 incarcerated 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.

The Food Services Supervisor, at the direction of the Facility Manager, shall establish an employee/kitchen worker training course, and all staff or incarcerated workers shall be trained on how to assemble, operate, clean and sanitize kitchen equipment.

Information about the operation, cleaning and care of equipment, including manufacturer's literature, that is suitable for use as reference material shall be kept in the food services operation area. The reference material should be used in developing training on the use of the equipment and the maintenance and cleaning procedures.

Safety and sanitation shall be the primary consideration in equipment purchase and replacement. Placement and installation of equipment must be carefully planned to facilitate cleaning, sanitizing, service and repairs. The equipment must also meet any applicable government codes.

### 902.4 TESTING

A test, written or oral, should be developed to determine and document that the food services worker understands the proper procedures demonstrated during training. Food services workers are required to pass the test in order to work in the food services area. Upon achievement of a

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passing score, the food services worker shall acknowledge receipt of the training in writing and will be issued a food handlers card. The signed document shall be forwarded to the Training Coordinator and retained in the worker's training file. Contracted service providers should be required to provide documentation and certification of their employees. Only trained personnel are authorized to use food services equipment.

## Dietary Guidelines

### 904.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure that the nutritional needs of the incarcerated person are met and that overall health is promoted through the use of balanced nutritious diets.

### 904.2 POLICY

It is the policy of this office that diets provided by this facility will meet or exceed the guidelines established in the current publications of the Dietary Reference Intakes (DRI) of the Food and Nutrition Board, Institute of Medicine of the National Academies, the California Food Guide (CFG) and the U.S. Department of Agriculture's Dietary Guidelines for Americans (DGA).

### 904.3 REVIEW OF DIETARY ALLOWANCES

The food services manager is responsible for developing the facility's menus and shall ensure that all menus served by food services comply with the nutritional and caloric requirements found in the 2019 DRI, and the 2020-2025 DGA guidelines (15 CCR 1241). Any deviation from these guidelines shall be reviewed by the Sheriff and/or the Facility Manager and the Responsible Physician.

The food services manager or the authorized designee shall ensure that the facility's menus and dietary allowances are evaluated annually by a registered dietitian, and that any changes meet the DRI and DGA guidelines. A registered dietitian must approve menus before they are used (15 CCR 1242).

Menus should be evaluated at least quarterly by the food services manager or the authorized designee.

### 904.4 MENU CYCLE PLANNING

The food services manager or the authorized designee should plan the menus one month in advance of their use.

Any changes to the menu must be recorded and kept until the next annual inspection (15 CCR 1242). Any menu substitutions must use better or similar items.

Menus should include the following minimum food group allowances per day (15 CCR 1241):

- (a) Dairy Group: Three servings of pasteurized fat-free or low-fat milk fortified with Vitamins A and D or food providing at least 250 mg. of calcium and equivalent to 8 ounces of fluid milk. One serving can be from a fortified food containing at least 150 mg. of calcium. Persons who are known to be pregnant or lactating should receive four servings of milk or milk products.
- (b) Vegetable-Fruit Group: Five servings of fruits and vegetables. At least one daily serving, or seven servings per week, shall be from each of the following three categories:
  1. One serving of a fresh fruit or vegetable.

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2. One serving of a Vitamin A source, fruit or vegetable, containing at least 200 micrograms retinol equivalents or more.
  3. One serving of a Vitamin C source containing at least 30 mg. or more.
- (c) Grain Group: A minimum of six servings of grains, three of which must be made with whole grains.
- (d) Protein Group: Three servings of lean meat, fish, eggs, cooked dry beans, peas, lentils, nuts, peanut butter, or textured vegetable protein, equivalent to 14 grams or more of protein. The daily requirements shall be equal to three servings for a total of 42 grams per day or 294 per week. In addition, a fourth serving from the legumes category shall be served three days a week.
- (e) A daily or weekly average of the food group's requirement is acceptable.
- (f) Saturated dietary fat should not exceed 10 percent of the total calories on a weekly basis. Fat shall be added only in minimum amounts necessary to make the diet palatable. Facility diets shall consider the recommendations and intentions of the 2015-2020 DGA of reducing overall sugar and sodium levels.

Additional servings of dairy, vegetable-fruit, and grain groups must be provided in amounts to meet caloric requirements when the minimum servings outlined in the requirements above are not sufficient to meet the caloric requirements of an incarcerated person.

# Food Services Worker's Health, Safety and Supervision

## 906.1 PURPOSE AND SCOPE

The purpose of this policy is to establish basic personal health, hygiene, sanitation and safety requirements to be followed by all food services workers and to ensure the proper supervision of food services staff and incarcerated workers.

## 906.2 POLICY

The San Luis Obispo County Sheriff's Office will ensure that meals are nutritionally balanced, safe and prepared and served in accordance with applicable health and safety laws. All incarcerated food services workers will be properly supervised by custody staff to ensure safety and security at all times (15 CCR 1243(h)).

## 906.3 FOOD SERVICES SUPERVISOR RESPONSIBILITIES

The Food Services Supervisor 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 incarcerated food services workers.

The food preparation area must remain clean and sanitary at all times. The food services supervisor or the authorized designee shall post daily, weekly and monthly cleaning schedules for the equipment and food preparation area.

## 906.4 MEDICAL SCREENING

The Food Services Supervisor shall work cooperatively with the Responsible Physician to develop procedures to minimize the potential for spreading contagious disease and food-borne illness. In an effort to prevent the spread of illness, the following shall be strictly observed (15 CCR 1230):

- (a) All food services workers shall have a pre-employment/pre-assignment medical examination, in accordance with local requirements, to ensure freedom from diarrhea, skin infections and other illnesses transmissible by food or utensils.
- (b) Periodic reexaminations of food services workers shall be given to ensure freedom from any disease transmissible by food or utensils.
- (c) Food services workers shall have education and ongoing monitoring in accordance with the standards set forth in the applicable government health and safety codes.
- (d) A supervisor or authorized designee 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.

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- (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 and hands washed 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 they report symptoms such as vomiting, diarrhea, jaundice, sore throat with fever or has a lesion containing pus, such as a boil or infected wound that is open or draining. Food service workers shall only return to work in food service areas when cleared by a qualified health care professional.

#### **906.5 TRAINING REQUIREMENTS FOR FOOD SERVICES WORKERS**

The Food Services Supervisor is responsible for developing and implementing a training program for incarcerated person food services that includes food safety, proper food-handling techniques and personal hygiene. Each incarcerated 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 Supervisor (15 CCR 1243(g)).

The training curriculum for incarcerated food services workers should include, at minimum, the following topics:

- Proper hand-washing techniques and personal hygiene as it applies to food services work
- Proper application and rotation of gloves when handling food
- Proper use of protective hair coverings, such as hats or hairnets
- Wearing clean aprons and removing aprons prior to entering toilet facilities
- Maintaining proper cooking and holding temperatures for food
- Proper portioning and serving of food
- Covering coughs and sneezes to reduce the risk of food-borne illness transmission

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- Reporting illness, cuts or sores to the custody staff in charge

#### **906.6 SUPERVISION OF INCARCERATED WORKERS**

Only personnel authorized to work in the food preparation area will be allowed inside. Incarcerated food handlers working in the kitchen must be under the supervision of a staff member (15 CCR 1243(h)). The Facility Manager 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/kitchen staff shall be assigned to supervise and closely monitor incarcerated food services workers. Staff shall ensure that incarcerated food services workers do not misuse or misappropriate tools or utensils, and that all workers adhere to the following:

- Correct ingredients are used in the proper proportions.
- Food is maintained at proper temperatures.
- Food is washed and handled properly.
- Food is served using the right utensils and in the proper portion sizes.
- Utensils such as knives, cutting boards, pots, pans, trays and food carts used in the preparation, serving or consumption of food are properly washed and sanitized after use. Disposable utensils and dishes will not be reused.
- All utensils are securely stored under sanitary conditions when finished.

#### **906.7 SUPERVISION OF THE FOOD SUPPLY**

The risk of conflict and protest is reduced when the incarcerated persons population has confidence in the safety and quality of their food. Custody/kitchen staff should supervise the transport and delivery of food to the respective serving areas. Custody/kitchen staff should ensure the food is protected during transportation, delivered to the right location efficiently and under the right temperatures.

Food services staff should report any suspected breach in the safety or security of the food supply. Staff should be alert to incarcerated person behavior when serving food, and cognizant of any comments concerning perceived contamination or portioning issues. Staff should report any suspicion of incarcerated person unrest to a supervisor.

Any change to the published menu or the standard portioning should be documented and reported to the food services supervisor as soon as practicable.



## Food Preparation Areas

### 908.1 PURPOSE AND SCOPE

This policy is intended to ensure the proper design and maintenance of the food preparation area.

### 908.2 POLICY

It is the policy of this office to comply with all federal, state and local laws and regulations concerning the institutional preparation of food.

### 908.3 COMPLIANCE WITH CODES

The Facility Manager is responsible for ensuring that food preparation and service areas are in compliance with all applicable laws and regulations and that food preparation areas are sanitary, well lit, ventilated and have adequate temperature-controlled storage for food supplies (15 CCR 1245(a)).

Any physical changes in the food preparation area, such as changing equipment or making major menu changes (from cold production to hot food), must be approved by the local public health entity to ensure adequate food protection.

Living or sleeping quarters are prohibited in the food preparation and food services areas (Health and Safety Code § 114286).

The food preparation area must avoid cross contamination and remain free from vermin infestation (Health and Safety Code § 114259).

### 908.4 CONSTRUCTION REQUIREMENTS

All remodeling and new construction of food preparation areas shall comply with federal, state and local building codes, comply with food and agricultural laws and standards and include any required approvals from any local regulatory authority (Health and Safety Code § 113700 et seq.).

The food preparation area shall be sized to include space and equipment for adequate food preparation for the facility's population size, type of food preparation and methods of meal services.

Floors, floor coverings, walls, wall coverings and ceilings should be designed, constructed and installed so they are smooth, non-absorbent and attached so that they are easily cleanable (Health and Safety Code § 114268; Health and Safety Code § 114271).

Except in the area used only for dry storage, porous concrete blocks or bricks used for interior walls shall be finished and sealed for a smooth, non-absorbent, easily cleanable surface.

Food storage areas shall be appropriately clean, sized, typed and temperature-controlled for the food being stored (Health and Safety Code § 114047).

Lighting throughout the kitchen and storage areas shall be sufficient for staff and incarcerated persons to perform necessary tasks (Health and Safety Code § 114252).

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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.

#### **908.5 TOILETS AND WASHBASINS**

Adequate toilet and washbasin facilities shall be located in the vicinity of the food preparation area for convenient sanitation and proper hygiene. Toilet facilities shall be completely enclosed and shall have tight-fitting, self-closing, solid doors, which shall be closed except during cleaning and maintenance.

Signs shall be conspicuously posted throughout the food preparation area and in each restroom informing all food services staff and incarcerated 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 incarcerated persons 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 incarcerated 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 supervisor or appointed designee shall be responsible for procedures to ensure:

- (a) All fixtures in the toilet facilities are clean and in good operating condition.
- (b) A supply of toilet tissue is maintained at each toilet at all times. Toilet facilities used by women shall have at least one covered waste receptacle.
- (c) The hand-washing station located adjacent to the toilet facility has warm water available and is kept clean and in good operating condition. Single-dispensing soap and a method for drying hands shall be provided at all times (Health and Safety Code § 113953.3).

If the toilet facility is outside of the kitchen area, food services workers must wash their hands after using the toilet facility and again upon returning to the kitchen area before preparing or serving food.

## Food Budgeting and Accounting

### 910.1 PURPOSE AND SCOPE

The purpose of this policy is to establish processes that will enable the facility's food services to operate within its allocated budget, and for the development of specifications for purchasing food, equipment and supplies for the delivery of food services.

### 910.2 POLICY

The San Luis Obispo County Sheriff's Office food services facilities shall serve nutritious meals in an efficient and cost-effective manner in accordance with applicable laws and standards (15 CCR 1243(i)).

### 910.3 PROCEDURE

The fiscal services manager is responsible for creating a cost-effective food services budget 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 incarcerated person cost using an inventory of existing supplies and planned purchases, minus the anticipated ending inventory (15 CCR 1243(i)).
- (c) Establishing accounting procedures for financial statements and inventory control.

The Food Services Supervisor will assist in the budget process by the following:

- (a) 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.
- (b) Ensuring that food is purchased from an approved wholesale/institutional vendor to ensure food safety.
- (c) Bulk-purchasing nonperishable items to maximize the budget dollars (15 CCR 1243(b)).
- (d) 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.

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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.
- (e) 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).
- (f) Maintaining records of invoices, purchase orders, meal count sheets, food production records, therapeutic and religious diet records, inventory of food, supplies and equipment for the required period of time, as mandated by the governing body of the facility.

#### **910.4 MONTHLY REPORTING**

The Food Services Supervisor is responsible for ensuring that accurate meal record data is collected and maintained. Meal records should include, but not be limited to, the number of (15 CCR 1243(j)):

- (a) Meals prepared and served for each meal period.
- (b) Meals served per location.
- (c) Prescribed therapeutic diet meals served.
- (d) Authorized religious diet meals served.

All meal records shall be retained in accordance with office retention schedules and state statutory regulations.

## Food Services Facilities Inspection

### 914.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for inspecting food services areas and facilities to ensure a safe and sanitary environment for staff and incarcerated persons.

### 914.2 POLICY

It is the policy of the San Luis Obispo County Sheriff's Office that the food services area be maintained in a safe, sanitary condition by conducting regularly scheduled inspections, both by facility staff and by an outside independent inspection authority as may be required by law (15 CCR 1245(a)).

### 914.3 CLEANING AND INSPECTIONS BY STAFF

The Food Services Supervisor shall ensure the dining and food preparation areas and all equipment in the food services area are inspected monthly. Adequate hot and cold water should be available in the kitchen. Water temperature washing equipment should be checked and recorded daily 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, but not be limited to, areas such as floors, walls, windows, vent hoods, and equipment such as chairs, tables, fryers and ovens, should be documented by frequency of cleaning as follows:

- After each use
- Each shift
- Daily
- Weekly
- Monthly
- Semi-annually
- Annually

The Food Services Supervisor is responsible for establishing and maintaining a record-keeping system to document the periodic testing of sanitary conditions and safety measures, in accordance with established records retention schedules. At the direction of the Facility Manager or the authorized designee, the food services supervisor shall take prompt action to correct any identified problems.

#### 914.3.1 SAFETY INSPECTION CHECKLIST

The following items should be inspected at least yearly or more often as needed:

- Lighting is adequate and functioning properly.

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- Ample working space is available.
- 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 supervisor.
- 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.

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#### **914.4 CONTRACTING FOR INSPECTION**

The Food Services Supervisor is responsible for ensuring that the food services operation works in accordance with all state and local laws and regulations.

The Facility Manager shall contract with an independent, outside source for periodic inspection of the food services facilities and equipment, to ensure that established state and local health and safety codes have been met.

Documentation of the inspections, findings, deficiencies, recommended corrective actions and verification that the corrective standards were implemented will be maintained by the facility in accordance with established records retention schedules.

A contract for services from an independent and qualified inspector should include, but is not limited to, the following components:

- (a) The inspector should conduct a pre-inspection briefing with the Facility Manager and other appropriate personnel, including the food services supervisor, to identify the applicable government health and safety codes and the areas to be inspected. The inspector should provide the necessary equipment to conduct the inspection.
- (b) During the course of the inspection, the inspector should study and report on whether the following meet acceptable standards:
  1. Walls, ceilings and floors are in good condition, smooth and easily cleanable.
  2. The kitchen layout is properly designed to avoid cross-contamination.
  3. The kitchen is properly lighted and ventilated.
  4. The temperature controlled storage areas are in good operating condition and proper temperatures are being maintained.
  5. Dry foods are properly stored off the floor, away from the walls and ceilings.
  6. There is no sign of vermin infestation.
  7. All equipment is in good and sanitary condition and is certified by one of the American National Standards Institute certification agencies e.g., Underwriters Laboratories, or Extract, Transform and Load, and the National Science Foundation product certification marks.
  8. The dishwashing equipment is clean, in good operating condition and maintains proper washing and rinsing temperatures.
  9. There is no evidence of cross-contamination between the potable and contaminated water systems.
  10. The ware washing area is clean and supplied with proper chemicals and Material Safety Data Sheets.
  11. The food is properly stored, labeled and rotated according to first-in first-out procedures.
  12. The food services staff and incarcerated workers are wearing clean uniforms and practice proper personal hygiene.

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13. All food services workers are trained for proper food handling and there is a person in charge who is responsible for the food safety of the facility.
14. There are ample hand-washing stations supplied with warm water under pressure, soap, a method to dry hands, a waste container and employee hand-washing signs.

Any deficiencies should be noted by the inspector in his/her inspection report, and recommendations made for corrective action.

At the exit interview, the inspector should cite any violations according to the government health and safety codes.

The inspector should conduct a follow-up inspection to verify the deficiencies have been corrected as recommended.

The Food Services Supervisor should provide the Facility Manager with a plan to implement the recommended corrections in a timely manner and schedule a post-correction inspection with the original independent inspector.



## Food Storage

### 916.1 PURPOSE AND SCOPE

The purpose of this policy is to establish food storage methods that are designed to meet manufacturer's recommendations, Health and Safety Codes, state laws and local ordinances, and to safely preserve food, extend storage life and reduce food waste.

### 916.2 POLICY

Food and food supplies will be stored in sanitary and temperature-controlled areas, in compliance with state and local health laws and standards (15 CCR 1243(c); 15 CCR 1245(a)).

### 916.3 PROCEDURES

The Food Services Supervisor shall be responsible for establishing procedures to ensure the safe preservation and storage of food in the most cost-effective manner.

When receiving food deliveries, food services staff shall inspect the order for quality and freshness, and shall ensure that the order is correct by checking the order received against the order form. All delivery vehicles shall be inspected by food services staff to make certain that the vehicles are clean, free from vermin infestations and are maintained at the appropriate temperature for the type of food being carried.

If food quality and freshness do not meet commonly accepted standards or if it is determined that proper storage temperatures have not been maintained, the employee checking the order in will refuse the item and credit the invoice.

Any food destined for return to the vendor should be stored separately from any food destined for consumption. The food services supervisor or authorized designee will contact the vendor and arrange for replacement of the unacceptable food items.

An evaluation system should be established for food stored in any area with temperature readings outside the normal range, and should include contingency plans for menu changes, food storage relocation or food destruction, as indicated. All actions taken to ensure the safety of the food served should be documented and retained in accordance with established records retention schedules.

### 916.4 DRY FOOD STORAGE

Canned items and dry food that does not need refrigeration should be stored in a clean, dry, secure storage area where temperatures are maintained between 45 and 80 degrees. Temperatures shall be monitored.

All dry items shall be stored at least 6 inches off the floor and at least 6 inches away from any wall. Only full unopened cans and containers shall be stored in the storerooms. Open containers and packages shall be appropriately stored in the working or holding areas.

All storage areas will be kept locked when they are not in actual use. New food shipments shall be placed behind existing like items and rotated using a first-in first-out rotation method.

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Personal clothing and personal items shall not be stored in food storage areas.

#### **916.4.1 MAINTENANCE OF DRY FOOD STORAGE AREAS**

Incarcerated workers or staff should clean the storage areas at least once each day by sweeping and mopping all floors and wiping down shelves and walls. Any damaged items should be inspected for spoilage and repackaged or discarded as appropriate. Food services staff should inspect the storage areas to ensure they are clean and orderly. Staff will document the inspection and record the daily temperature on the storage area checklist (15 CCR 1243(m)).

#### **916.5 REFRIGERATED AND FROZEN STORAGE**

Unless health codes dictate otherwise, refrigerators must be kept between 32 and 41 degrees. Deep chill refrigerators will be set between 28 and 32 degrees for cook-chill products, dairy and meat items, to extend shelf life. Freezers shall be maintained at 32 degrees or below.

All freezer and refrigerator storage areas should have at least two thermometers to monitor temperatures. One thermometer should have a display visible to the outside. The second thermometer shall be placed in the warmest place inside the storage area. Any variance outside of acceptable temperature range shall be immediately addressed.

All food must be covered and dated when stored. Cooked items shall not be stored beneath raw meats. Cleaned vegetables shall be stored separately from unwashed vegetables. Storage practices shall use a first-in first-out rotation method.

#### **916.5.1 MAINTENANCE OF REFRIGERATED AND FREEZER AREAS**

Refrigeration storage units should be cleaned daily, including mopping floors and wiping down walls. A more thorough cleaning should occur weekly to include dismantling and cleaning shelves. Food services staff should inspect the contents of freezers and storage units daily to ensure all items are properly sealed and labeled (15 CCR 1243(m)).

#### **916.5.2 STORAGE OF CLEANING SUPPLIES AND MATERIALS**

The storage of soaps, detergents, waxes, cleaning compounds, insect spray and any other toxic or poisonous materials are kept in a separate, locked storage area to prevent cross contamination with food and other kitchen supplies.

#### **916.6 WASTE MANAGEMENT**

The Food Services Supervisor shall develop and maintain a waste management plan that ensures the garbage is removed daily (15 CCR 1243(l)). This plan also should include methods to minimize the waste of edible food and to dispose of non-edible or waste food material without utilizing a landfill.

## Prescribed Therapeutic Diets

### 918.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure that incarcerated persons who require prescribed therapeutic diets as a result of a diagnosed medical condition are provided with nutritionally balanced therapeutic meals that are medically approved and meet nutritional and safety standards.

### 918.2 PROCEDURES

The Responsible Physician, in consultation with the food services supervisor, 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 Food Services Supervisor shall comply with any therapeutic diet prescribed by the Responsible Physician for an incarcerated person.
- (d) The Food Services Supervisor and the Responsible Physician shall ensure that the therapeutic diet manual, which includes sample menus of therapeutic diets, shall be available to both the health services and food services workers. A registered dietitian shall review, and the Responsible Physician shall approve, the 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 incarcerated person developing an adverse medical condition or nutritional defect as the result of a diet that is inconsistent with the person's current medical needs.

Pregnant or lactating incarcerated persons shall be provided a balanced, nutritious diet approved by a physician (15 CCR 1248).

### 918.3 STAFF COMMUNICATION/COORDINATION

It is the responsibility of the health authority to compile a daily list of all incarcerated persons who are prescribed therapeutic diets. The list should contain the following information:

- (a) Incarcerated persons name
- (b) Incarcerated persons identification number
- (c) Housing location or dining location where the meals will be delivered
- (d) Incarcerated person's therapeutic diet type
- (e) Special remarks or instructions

Any time incarcerated persons are assigned to a different housing area, custody staff must notify the food services personnel immediately.

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#### **918.4 PREPARATION AND DELIVERY OF MEALS**

The food services manager or the authorized designee is responsible for reviewing the therapeutic diet lists prepared by the Responsible Physician, counting the number and type of therapeutic meals to be served, and preparing the food according to the therapeutic menu designed by the registered dietitian.

Therapeutic diets may include snacks and oral supplements. Snacks and supplements should be distributed with regularly scheduled meal service or may be distributed with 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) Housing location or dining location where the meals will be delivered
- (b) Incarcerated person's therapeutic diet type

The custody staff responsible for meal distribution shall ensure that any incarcerated person who has been prescribed a therapeutic meal by the Responsible Physician or the authorized designee receives the prescribed therapeutic meal.

Therapeutic meal receipts should be retained in the incarcerated person's medical record for an amount of time necessary to resolve any dispute about the receipt or composition of a prescribed meal.

Unless a therapeutic diet was prescribed with a specific end date, only the Responsible Physician or the authorized designee may order that a therapeutic diet be discontinued.

Incarcerated persons who are receiving therapeutic diets must receive clearance from the Responsible Physician before they may receive a religious or disciplinary diet.

If prescribed by the Responsible Physician, supplemental food shall be served to incarcerated persons more frequently than the regularly scheduled meals. An incarcerated person who misses a regularly scheduled meal shall receive the prescribed meal.

#### **918.5 THERAPEUTIC AND RELIGIOUS MEAL RECORDS**

Incarcerated persons receiving prescribed therapeutic diet meals and/or authorized religious diet meals must sign a document indicating the following:

- (a) Incarcerated person's name
- (b) Incarcerated person's identification number
- (c) Dates and times of service
- (d) Housing location or dining location where the meals will be delivered
- (e) Incarcerated person's therapeutic diet type
- (f) A list of items provided for the meal

All information regarding a therapeutic diet is part of an incarcerated person's medical record and is therefore subject to state and federal privacy laws concerning medical records.

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All meal records shall be retained in accordance with established retention schedules and applicable statutory regulations.

#### **918.6 POLICY**

It is the policy of this office to provide therapeutic diet meals as prescribed by qualified health care professionals.

## **Chapter 10 - Incarcerated Person Programs**

## Programs and Services

### 1000.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the programs and services that are available to incarcerated persons. The programs and services exist to motivate offenders toward positive behavior while they are in custody. The policy identifies the role and responsibilities of the Programs Manager, who manages a range of programs and services.

### 1000.2 POLICY

The San Luis Obispo County Sheriff's Office will make available to incarcerated persons a variety of programs and services subject to resources and security concerns. Programs and services offered for the benefit of incarcerated persons may include social services, faith-based services, out of cell activities, library access, educational/vocational training, alcohol and drug abuse recovery programs, and leisure time activities (15 CCR 1070).

### 1000.3 JAIL PROGRAMS UNIT RESPONSIBILITIES

The Jail Programs Unit under the direction of the Custody Services Lieutenant is responsible for managing the programs and services for incarcerated persons, including the following:

- (a) Research, plan, budget, schedule, and coordinate security requirements for all programs and services for incarcerated persons.
- (b) Develop or procure programs and services as authorized by the Facility Manager (15 CCR 1070).
- (c) Act as a liaison with other service providers in the community that may offer social or educational programs (e.g., school districts, Department of Social Services, health educators, substance abuse counselors).
- (d) Develop, maintain, and make available to incarcerated persons the schedule of programs and services.
- (e) Develop policies and procedures, and establish rules for the participation of incarcerated persons in the programs and services.
- (f) Develop and maintain records on the number and type of programs and services offered, as well as incarcerated person attendance at each offering.
- (g) Establish controls to verify that the content and delivery of programs and services are appropriate for the circumstances.
- (h) Accumulate data and prepare monthly and annual reports as directed by the Facility Manager.
- (i) Ensure incarcerated persons are not denied access to educational and vocational programs based solely on their indigent status.

#### 1000.3.1 JAIL PROGRAMS UNIT STAFF

The Jail Programs Unit will be comprised of the following:

- Correctional Sergeant

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- Program Manager
- Probation Officer
- Drug and Alcohol Services Staff
- Other relevant service providers

#### **1000.4 SECURITY**

All programs and services offered to benefit incarcerated persons shall adhere to the security and classification requirements of this facility. To the extent practicable, the Programs Manager will develop individualized programs and services for incarcerated persons who are housed in high-security or administrative separation.

#### **1000.5 DISCLAIMER**

Incarcerated person programs are provided at the sole discretion of the San Luis Obispo County Sheriff's Office in keeping with security interests, available resources, and best practices.

Nothing in this policy is intended to confer a legal right for persons to participate in any program offered other than what is required by law or that which is medically required.

#### **1000.6 EVALUATION OF NEW PROGRAMMING**

The San Luis Obispo County Sheriff's Office allows for the collaboration with local organizations for the purpose of offering relevant and beneficial programs and services to incarcerated persons who are housed in the county jail. Interested program providers shall contact either the Program Manager or the Program Sergeant with the proposed program. Program providers will be asked to submit a proposal in writing to either the Program Manager or Sergeant.

Proposal should include:

- A thorough description of the service
- How the service benefits the incarcerated person
- The length and duration
- materials needed and used
- A brief facilitator biography

If the proposal is determined to be viable and beneficial, a meeting will be scheduled where the program provider is afforded the opportunity to present the idea to the Program Manager and/or the Program Sergeant in further detail. The following information will be gathered and documented by the Program Manager and/or Program Sergeant:

1. Is the program evidence based?
2. What is the experience of the program provider?
3. Is the program proven to be successful?
4. Does the program fill a need within the jail?



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5. Are there similar programs being conducted in the jail?
6. Is the program provided free of charge or is there a fee?
7. Is the frequency and length of the program conducive to the jail?
8. What is the operational impact of the program on the jail?
9. Can the program be run and distributed safely inside the jail?

The Program Manager and Sergeant will discuss all gathered information to make a final determination whether or not to implement the new program. The Program Manager or Sergeant will notify the provider, within a reasonable amount of time, with the decision. If the program will be implemented they will then be referred to the Custody Administration Legal Clerk for jail clearance. Once cleared, the Program manager or Sergeant will facilitate implementation of the program inside the jail.

## **Incarcerated Person Welfare Fund**

### **1002.1 PURPOSE AND SCOPE**

The Office is authorized to maintain a fund derived from proceeds from the commissary, vending machines, telephones and other incarcerated person-related commerce activities, to be used primarily to provide welfare and education programs for the benefit of the incarcerated person population. This policy establishes guidelines for maintaining and administering the Incarcerated Person Welfare Fund.

### **1002.2 INCARCERATED PERSON WELFARE FUND**

The Facility Manager in cooperation with the Finance Department will establish and maintain an Incarcerated Person Welfare Fund where proceeds derived from telephones, commissary profits, vending machines and other income intended for the support of incarcerated person programs, is deposited.

The Incarcerated Person Welfare Fund is allocated to support a variety of programs, services and activities benefiting the general incarcerated person population and enhancing incarcerated person activities and programs. This includes capital construction and improvement projects in support of such programs, services and activities (Penal Code § 4025).

### **1002.3 INCARCERATED PERSON WELFARE FUNDING SOURCES**

Revenues and funding from the following sources shall be deposited into the Incarcerated Person Welfare Fund account:

- (a) All proceeds from commissary and canteen operations
- (b) Proceeds from vending machines made available for incarcerated person use
- (c) Proceeds from the operation of incarcerated person telephones
- (d) Proceeds from the sale of incarcerated persons' arts-and-crafts projects
- (e) Donations
- (f) Interest income earned by the Incarcerated Person Welfare Fund

### **1002.4 EXPENDITURE OF INCARCERATED PERSON WELFARE FUNDS**

The Incarcerated Person Welfare Fund shall be used solely for the welfare and benefit of the incarcerated person population or as otherwise permitted by law.

Expenditures permitted from the Incarcerated Person 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

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3. Library books
4. Vending machines
- (c) Salary and benefit costs for personnel while they are employed in positions or are performing activities solely for the benefit of incarcerated person or to facilitate incarcerated person programs
- (d) Welfare packages for indigent incarcerated persons
- (e) Alcohol and drug treatment programs
- (f) Office facility canteens, including vending machines available for incarcerated person use
- (g) Incarcerated person trust accounting system
- (h) Envelopes, postage and personal hygiene items for indigent incarcerated persons
- (i) Approved non-prescription, over-the-counter health aids for incarcerated person use
- (j) Libraries designated for incarcerated person use
- (k) Visiting room equipment, supplies and services
- (l) Incarcerated person 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 Incarcerated Person Welfare Fund
  6. Food or supplies for special occasions
  7. Incarcerated person awards for the purpose of providing umpires or referees, and maintaining activity equipment and apparel
  8. Incarcerated person tournaments and holiday events
  9. Incarcerated person club activities
  10. Entertainment equipment, cable or satellite subscription services and other related supplies
  11. Materials for faith-based programs

#### 1002.4.1 PROHIBITED EXPENDITURES OF INCARCERATED PERSON WELFARE FUND

Except as permitted by law, the Incarcerated Person Welfare Fund shall not be used to fund activities associated with any of the following:

- (a) Security-related functions, including staff, safety equipment, radios, weapons or control devices that are specifically designated for use by the custody staff in maintaining the security, safety and order in the facility
- (b) Food service, staff costs, equipment and supplies

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- (c) Medical/dental services, staff costs, equipment and supplies
- (d) Maintenance and upkeep of office facilities not otherwise permitted by law
- (e) Janitorial services and supplies
- (f) Transportation to court, medical appointments or other reasons not related to incarcerated person programs
- (g) Any other normal operating expenses incurred by the day-to-day operation of the Office

#### 1002.4.2 EXPENDITURE FOR REENTRY PROGRAMS

Expenditures from the Incarcerated Person Welfare Fund are also permitted for programs that assist indigent incarcerated persons with the reentry process within 30 days of release. These programs include work placement, counseling, obtaining proper identification, education and housing (Penal Code § 4025.5).

#### **1002.5 FINANCIAL ACCOUNTING OF INCARCERATED PERSON WELFARE FUNDS**

The Facility Manager in cooperation with the Finance Department shall maintain an accounting system to be used for purchasing goods, supplies and services that support incarcerated person programs (see the Financial Practices Policy).

#### 1002.5.1 ANNUAL REPORTING

The Facility Manager is responsible for ensuring an annual report of expenditures from the Incarcerated Person Welfare Fund is submitted annually to the County Board of Supervisors (Penal Code § 4025).

#### **1002.6 POLICY**

It is the policy of this office to maintain and administer an Incarcerated Person Welfare Fund that supports incarcerated person programs.

## Incarcerated Person Accounts

### 1004.1 PURPOSE AND SCOPE

This policy establishes guidelines and procedures for managing, handling and accounting of all money belonging to incarcerated persons that is held for their personal use while they are incarcerated in this facility.

### 1004.2 INCARCERATED PERSON ACCOUNTS

An account will be established for each incarcerated person when they are booked into this facility.

When an incarcerated person is booked into the jail a printed inventory of the money in the incarcerated person's possession shall be provided. Any subsequent deposits to the incarcerated person's fund shall be documented. An incarcerated person shall be issued a receipt for all money held until their release.

An incarcerated person may use money in their account for bail or to purchase items from commissary. Incarcerated persons may receive and release money while in custody. Funds will be made available to incarcerated persons for their use in accordance with the rules and regulations established by the Facility Manager.

### 1004.3 FUNDING SOURCES

Funds deposited into an incarcerated person's account will first be used to settle the incarcerated person's negative balance, should one exist.

#### 1004.3.1 DEPOSITS DURING BOOKING

All paper currency received during the booking process shall be deposited to the incarcerated person's account. The incarcerated person will sign their property sheet and a receipt of their monies will be placed on their property. Any amounts in excess of \$5,000.00 will be returned to the arresting agency for safekeeping. The following procedure will be adhered to during the booking of monies:

- (a) All paper currency will be placed in the automated kiosk by the arresting/transporting officer.
- (b) Coins will be counted, first, by the Correctional Deputy.
  1. The coins will be placed in a clear plastic bag with the incarcerated person's name, ID number and total coin amount notated and visible.
- (c) The coins will be given to the Correctional Technician who will verify the amount.
  1. The property bag of coins will be heat sealed and placed on the arrestees hot property.
- (d) The total coin amount will be notated on the Incarcerated Person Inventory in JMS under "Description." The Article will be notated as "Cash on Hand."

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- (e) Contaminated, dirty or wet money totals will be notated on the Incarcerated Person Inventory in JMS under "Description." The Article will be notated as "Miscellaneous" and placed in the incarcerated person's hot property.

#### 1004.3.2 DEPOSITS THROUGH THE MAIL

All funds received by mail to be deposited to an incarcerated person's account shall be delivered to the Correctional Technician in Reception after signed acknowledgement by the Correctional Deputy who received the mail.

Only money orders and cashier checks issued by a bank that are \$5,000 or less, received through the mail are acceptable for deposit into incarcerated person accounts. All personal checks, payroll checks and other unapproved monies will be returned to the sender. If no return address is available the unapproved monies will be placed on the incarcerated person's personal property, but shall not be put on their account.

#### 1004.3.3 DEPOSITS FROM THE PUBLIC

Only approved sources may deposit funds into an incarcerated person's account.

Incarcerated person will not be allowed to accumulate large sums of money greater than \$5,000 in their account other than for the purpose of bail.

#### **1004.4 AUTHORIZATION FOR SELF-BAIL**

Incarcerated persons wishing to use their personal funds as bail must sign a Property Release Form. This form must be received by the Correctional Technician so the incarcerated person's account can be debited and a receipt issued.

#### **1004.5 RELEASE OF FUNDS TO OTHER PERSONS**

Incarcerated persons wishing to release all or part of their personal funds to a person who is not in custody must sign a Property Release Form. There will be no more than one money release by an incarcerated person to a person during their incarceration period. This one transaction must be completed within the first 14 days of incarceration. All releases of incarcerated person funds to the public will be in the form of a check. The person to whom the funds are to be released must contact the Correctional Technician, who will prepare a Property Release Form for the amount to be withdrawn, and will indicate to whom the money is to be released. That person must furnish a valid driver's license or state-issued identification card to the Correctional Technician. The Correctional Technician will then forward the Property Release Form to the proper housing area, through a Correctional Deputy, for the incarcerated person's signature and approval. The Correctional Deputy will witness the incarcerated person signing the Property Release Form and sign their initials and identification number, verifying the incarcerated person's identity.

#### **1004.6 RELEASE FROM CUSTODY**

The Correctional Technician assigned to Reception will generate a daily roster of incarcerated persons scheduled for release. Each incarcerated person's account will be accessed and a report showing all activity on the account will be generated after it has been adjusted to show a zero balance.

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Staff members who are responsible for the release of incarcerated persons will notify the Correctional Technician assigned to Reception of other impending releases not on the scheduled release roster, by providing the list with the names and identification numbers to the Correctional Technician.

The Correctional Technician will release the money, via debit card, to the Correctional Deputy performing the release. The correctional deputy will then release all monies to the incarcerated person after the incarcerated person verifies the amount and signs the release portion of the property sheet.

#### **1004.7 CASHIER RESPONSIBILITY**

The Correctional Technician assigned to Reception will post funds to the incarcerated person's account, if funds are received by mail or by an outside agency, and prepare a receipt for the incarcerated person.

At the end of every shift, the Correctional Technician shall be responsible for balancing all transactions completed during the shift and shall complete a Balancing Summary itemizing each type of transaction.

Any unresolved discrepancies found during the balancing procedures shall be promptly reported. The Correctional Technician reporting the discrepancies shall prepare a memorandum showing the amount of the discrepancy.

The memorandum shall include the following:

- (a) Date and time the cash discrepancy was discovered
- (b) Amount of overage or shortage
- (c) Explanation of the cause of the overage/shortage, if known
- (d) Documentation used to identify the error
- (e) Recovery attempts
- (f) Name of person reporting the discrepancy
- (g) Name of person approving the memorandum and the date approved

The supervisor shall initiate an Overage/Shortage Report and attach the memorandum prior to submission to Fiscal Services for final review.

#### **1004.8 SECURE BANKING OF INCARCERATED PERSON FUNDS**

All monies collected by custody personnel shall be secured daily in an officially designated and secure place.

#### **1004.9 AUTOMATED KIOSKS**

The use of automated kiosks for the deposit of monies into the incarcerated person account or to transfer incarcerated person monies for the purchase of commissary or other authorized items will meet the financial accounting requirements of this policy and other standard financial practices.

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##### 1004.9.1 SECONDARY MONEY HANDLING PROCEDURES

Should the automated Kiosk in the Intake Release Center become inoperable, the following money handling procedure will be adhered to:

- (a) Money amounts at intake will be verified by both the Correctional Deputy and Correctional Technician at time of acceptance.
- (b) The verified amount, along with "kiosk down" will be noted on the property sheet under "money amount." The property sheet will be folded in a way that the amount is visible.
- (c) The money will be placed in a bag separate from other hot property and heat sealed.
- (d) The incarcerated person's name, ID number and money amount will be written on the outside of the hot property bag. The hot property bag containing the monies will be attached to the incarcerated person's other hot property bags.
- (e) Once the automated Kiosk is operable the monies previously collected will be processed in accordance with this policy and a receipt added to the hot property.



## Counseling Services

### 1006.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process for providing counseling and crisis intervention services to incarcerated persons.

### 1006.2 POLICY

This office will provide counseling and crisis intervention services to any incarcerated person who either requests services or is determined by a health provider to be in need of counseling or crisis intervention services. These services may be provided by:

- (a) Medical/mental health staff assigned to the facility.
- (b) Faith-based counseling by the chaplain or religious volunteers (see the Religious Programs Policy).
- (c) Deputies assigned to the facility who have specific training and expertise in this area.

The Facility Manager shall coordinate with the Responsible Health Authority to develop and confidentially maintain records of counseling and crisis intervention services provided to incarcerated persons and to ensure that those records are retained in accordance with established records retention schedules.

The Facility Manager shall ensure that request forms are available and provided to incarcerated persons who request counseling services. All incarcerated person requests for counseling shall be collected by Mental Health Staff. If an incarcerated person displays behavior indicating a need for counseling or crisis intervention services, the facility employee shall notify Mental Health Staff. The Correctional Deputy shall assess the need and area of counseling and make a reasonable effort to provide the incarcerated person with the requested counseling as soon as reasonably practicable with consideration given to facility security, scheduling and available resources. Incarcerated persons who are victims of a sexual abuse or harassment incident will be informed of the availability and continuity of counseling (28 CFR 115.82; 28 CFR 115.83).

### 1006.3 NON-CRISIS COUNSELING

The Office shall, when reasonably practicable, make counseling services available to assist incarcerated persons who are being released into the community and request the need for such services.

## Incarcerated Person Marriages

### 1008.1 PURPOSE AND SCOPE

It is the purpose of this policy to establish guidelines for a process to allow incarcerated persons to marry while in custody.

### 1008.2 POLICY

It is the policy of this Office to allow incarcerated persons in custody to marry in accordance with *Family Code Section 300* and Supreme Court decision *In re Marriage Cases 2008 Cal. Lexis 6807*.

### 1008.3 DEFINITIONS

**Officiant:** An individual who presides in an official capacity to perform a service of ceremony. Officiants must show a certificate to the Clerk-Recorders' Office which shows they may ordain marriages.

**Witness:** An individual who, being present personally sees a ceremony and signs a document attesting the genuineness of its execution.

### 1008.4 RESPONSIBILITIES OF THE INCARCERATED PERSON

It is the responsibility of the incarcerated person and parties involved to make arrangements for the marriage including, but not limited to:

- (a) Securing the marriage license
- (b) Obtaining the Officiant authorized by law to perform the ceremony
- (c) Contact and obtain the witness
- (d) Pay all fees associated with the marriage
- (e) Obtain a marriage license from the County Clerk-Recorders' Office
- (f) Prepare an *Affidavit of Inability to Appear* with a notarized signature of the incarcerated person

### 1008.5 RESTRICTIONS

This Office reserves the right to suspend or refuse any marriage ceremony that could compromise the safety and security of the facility, staff, public or incarcerated persons. Additionally, the following restrictions apply to the marriage ceremony:

- (a) Cameras, cellphones and other items not normally allowed in the jail are prohibited.
- (b) No physical contact or exchanging of rings will be allowed.
- (c) The Officiant performing the ceremony, the intended and one witness shall be the only visitors allowed.
- (d) The ceremony will be conducted in an attorney room, visiting room or, in some cases, in the courtroom or Judge's chambers.
- (e) The ceremony will count as one hour of visiting time and the incarcerated person must have one hour of visit time available to them.

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- (f) If both parties are incarcerated the marriage will not be authorized.

#### **1008.6 PROCEDURE**

The following guidelines will be followed for incarcerated person marriages:

- (a) Incarcerated persons will send a *Request Slip* to the Correctional Sergeant at least 14 days prior to the requested date for the ceremony.
- (b) The incarcerated person will provide the names and telephone numbers of all involved parties for notification of approval.
- (c) The Correctional Sergeant will approve or deny the request. If approved, the Correctional Sergeant will arrange a date and time best suited to maintaining the efficient operation and security of the facility.
- (d) The Correctional Sergeant or authorized designee will notify the involved parties of the date, time and location of the ceremony.
- (e) The date, time and names of the Officiant and witnesses will be noted.
- (f) A Correctional Deputy will ensure that only the approved parties enter the attorney/visiting room or Judge's chambers. All parties will be notified of restrictions and that they are subject to search.
- (g) A Correctional Deputy will receive any documents for incarcerated person signature and inspect them for contraband prior to allowing the incarcerated person to handle them.
- (h) The incarcerated person will be escorted back to their housing unit at the conclusion of their approved visiting time.

## Exercise and Out of Cell Time

### 1010.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines and procedures ensuring that the San Luis Obispo County Sheriff's Office facility will have sufficiently scheduled exercise and out of cell time periods and sufficient space for these activities, as required by law.

#### 1010.1.1 DEFINITIONS

Definitions related to this policy include (15 CCR 1006):

**Exercise** - The opportunity for physical exertion.

**Out of Cell Time** - Time spent outside of the sleeping area, where an individual has the opportunity to exercise or participate in recreation.

**Recreation** - An individual's ability to choose from activities that occupy the attention and offer the opportunity for relaxation and may include reading, games, socialization, entertainment, education, and programs.

### 1010.2 RESPONSIBILITIES

The Facility Manager or the authorized designee shall be responsible for ensuring there is sufficient secure space allocated for physical exercise and out of cell time, and that a schedule is developed to ensure accessibility to both activities for all incarcerated persons. At least three hours per week of exercise opportunities shall be provided and at least seven hours of out of cell time distributed over a period of seven days for recreation (15 CCR 1065).

### 1010.3 ACCESS TO EXERCISE

Incarcerated persons 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.

Staff shall use the approved daily log sheet to ensure incarcerated persons are given appropriate out of cell time. Staff shall record the exercise of an incarcerated person, or that the incarcerated person has declined outside exercise in JMS.

Daily log sheets should be collected monthly and forwarded to the Facility Manager. Log sheets shall be maintained in accordance with established records retention schedules.

### 1010.4 ACCESS TO OUT OF CELL TIME

Each incarcerated person shall have access to the minimum state-required out of cell time (leisure-time) activities outside the cell and adjacent dayroom areas (15 CCR 1065). The length of time will be determined by the incarcerated person's classification status, security concerns, and operational schedules that preclude out of cell time during a period of time (e.g., meal times, searches, lockdown, court). The staff should ensure that the maximum time possible is provided to the incarcerated persons for this purpose.

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Televisions, newspapers, table games, and other items may also be made available to enhance out of cell time. Consideration will be given to the passive or active out of cell time needs of older incarcerated persons and incarcerated persons with disabilities.

#### 1010.4.1 USE OF THE INCARCERATED PERSON WELFARE FUND

Monies derived from the Incarcerated Person Welfare Fund may be used to purchase and maintain equipment and supplies.

#### **1010.5 SECURITY AND SUPERVISION**

The staff supervising incarcerated persons during exercise and out of cell time shall document when each incarcerated person has the opportunity to exercise or recreate, and when each incarcerated person actually participates.

Staff shall be responsible for inspecting exercise equipment to ensure it appears safe for use. Broken equipment or equipment that is in an unsafe condition shall not be used. Incarcerated persons will not be permitted to use equipment without supervision. All equipment shall be accounted for before incarcerated persons are returned to their housing unit.

The supervising staff may terminate the exercise or out of cell time period and escort back to the housing unit any incarcerated person who continues to act in an aggressive or disorderly manner after being ordered to stop by the staff. Whenever an exercise or out of cell time period is involuntarily terminated, the staff will document the incident and rationale for terminating the exercise period. The Correctional Deputy will determine whether disciplinary action is warranted.

#### **1010.6 EXERCISE SPACE**

Exercise areas, as specified by federal, state, and/or local laws or requirements, should be sufficient to allow each incarcerated person the required minimum amount of exercise. Use of outdoor exercise is preferred but weather conditions may require the use of covered/enclosed space. Dayroom space is not considered exercise space.

Incarcerated persons on separation status shall have access to the same facilities as other incarcerated persons unless security or safety considerations dictate otherwise. When incarcerated persons on separation status are excluded from use of regular facilities, the alternative area for exercise use shall be documented.

#### **1010.7 INABILITY TO MEET REQUIREMENTS**

In the event that the incarcerated person population exceeds the ability of the facility to meet the exercise and out of cell time requirements, the facility should notify the governing body about the deficiency in space for exercise, that it may violate the law and/or the requirements, and request funds to remedy the situation. The facility should document all action taken to try to remedy the situation, including funding requests, population reduction requests, and all responses to those requests.

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#### **1010.8 POLICY**

It is the policy of this office to provide incarcerated persons with access to exercise opportunities, exercise equipment, and out of cell time activities in accordance with state laws or requirements.

## Electronic Tablet and Kiosk Program

### 1011.1 POLICY

It is the policy of this office to provide eligible incarcerated persons with use of electronic tablets and kiosks for educational and rehabilitative programs, activities and services. It is in the penological interest of the San Luis Obispo County Sheriff's Office to provide reasonable educational and rehabilitative programs, activities, and services to incarcerated persons when such services can be provided within a framework of safety, security, good order and budget constraints.

Tablet and kiosk use are subject to availability and may be canceled at any time due the safety and security of the facility or at the discretion of shift sergeants. This policy may be updated as needed.

### 1011.2 PURPOSE AND SCOPE

The San Luis Obispo County Sheriff's Office has implemented an Electronic Tablet & Kiosk Program that offers tablet and kiosk use by the incarcerated person population for the purposes of providing services and general information. The services and information provided on the tablets may include but is not limited to jail rules and regulations (i.e. Incarcerated Person Handbook), law library services, commissary ordering, educational services and Prison Rape Elimination Act (PREA) information and reporting. The material contained on the tablets meets specific Title 15 requirements. The purpose of this policy is to provide guidelines and procedures for use, management, and security of computer tablets issued to incarcerated persons.

### 1011.3 RESPONSIBILITY

It is the responsibility of jail staff to ensure that program tablets and kiosks are properly maintained which includes total quantity accounting, charging of tablets and inspection of all tablets and kiosks for any software issues and/or visible damage.

Jail staff shall immediately report to a shift sergeant any unresolvable issues, including the discovery of missing units. Any missing tablet(s) or visible damage to any tablet or kiosk will require a written Jail Incident Report and notification to the Programs Correctional Sergeant. It is the responsibility of the Programs Correctional Sergeant or their designee to identify the nature of the issue once a tablet or kiosk has been deemed inoperable or missing. Any inoperable tablet will be returned to the Programs Correctional Sergeant.

### 1011.4 DISTRIBUTION OF TABLETS

Jail staff will ensure tablets are made available in the housing units in accordance with the tablet schedule created by the Programs Correctional Sergeant, unless such activity is canceled due to safety and security concerns. Jail staff is responsible for distributing and collecting the tablets daily. Jail staff will complete an inspection of each tablet after they are collected to ensure they are fully intact and free from tampering and/or damage. Tablets are to have no physical damage (i.e. cracked screens, dented screens, discoloration, missing pieces, graffiti, etc.) and must turn on with a properly functioning screen.

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Jail staff will ensure all tablets are placed on the charging stations daily to properly charge for use. Tablets are to be left on while stored/charging to ensure the software updates are downloaded successfully to the devices. Any issues regarding this procedure will immediately be reported to the Programs Correctional Sergeant. Any technical malfunction or equipment damage will be reported to the Programs and shift correctional sergeants immediately.

Distribution procedure is as follows:

- I. Once a tablet count has been completed, jail staff will distribute them in accordance with the tablet schedule created by the Programs Correctional Sergeant.
- II. Lockdown incarcerated persons will use tablets in their designated housing. For all other incarcerated persons, tablets must remain visible to staff and will be used in the dayroom, yard, and communal living spaces.
- III. Jail staff will verify the total number of tablets at collection and report any missing tablets to the Programs Correctional Sergeant. Jail staff will ensure all tablets are returned to charging carts and plugged in to allow ample recharging time for the next scheduled use.
- IV. Jail staff will maintain a maintenance log in each housing location of missing or malfunctioning tablets. Completed logs will be forwarded to the Programs Correctional Sergeant. If an issue is found, a detailed description of the issue will be written on the log and notification will be made to the Programs Correctional Sergeant.

#### **1011.5 COMPLETION OF ONLINE PROGRAMS**

Successful completion of programs on the tablets is documented. No certificate copies will be provided by jail staff. Incarcerated persons can contact an outside source (i.e. family members, friend, formal support) to access the incarcerated person's account from any computer and print certificates to provide or save for the incarcerated person.

#### **1011.6 ADMINISTRATIVE OR DISCIPLINARY SUSPENSION**

**Administrative Suspension-** Incarcerated person access to tablets is a privilege and may be suspended, limited, or revoked. Jail staff may suspend, limit or revoke an incarcerated person's access to a tablet and/or kiosk without formal disciplinary action. If such action is taken, the incident surrounding the decision must be communicated to the Programs Correctional Sergeant or designee. Reasons for the administrative suspension do not have to be related to tablet use. All administrative suspensions will be documented the Unit Post Log and Jail Incident Report if applicable and must be approved by a correctional sergeant.

**Disciplinary Suspension-** Formal disciplinary suspensions shall be documented on a Jail Incident Report and the appropriate Notice of Disciplinary Form will be generated. The disciplinary process will be followed in accordance with San Luis Obispo County Policy- Incarcerated Person Discipline Section 600. The Programs Correctional Sergeant shall be copied on any such reports.

#### **1011.7 DAMAGE, DESTRUCTION AND INVENTORY**

Prior to the end and/or start of each shift, jail staff shall be responsible for ensuring all tablets are accounted for and on the charging stations. Jail staff will examine all tablets and kiosks at that



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time to ensure they are undamaged and in working order. Any missing tablet(s) or visible damage to any tablet or kiosk will require a written Jail Incident Report, notation on the housing tablet log and notification to the Programs Correctional Sergeant. Jail staff will take any damaged tablet out of service and return the device to the Programs Correctional Sergeant. Jail staff will make every effort to identify incarcerated person(s) responsible for damage or destruction of any tablet and/or kiosk. Disciplinary sanctions may be imposed and will be based on the incarcerated person's actions and intent.

## Education, Vocation, and Rehabilitation

### 1012.1 PURPOSE AND SCOPE

This office provides educational and vocational programs that are designed to help incarcerated persons improve personal skills, assist in their social development, and improve employability after release. The ability of the office to offer educational programs is dictated by available funding, incarcerated person classification, and other required incarcerated person programs and routines.

### 1012.2 POLICY

The educational and vocational programs offered by the Office are available to all eligible incarcerated persons and are subject to schedule, space, personnel and other resource constraints.

Designated space for incarcerated person 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 incarcerated person has the potential to pose security issues, every effort, to the extent reasonably practicable, will be made to provide individualized educational opportunities (15 CCR 1061).

### 1012.3 PROGRAM MANAGER

The Sheriff or the authorized designee shall appoint a Program Manager who shall be responsible for managing all aspects of the incarcerated persons educational and vocational programs. Those duties include, but are not limited to:

- (a) Conducting an annual needs assessment to determine the type of programs needed to serve the incarcerated person population.
- (b) Developing the program plans.
- (c) Developing or directing the curricula for each educational, vocational and testing component.
- (d) Developing and implementing individualized programs for high-risk or administrative incarcerated persons, as needed.
- (e) Coordinating with corrections staff regarding the security issues associated with these programs.
- (f) Developing and maintaining records of all needs assessments, all training offered, all incarcerated person attendees, testing records and class evaluations.
- (g) Forecasting the annual cost of the program and coordinating with the budget office to secure funding.

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#### **1012.4 COURSE OFFERINGS**

Course offerings will be subject to need, available resources, security concerns, available space, and incarcerated person classification, and may include the following:

- (a) Basic education, preparation for a high school equivalency credential
- (b) English as a second language (ESL)
- (c) Basic literacy
- (d) Substance abuse and healthy lifestyles education
- (e) Parenting courses
- (f) Basic computer instruction
- (g) Basic life skills
- (h) Vocational skills such as:
  - 1. Cooking and food services
  - 2. Landscaping, horticulture
  - 3. Basic woodworking
  - 4. Auto body and painting
  - 5. Basic auto repair
  - 6. Basic office skills
- (i) Other courses as deemed appropriate by the Programs Coordinator

#### **1012.5 OUTREACH**

Information about educational opportunities should be included in the general incarcerated person orientation. At a minimum, incarcerated persons should receive instruction on how to request participation in the incarcerated person education programs, along with eligibility requirements and rules for participation.

#### **1012.6 ELIGIBILITY REQUIREMENTS**

Educational/vocational programming (other than televised courses) may be offered to sentenced and pretrial persons. The Sheriff shall ensure that there is equal opportunity for participation for incarcerated persons of each gender.

#### **1012.7 INCARCERATED PERSON REQUESTS**

Incarcerated persons should be given a form to request participation in the inmate education program. Requests will be forwarded to the Program Manager, who will have the facility classification staff screen and approve the request.

The Program Manager or authorized designee will notify the incarcerated person whether they has been approved for an education program. If approved, the Program Manager the will provide instruction to the incarcerated person on how to access the program services and will notify the affected facility staff about the incarcerated person's scheduled attendance.

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Incarcerated persons may also contact the IProgram Manager at any time via an incarcerated person message slip to request information regarding educational opportunities.

Incarcerated persons have the right to refuse to participate in programs other than work assignments or programs that are required by statute or court order.

#### **1012.8 SELF-STUDY PROGRAM**

Whenever reasonably feasible, the basic educational program may be presented by self study tutoring and videotape programming.

Incarcerated persons admitted into the high-school equivalency preparation program will be issued the necessary books and supplies. Studying will be done throughout the day at scheduled periods when videotape programming is presented on closed-circuit television.

Upon completion of a GED self-study program, the incarcerated person may be given the opportunity to take the high school equivalency preparation credential examination.

#### **1012.9 HIGH-SECURITY/ADMINISTRATIVE SEPARATION INCARCERATED PERSONS**

To the extent reasonably practicable, high-security incarcerated persons and those held in administrative separation may receive individual instruction in the form of a correspondence course.

#### **1012.10 REHABILITATION PROGRAM**

The Office provides opportunities for rehabilitation programs that are based upon victim and community input and are fashioned in a way that gives the incarcerated person an opportunity to make amends for the harm done.

The Sheriff and the Facility Manager 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

#### **1012.11 DISCLAIMER**

Nothing in this policy is meant to confer a legal right for incarcerated persons to participate in any educational offering. Educational programming is provided at the sole discretion of the Sheriff and the Facility Manager.

#### **1012.12 CLASSROOM USE AND DESIGN**

The demographics of the incarcerated person population should always be considered when developing educational and other programs. Incarcerated person classification and separation requirements also need to be considered.

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The Facility Manager should encourage and include educators in the setup and design of classrooms that have been identified for incarcerated person education programs. To the extent reasonably possible, in consideration of the space design and the ability to provide adequate security, teachers, education managers, and administrators should be consulted to ensure that their needs are met.

In addition to the traditional classroom approach to educational programming, there are several other delivery methods. These include independent study and computer education programs.

#### **1012.13 NEW CONSTRUCTION OR RENOVATION**

Whenever construction of new facilities is considered, the Facility Manager may include education specialists during the design phase to ensure that the needs of education providers are met with regard to security, sound levels and educational equipment.

The Facility Manager may seek technical assistance from consultants to school districts that provide education programs in correctional settings. There are also networks of educators who can provide valuable consulting services in order to keep pace with rapidly evolving program and legislative issues that are related to education.

## Commissary Services

### 1014.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a commissary program that will give incarcerated persons the opportunity to purchase personal items that are not provided by the facility.

### 1014.2 POLICY

It is the policy of this office to provide commissary services so that incarcerated persons who are not on disciplinary restriction and who have funds posted to their incarcerated person accounts may purchase items approved by the Facility Manager (Penal Code § 4025).

### 1014.3 STOREKEEPER RESPONSIBILITIES

The Facility Manager shall be responsible for designating a qualified person to act as the Storekeeper. High-security items shall be identified, stored and inventoried as such. The Storekeeper 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.
- Processing orders in a timely manner.
- 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.
- Cooperation and managing services with the contracted Commissary vendor.

### 1014.4 COMMISSARY ACCOUNTING

The Storekeeper shall be responsible for ensuring that all incarcerated persons who have commissary privileges have the opportunity to order and receive commissary items in a timely manner.

All incarcerated persons shall be afforded the opportunity to review an accounting of their money held in their account, to include deposits, debits and commissary goods purchased and received. Any discrepancy of the incarcerated person's funds shall be immediately reported to the Storekeeper. If the Storekeeper and the involved incarcerated person cannot settle the discrepancy, the Facility Manager or their designee shall be notified and will resolve the discrepancy.

### 1014.5 WELFARE PACKS

The Facility Manager or the authorized designee shall monitor the provision of welfare packs to indigent incarcerated persons. Welfare packs shall include, but not be limited to:

- (a) Four postage-paid envelopes, eight paper for letters, a pencil and an eraser each week to permit correspondence with family members and friends.

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- (b) Personal hygiene items, including toothbrush, toothpaste, soap, razor and other supplies deemed to be appropriate for indigent inmates.
- (c) Initial welfare packs will contain additional items such as a comb

The Sheriff may expend money from the Incarcerated person Welfare Fund to provide indigent incarcerated persons with essential clothing and limited transportation expenses upon release (Penal Code § 4025(i)).

#### **1014.6 ANNUAL AUDIT OF THE COMMISSARY**

The Storekeeper shall ensure that an audit of the commissary operation is conducted every two years by a certified auditor who is recognized by the Office as an authorized financial auditor; such as the Auditor Controller Treasurer Tax Collector (ACTTC) of San Luis Obispo County. The written report prepared by the auditor shall be reviewed for accuracy by the Storekeeper and provided to the Facility Manager or their designee.

All excess funds derived from the operation of the commissary shall be deposited into the Incarcerated Person Welfare Fund or otherwise used for the benefit of the incarcerated persons. 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 (b)).

## Library Services

### 1016.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for funding of library services and for providing incarcerated persons access to leisure and legal reading materials.

### 1016.2 POLICY

It is the policy of this facility to operate a library service that provides leisure and legal reading materials to incarcerated persons.

### 1016.3 RESPONSIBILITIES

The Facility Manager or the authorized designee is responsible for the administration of the library services and should appoint a capable member to run the 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 member 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.

### 1016.4 LIBRARY FUNDING AND MAINTENANCE

The Facility Manager should ensure that funding is available to operate the library. The Facility Manager may use monies from the Incarcerated Person Welfare Fund to offset the cost of salaries, services, and supplies. The librarian may enlist the assistance of the local public library system and other community organizations to maintain and update the library. Donated books and materials should be screened by the librarian for permissible content and safety prior to being distributed to incarcerated persons.

The Office may reject library materials that may compromise the safety, security, and orderly operation of this facility (see the Mail Policy for examples of materials that may be rejected).

The library shall be operated within the physical, budgetary, and security limits of the existing facility.

Books and other reading material should be provided in languages that reflect the population of the facility.

### 1016.5 LEISURE LIBRARY MATERIALS

Each incarcerated person is allowed to have no more than two books at any given time. Existing selections must be returned before new books may be selected by an incarcerated person. Incarcerated persons who destroy or misuse books and library materials will be subject to disciplinary action and may be required to pay for the material.



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#### **1016.6 LEGAL MATERIALS**

All incarcerated persons shall have reasonable access to the legal system, which may include access to legal reference materials. Pro per incarcerated persons shall have priority regarding access to legal publications.

Legal information that may be provided through the library includes but is not limited to:

- Criminal code sections.
- Copies of criminal and/or civil cases.
- Copies of relevant judicial forms.

Incarcerated persons desiring access to legal publications shall do so in the following manner:

- Legal Information Request: incarcerated persons shall submit a request to housing unit deputies requesting a legal information request form. Once completed, legal information request shall be submitted to the housing deputy for distribution to the processing designee. Only one request per incarcerated persons per 30 days is allowed unless the incarcerated person is a court-ordered pro per. Upon receipt the processing designee will time stamp, log, and number the request and arrange for the request to be submitted to legal research services. The processing designee shall ensure the records of access to legal materials and whether the requests were fulfilled or denied are documented each day and maintained in accordance with established records retention schedules.
- Electronic Legal Research: Legal research may be conducted via electronic system in supplement to submitting legal information requests. Access to electronic Legal Research methods is a privilege and will serve as supplement to, not in lieu of paper requests. Supplemental research may be conducted during scheduled tablet time or via Inmate Kiosks.

#### **1016.7 ALTERNATE MEANS OF ACCESS TO LEGAL RESOURCES**

Nothing in this policy shall confer a right to access a law library. Unless it is specified by court order, the Sheriff may provide access to legal resources by a variety of means that may include public or private legal research services (e.g., web-based legal resources).

#### **1016.8 ACCESS TO LIBRARY**

Access to the incarcerated person library or to library materials shall be based on incarcerated person classification, housing location, and other factors that legitimately relate to maintaining the safety and security of the facility.

Incarcerated persons in disciplinary separation shall have the same access to reading materials and legal materials as the general population unless a restriction is directed by the court.

## Mail

### 1018.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines for the receipt, rejection, inspection, and sending of incarcerated person mail.

### 1018.2 POLICY

This office will provide ample opportunity for incarcerated persons to send and receive mail, subject to restriction only when there is a legitimate government interest.

### 1018.3 MAIL GENERALLY

Incarcerated persons may, at their own expense, send and receive mail without restrictions on quantity, provided it does not jeopardize the safety of staff, visitors, or other incarcerated persons, or pose an unreasonable disruption to the orderly operation of the facility.

However, incarcerated persons are only allowed to store a limited amount of mail in their cells as determined by the Facility Manager. Excess mail will be stored with the incarcerated person's personal property and returned at the incarcerated person's release.

### 1018.4 CONFIDENTIAL CORRESPONDENCE

Incarcerated persons may correspond confidentially with courts, legal counsel, officials of this office, elected officials, the Department of Corrections, jail inspectors, government officials, or officers of the court. This facility will also accept and deliver a fax or interoffice mail from these entities.

Foreign nationals shall have access to the diplomatic representative of their country of citizenship. Staff shall assist in this process upon request.

Facility staff may inspect incoming confidential correspondence for contraband. Facility staff may inspect outgoing confidential correspondence for contraband before it is sealed, provided the inspection is completed in the presence of the incarcerated person. In the event that confidential correspondence is inspected, staff shall limit the inspection to a search for physical items that may be included in addition to the correspondence and shall not read the content of the correspondence itself (15 CCR 1063(c)).

### 1018.5 SUSPENSION/RESTRICTION OF MAIL PRIVILEGES

Mail privileges may be suspended or restricted upon approval of the Facility Manager whenever staff becomes aware of mail sent by an incarcerated person that involves (15 CCR 1083(f)):

- (a) Threats of violence against any member of the government, judiciary, legal representatives, victims, or witnesses.
- (b) Incoming or outgoing mail representing a threat to the security of the facility, staff, or the public.

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The District Attorney or County Counsel should be consulted in cases where criminal charges are considered against an incarcerated person or there is an apparent liability risk to the Office that relates to suspension or restriction of mail privileges.

#### **1018.6 PROCESSING AND INSPECTION OF MAIL BY STAFF**

Staff should process incoming and outgoing mail as expeditiously as reasonably possible. All incoming and outgoing mail should be processed within 24 hours and packages within 48 hours. Mail processing may be suspended on weekends, holidays or during any emergency situation.

Assigned deputies should open and inspect all incoming and outgoing general mail of current incarcerated persons. Incoming correspondence may be read as frequently as deemed necessary to maintain security or monitor a particular problem. Mail for incarcerated persons no longer in custody should not be opened.

Outgoing general mail shall not be sealed by the inmate in order to be scanned for the following::

- (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 incarcerated persons who are both in custody at the San Luis Obispo County Jail. This includes third party San Luis Obispo incarcerate person to San Luis Obispo incarcerated person correspondence.
- (d) The envelope has an incomplete return address.

When mail is found to be inappropriate in accordance with the provisions of this policy or when an incarcerated person is sent material that is not prohibited by law but is considered contraband by the facility, the material shall be held in the mail quarantine for five days pending appeal to be given to the incarcerated person upon release.

Incarcerated persons are not allowed to correspond with other incarcerated persons in this jail.

Incarcerated persons shall be notified in writing whenever their mail is held or returned to the sender. Mail logs and records, justification of censoring or rejection of mail, and copies of hold or return notices shall be maintained in the incarcerated person's file in accordance with established records retention schedules.

United States Postal Money Orders contained in incoming incarcerated person mail shall be removed and credited to the incarcerated person's account. Personal checks may be returned to the sender or held in the incarcerated person's property to be given to the incarcerated person upon release.

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##### 1018.6.1 DESIGNATION OF STAFF AUTHORIZED TO READ MAIL

Only staff members designated by the Facility Manager are authorized to read incoming and outgoing non-confidential mail. These staff members should receive training on legitimate government interests for reading and censoring mail and related legal requirements (15 CCR 1063).

##### 1018.6.2 CENSORSHIP OF INCOMING AND OUTGOING NON-CONFIDENTIAL CORRESPONDENCE

In making the determination of whether to censor incoming non-confidential correspondence, consideration shall be given to whether rejecting the material is rationally related to a legitimate government interest, and whether alternate means of communicating with others is available. The impact the correspondence may have on other inmates and jail staff is also a factor. Reasonable alternatives should be considered and an exaggerated response should be avoided; for example, discontinuing delivery of a magazine because of one article.

Outgoing non-confidential correspondence shall only be censored to further a substantial government interest, and only when it is necessary or essential to the address the particular government interest. Government interests that would justify confiscation of outgoing mail include:

- (a) Maintaining facility security.
- (b) Preventing dangerous conduct, such as an escape plan.
- (c) Preventing ongoing criminal activity, such as threats of blackmail or extortion, or other similar conduct.
- (d) Preventing harassment of those who have requested that no mail be sent to them by the incarcerated person.

Correspondence and material identified for censorship shall be delivered to the Correctional Sergeant, 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 publisher or non-retail distributor. A single notification may be sent if the publication is received by multiple inmates.

The following are not accepted in the incoming mail and emails:

Hardback books

More than 5 books at a time

Photographs larger than 4" x 6"

Instant (Polaroid) photographs

Photos or pictures of materials depicting nudity, including exposed genitalia, buttocks or females' breasts, and depictions of sexual acts

Greeting cards larger than 6" x 10" x 2".

Greeting cards with raised or embossed surfaces or made from heavyweight paper or card stock.

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Envelopes larger than 8 1/2" x 11 1/2"

Any type of sticker, glitter, glue, tape, whiteout or paint attached to an envelope or its contents

Letters or envelopes with perfume, kiss impressions or other substances

Used publications, magazines or newspapers

Cash, personal checks, money orders not issued by the U.S. Postal Service, two-party-checks and Welfare/Social Security checks

Postage stamps, blank greeting cards, envelopes or writing paper

Packages of any type (without approval of a correctional sergeant)

Food or medication

Staples or paperclips

The necessary incarcerated person information was not provided in the Email Subject Line

Email attachments were not in the approved format or PDF, TXT or DOC(x) document formats

No video or non-standard file formats

Incoming email messages are limited to five (5) attachments (photos)

#### **1018.6.3 DOCUMENTING REJECTED OR CENSORED CORRESPONDENCE**

In each case where it is necessary to remove any item, or reject or censor correspondence, a written record must be made of such action, to include:

- (a) The incarcerated person name and number.
- (b) A description of the mail in question.
- (c) A description of the action taken and the reason for such action.
- (d) The disposition of the item involved.
- (e) Signature of the deputy.
- (f) Notification to the incarcerated person and sender (unless such notification jeopardizes any investigation or the security of the facility).

#### **1018.7 BOOKS, MAGAZINES, NEWSPAPERS, AND PERIODICALS**

Unless otherwise in conflict with this policy and prohibited by the Facility Manager, incarcerated persons are permitted to purchase, receive, and read any book, newspaper, periodical, or writing accepted for distribution by the U. S. Postal Service (15 CCR 1066(a)).

Publications, magazines, or newspapers shall be accepted only if they are mailed directly from the publisher to a named incarcerated person. A current newspaper in general circulation or other like source, including a non-English alternative shall be made available to interested people (15 CCR 1066(a)).

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#### **1018.8 REJECTION OF MAGAZINES AND PERIODICALS**

The Office may reject magazines, periodicals, and other materials that may inhibit the reasonable safety, security, and discipline in the daily operation of this facility. Books, newspapers, and magazines are accepted only if they are sent directly by the publisher or a non-retail distributor. 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 document whenever a decision is made to reject books, magazines, or periodicals on an, "*Inmate Regulations*" form.

Religious texts not supplied by facility-authorized entities may be accepted by the chaplain or other religious volunteer who has received training on facility rules involving contraband, and who has been approved by a supervisor to review such documents for distribution.

#### **1018.9 FORWARDING OF MAIL**

Any non-legal mail received for a former incarcerated person should be returned to the sender with a notation that the incarcerated person is not in custody. Obvious legal mail should be forwarded to the former incarcerated person's new address if it is reasonably known to the facility. Otherwise, legal mail should be returned to the sender.

#### **1018.10 INDIGENT INCARCERATED PERSONS REQUESTS FOR WRITING MATERIALS**

Indigent incarcerated persons shall receive writing materials on a weekly basis, as provided by an approved schedule established by the Facility Manager. Writing materials should include the following (15 CCR 1063):

- (a) At least four pre-stamped envelopes for correspondence with family and friends
- (b) At least eight sheets of writing paper
- (c) One pencil

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Indigent incarcerated persons shall receive an amount of pre-stamped envelopes and writing paper sufficient to maintain communication with courts, legal counsel, officials of this office, elected officials, jail inspectors, government officials, and officials of the Board of State and Community Corrections. There shall be no limitation on the number of postage-paid envelopes and sheets of paper permitted for correspondence to the indigent incarcerated person's attorney and to the courts (15 CCR 1063(e)).

Requests shall be screened and granted based on need by the Programs Coordinator. Incarcerated persons should not be permitted to maintain an excess supply of writing materials without the approval of a supervisor.

## Telephone Access

### 1020.1 PURPOSE AND SCOPE

This policy establishes guidelines for permitting incarcerated persons to access and use telephones.

### 1020.2 POLICY

The Jail will provide access to telephones for use by incarcerated persons consistent with federal and state law. The Facility Manager or the authorized designee shall develop written procedures establishing the guidelines for access and usage (15 CCR 1067). All incarcerated persons will be provided a copy of the telephone usage rules as part of their incarcerated person orientation during the booking process.

### 1020.3 PROCEDURE

Incarcerated persons housed in general population will be permitted reasonable access to public telephones at scheduled times in the dayrooms for collect calls unless such access may cause an unsafe situation for the facility, staff, or other incarcerated persons. The Facility Manager shall ensure a notice is conspicuously posted near the phones, informing incarcerated persons that non-attorney calls may be monitored and recorded.

Incarcerated persons are not permitted to receive telephone calls. Messages will only be delivered in the event of a verified emergency.

In the event of a facility emergency, or as directed by the supervisor or the Facility Manager, all telephones will be turned off.

For security reasons, incarcerated persons who are awaiting transport to another facility or release to another agency are not permitted to use the telephones.

Teletypewriter or other communication devices (e.g., videophones, third-party communications assistant) will be made available to persons who are known to have, or are perceived by others as having, hearing or speech impairments to allow them equivalent telephone access as those without these disabilities (15 CCR 1067).

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 incarcerated person's file. The rules governing the use of the telephone will be provided to persons during orientation and posted near the telephones.

The staff should monitor the use of public telephones to ensure incarcerated persons have reasonable and equitable access and that the rules of use are observed. Any incarcerated persons refusing to cooperate with the telephone rules may have their call terminated, telephone privileges suspended, and/or incur disciplinary action.

Requirements relating to the use of telephones during booking and reception are contained in the Reception Policy.



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#### **1020.4 USE OF TELEPHONES IN HIGH-SECURITY OR ADMINISTRATIVE SEPARATION HOUSING**

Incarcerated persons who are housed in high-security or administrative separation may use the public telephones in the dayroom during the time allocated for that classification of incarcerated person to utilize that space. If portable telephones are available in the facility, persons who are housed in high-security or administrative separation units may have reasonable access to the portable telephones.

#### **1020.5 COURT-ORDERED TELEPHONE CALLS**

If a court order specifying free telephone calls is received by the facility, or a supervisor determines there is a legitimate need for a free telephone call for a specific incarcerated person, the supervisor may direct that a person use a facility telephone at no charge. Calls placed from a facility telephone should be dialed by a staff member. The staff shall be responsible for ensuring that the incarcerated person is not calling a number that has been restricted by a court order or by request of the recipient. Such a call shall be recorded to the same extent authorized for calls that are not court-ordered.

#### **1020.6 ATTORNEY-CLIENT TELEPHONE CONSULTATION**

At all times through the period of custody, whether the incarcerated person has been charged, tried, convicted, or sentenced, reasonable and non-recorded telephone access to an attorney shall be provided to the person at no charge to either the attorney or to the incarcerated person, in accordance with the Access to Courts and Counsel Policy.

#### **1020.7 TELEPHONE CONTRACTS AND CHARGES**

The Facility Manager or the authorized designee is responsible for ensuring that rates charged to incarcerated persons are similar to those charged to the general public and that incarcerated persons are afforded a range of feasible calling options.

## Visitation

### 1022.1 PURPOSE AND SCOPE

The purpose of this policy is to establish rules for visitation and to provide a process for incarcerated person visits and visitors. Visitation is a privilege and is based on space availability, schedules, and on-duty staffing.

#### 1022.1.1 DEFINITIONS

Definitions related to this policy include (Penal Code § 4032):

**In-person visit** - An on-site visit that may include barriers. In-person visits include interactions in which an incarcerated person has physical contact with a visitor, the incarcerated person is able to see a visitor through a barrier, or the incarcerated person is otherwise in a room with a visitor without physical contact. "In-person visit" does not include an interaction between an incarcerated person and a visitor through the use of an on-site two-way audio/video terminal.

**Video visitation** - Interaction between an incarcerated person and a member of the public through the means of an audio-visual communication device when the member of the public is located at a local detention facility or at a remote location.

### 1022.2 POLICY

It is the policy of the San Luis Obispo County Sheriff's Office to allow incarcerated person visitation, including video visitation when applicable, as required by law.

### 1022.3 PROCEDURES

The Office shall provide adequate facilities for visiting that include appropriate space for the screening and searching of incarcerated persons and visitors and storage of visitors' personal belongings that are not allowed in the visiting area.

The Facility Manager shall develop written procedures for incarcerated person visiting, which shall provide for as many visits and visitors as facility schedules, space, and number of personnel will reasonably allow, with no fewer visits allowed than specified by 15 CCR 1062 per week, by type of facility. The procedures are subject to safety and security requirements and should consider:

- The facility's schedule.
- The space available to accommodate visitors.
- Whether an emergency or other conditions justify a limitation in visiting privileges.
- Video visitation if applicable (Penal Code § 4032; 15 CCR 1062).

The visiting area shall accommodate incarcerated persons and visitors with disabilities. Visitors with disabilities who request special accommodations shall be referred to a supervisor. Reasonable accommodations will be granted to incarcerated persons and disabled visitors to facilitate a visitation period.

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Visitor logs and records shall be developed and maintained in accordance with established records retention schedules.

Court orders granting a special incarcerated person visitation are subject to county legal review and interpretation.

#### 1022.3.1 VISITOR REGISTRATION AND IDENTIFICATION

All visitors must register and produce a valid state, military, tribal, or other government identification. Identification will be considered valid for 90 days after expiration, provided the visitor has renewed the ID and has proof of the renewal.

- (a) The registration form must include the visitor's name, address, and the relationship to the incarcerated person.
- (b) A valid identification shall include the following:
  - 1. A photograph of the person
  - 2. A physical description of the person
- (c) An official visitor shall present proof of professional capacity. For example, attorney license/Supreme Court card, law enforcement identification, or a business card/letterhead of the business with the visitor's name.

Failure or refusal to provide a valid identification is reason to deny a visit.

#### 1022.3.2 VIDEO VISITATION NOT TO REPLACE IN-PERSON VISITATION

The Office may not substitute video visitation for in-person visitation to meet the requirements of 15 CCR 1062.

#### 1022.4 AUTHORIZATION TO SEARCH VISITORS

Individuals who enter the secure perimeter of this facility are subject to search if there is reasonable cause to believe the visitor has violated the law, is wanted by a law enforcement agency, or is attempting to bring contraband onto the facility property or into the facility. All searches shall be made in accordance with current legal statutes and case law.

The area designated for a visitor to be searched prior to visiting with an incarcerated person shall have a notice posted indicating that any cellular telephone, wireless communication device or any component thereof shall be confiscated for the period of the visitation and returned to the visitor upon departure from the facility, unless the wireless communication device or component is being held for evidence where the person has been cited for violation of Penal Code § 4576(a) (Penal Code § 4576(b)(3)).

Except otherwise authorized by law, or when authorized by either the Facility Manager or authorized designee, a person who possesses with the intent to deliver, or delivers, to an incarcerated person in the custody of San Luis Obispo Sheriff's Office any cellular telephone or other wireless communication device or any component thereof, including, but not limited to, a SIM card or memory storage device is guilty of a misdemeanor (Penal Code § 4576(a)).

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#### **1022.5 VISITING SCHEDULE**

The Facility Manager shall designate a person to develop a schedule for incarcerated person visitation that includes daytime, evening, and weekend hours. Each incarcerated person shall receive a copy of the visitation schedule in the incarcerated person handbook at orientation. The visiting hours will also be posted in the public area of the facility.

#### **1022.6 DENIAL OR TERMINATION OF VISITING PRIVILEGES**

The Facility Manager or the authorized designee is responsible for defining, in writing, the conditions under which visits may be denied.

Visitation may be denied or terminated by a supervisor if the visitor poses a danger to the security of the facility or there is other good cause (15 CCR 1062). Danger to the security of the facility or other good cause includes but is not limited to the following:

- (a) The visitor appears to be under the influence of drugs and/or alcoholic beverages.
- (b) The visitor refuses to submit to being searched.
- (c) The visitor or incarcerated person violates facility rules or posted visiting rules.
- (d) The visitor fails to supervise and maintain control of any minors accompanying the visitor into the facility.
- (e) Visitors attempting to enter this facility with contraband will be denied a visit and may face criminal charges.
- (f) The visitor is on felony probation or parole.
- (g) The visitor has been in custody in the previous 6 weeks.
- (h) The visitor has active warrants.
- (i) The visitor has any pending felony charges.

Any visitation that is denied or terminated early, on the reasonable grounds that the visit may endanger the security of the facility, shall have the actions and reasons documented. A copy of the documentation will be placed into the incarcerated person's file and another copy will be forwarded to the Facility Manager (15 CCR 1062).

#### **1022.7 GENERAL VISITATION RULES**

All visitors and incarcerated persons will be required to observe the following general rules during visitation:

- (a) A maximum of two adults and two children will be permitted to visit an incarcerated persons at any one time. Children visiting incarcerated persons must be deemed age appropriate by the parent or guardian accompanying the child. Where a dispute over children visiting occurs between the incarcerated person and the parent or legal guardian, the incarcerated person will be advised to use the court for resolution. Adults must control minors while they are waiting to visit and during the visit.
- (b) An incarcerated person may refuse to visit with a particular individual.

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- (c) Those incarcerated persons who are named as the restrained person in any restraining or other valid court order shall not be allowed visits from persons who are protected by the order.
- (d) Visitors must be appropriately attired prior to entry into the visitor's area of the facility.
- (e) Inappropriate clothing, such as transparent clothing, halter-tops, excessively tight or revealing clothing, hats and bandanas 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.
- (h) The facility is not responsible for lost or stolen items.
- (i) Food or drink is not permitted in the visitor's area.
- (j) Incarcerated persons will be permitted to sign legal documents, vehicle release forms or any other items authorized by the Correctional Sergeant. Transactions of this nature will not constitute a regular visit
- (k) Incarcerated persons are allowed two (2) one (1) hour visits per week.
- (l) Incarcerated persons and visitors may have one visit per day. Incarcerated persons are allowed to split the visit at the half hour between two adults if both adults sign up for the same visiting time.

A Correctional Sergeant may terminate visiting in the event the jail goes into lockdown, for an emergency or circumstances which would affect the safety and security of the facility. The Correctional Sergeant shall make a notation in the Correctional Sergeant's Post Log of the cancellation and a brief explanation as to why the cancellation occurred.

#### 1022.7.1 VISITING NOTIFICATION

- (a) Visiting check in will occur 30 minutes prior to the ensuing visiting hour.
- (b) Correctional Technicians will attempt to notify housing units of incarcerated persons needed for visiting not later than 15 minutes prior to the start of the visiting hour.
- (c) A Visiting List with the date, incarcerated person's name and housing location will be provided to the Intake Release Center.

#### 1022.8 SPECIAL VISITS

The Correctional Sergeant may authorize special visitation privileges, taking into consideration the following factors:

- The purpose of the visit
- The relationship of the visitor to the incarcerated person
- The circumstances of the visit

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- Distance traveled by the visitor

Whenever a special visit is denied, an entry into the duty log will be made. The entry will include the requesting visitor's name and the reason why the visit was denied.

#### 1022.8.1 HONOR FARM CONTACT VISIT

- (a) Honor Farm incarcerated persons are allowed one (1) three hour contact visit per week.
- (b) Visitor check in will occur in APS and can occur anytime during the three hours.
- (c) Kissing and embracing will be limited to momentary contact at greeting and farewell only.
- (d) Couples may hand hold on table tops only.
- (e) Once a visitor leaves the visiting area, they may only return at the Correctional Deputies discretion.
- (f) See Policy section 1022.7, General Visitation Rules, for approved items in visiting area.

#### 1022.8.2 DEPENDENTS VISITS

Contact visits between dependents and an incarcerated parent shall be made by court order. Visits will be scheduled at least two hours in advance and supervised by authorized individuals from the Department of Social Services or Child Welfare Services. Family members shall never act as the authorized "supervisor."

- (a) Visits will not be conducted within sight or sound of incarcerated persons other than the parent of the child(ren).
- (b) Visits will be limited to one (1) parent at a time.
- (c) There is no limit to the number of related children visiting a parent.
- (d) Visits will be a maximum of one hour.
- (e) Visits will be counted toward the incarcerated person's weekly visiting limits.
- (f) Visits are under indirect supervision of Sheriff's Office Staff.
- (g) Canceling of a visit will be in accordance with Policy Section 1022.6.

In the event a visit is canceled by a Correctional Sergeant, the agency noted on the court order will be notified. The Correctional Sergeant will document the cancellation in a Jail Incident Report.

#### 1022.8.3 HOSPITAL VISIT

Hospital visits must be approved by the Correctional Sergeant. Approval or denial of the hospital visit is at the discretion of the Correctional Sergeant. The Correctional Sergeant should take into consideration the incarcerated person's health status and classification when approving or denying the visit.

Visitors at the hospital are subject to the rules and guidelines of Policy Sections 1022.6 and 1022.7.

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#### 1022.8.4 OFFICIAL VISIT

Official visits are designated as a non-contact visit between an incarcerated person and physicians, psychiatrists, law enforcement agents, parole and probation officers.

- (a) Official visits will not count toward an incarcerated person's visiting time.
- (b) Official visits can be conducted 24 hours per day, seven days per week, except during lockdown hours.
- (c) Official visits are subject to visitor rules and guidelines of Policy Sections 1022.6 and 1022.7.

Correctional Technicians will check visitor's credentials to confirm an official visit can be authorized. The visitor shall sign the Official Visitor's Log upon entry and exit from the visiting areas.

#### 1022.9 ATTORNEY VISITS

Incarcerated persons shall have access to any attorney retained by or on behalf of the incarcerated person, or to an attorney the incarcerated person desires to consult, in a private interview room. Staff shall not interfere with, suspend or cancel official visits except in circumstances where the safety, security or good order of the facility is compromised (see the Access to Courts and Counsel Policy). Attorney visits may be suspended or denied during jail lockdown hours. Contact visits may occur between incarcerated persons and the following:

- Attorney of record and/or their representative (investigators, paralegals, law clerks, etc.)
- Psychiatrists and psychologists appointed by the court to conduct testing on behalf of the court.

#### 1022.9.1 LEGAL CONTACT VISIT GUIDELINES

Legal contact visits shall adhere to the following guidelines:

- Visits should be scheduled seven days in advance. Visits can be arranged by contacting the Custody Division Legal Clerk. Requests not received seven days in advance will be accommodated, if possible. Accommodation factors can include but are not limited to: contact room availability, staffing and workload factors.
- All attorneys and/or their representatives must be site cleared prior to the visit.
- Requests for contact visits may only be denied by the on-duty Correctional Sergeant. An attempt will be made to accommodate the visitor at a later time.
- The visitor being denied will be given a verbal reason for the denial. The on-duty Correctional Sergeant will document the denial in the Post Log.
- Attorneys requesting a contact visit on any civil matter will be approved on a case-by-case basis by the Jail Operations Lieutenant or their authorized designee.

#### 1022.9.2 LEGAL CONTACT VISIT RESTRICTIONS

Legal contact visits will be subject to the following restrictions:

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- (a) Attorneys and/or their representatives may not interview an incarcerated person who is not their client without express written permission from the incarcerated person's attorney of record or the court of jurisdiction. Written permission shall be on law firm letterhead and signed by the attorney of record. The letter must be given to the Correctional Technician at the time of the contact visit.
- (b) No purses or bags are allowed within the secure areas of the jail. Briefcases are allowed with only the necessary court documents, discovery materials, written or printed legal material. All items entering the jail are subject to search for contraband by jail staff.
- (c) No pens should be allowed within the security areas of the jail. Staff may provide attorneys with safety flex pens.
- (d) Unless pre-approved by the Jail Operations Lieutenant or authorized designee, all electronic devices are prohibited. This includes but not limited to: cell phones, cameras, recording devices, laptops and two-way radios.
- (e) Any approved electronic device will be subject to inspection prior to and at the conclusion of the visit.
- (f) Nothing shall be passed to the incarcerated person by the interviewer for the incarcerated person's retention, nor shall anything be passed from the incarcerated person to the interviewer for that person's retention. Doing so is punishable under *Penal Code §4570*.
- (g) Interviewers requesting to give incarcerated person written documents for their retention must notify jail staff. If the documents are not objectionable, the staff will allow the incarcerated person to receive and retain these documents. Any documents containing contraband (staples, paper clips, metal fasteners, etc.) will be refused.
- (h) Interviewers are subject to search before and after the interview.

#### **1022.10 EMPLOYEE/INCARCERATED PERSON**

The Custody Division shall allow visits between Sheriff's Office employees and an incarcerated relative of the first degree. A relative of the first degree shall be defined as a spouse, parent, child, sister, brother, grandparent or grandchild of the corresponding employee.

The following guidelines shall be followed for an employee/incarcerated person visit:

- (a) Employee/incarcerated person visits must be approved by the shift Correctional Sergeant prior to the visit.
- (b) If a Correctional Sergeant, Correctional Lieutenant or Correctional Captain would like to visit with an incarcerated person, the visit must be approved by their immediate supervisor.
- (c) Employee/incarcerated person visits do not count toward an incarcerated person's allotted visiting time per week.
- (d) Employee/incarcerated person visiting hours are twenty-four hours per day, seven days per week, except during jail lock-down hours and non-public visiting hours.
- (e) All visits will be non-contact visits and will be held in an Attorney Room.



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- (f) The visit will be documented in the shift Correctional Sergeant's log.
- (g) Visits will be conducted on the employee's off-duty time.

## Resources for Released Persons

### 1024.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the process of providing community resource information to any incarcerated person who is due for release after serving at least 30 days, in order to assist with the transition back into the community.

### 1024.2 COMMUNITY RESOURCES

The information packet with community resources should contain, at a minimum, the contact information for the following organizations and resources:

- Community health centers
- Employment centers
- Registry office to obtain an identification card
- Substance abuse and mental health providers
- Housing agencies
- Education agencies

Subject to the approval of the Sheriff or the Facility Manager, the staff or community providers may offer classes within the facility that are related to these community services.

Upon request, the office will provide the verification needed for a replacement California identification card, if applicable (Vehicle Code § 14902(g)).

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# Therapeutic Community Treatment Program

## 1026.1 PURPOSE AND SCOPE

It is the policy of this office to provide treatment services for inmates with substance abuse problems, including the provision of services for post-release continuity of care and support in the community.

### 1026.1.1 PHILOSOPHY

The Office seeks to provide services in cooperation with a therapeutic community treatment program, which supports the mission of public safety and community reintegration through evidence-based assessment, treatment and aftercare services.

## 1026.2 POLICY

The Sheriff should designate a supervisory member of the facility as the director of the therapeutic community treatment program, which includes substance abuse programs. The director, in cooperation with all custody personnel, the local alcohol and drug treatment centers, mental health authorities, schools, probation departments and courts will identify and monitor those inmates who have been placed into, or are eligible to be placed into, a therapeutic community treatment program.

Eligibility for participation will be based upon the following:

- (a) Substance abuse use or history
- (b) Positive drug screen on commitment
- (c) Willingness to voluntarily commit to the program
- (d) A mental health diagnosis that indicates suitability for participation

Each program applicant will be screened for mental health concerns and must be cleared for participation by the mental health staff.

### 1026.2.1 REFERRAL TO THE THERAPEUTIC COMMUNITY TREATMENT PROGRAM

Inmates may be referred to the therapeutic community treatment program through the program director, in consultation with qualified health care professionals, or by a recommendation of the courts.

### 1026.2.2 SCREENING PROCESS

Initial screening with the applicant will include:

- (a) A description of the program and its rules and procedures, such as assessments and alcohol and drug testing, and the responsibilities of the applicant.
- (b) A review of the applicant's history, which may include a standardized diagnostic needs assessment administered to determine the extent of the inmate's substance abuse or dependency, and of his/her mental health needs.

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- (c) Program objectives and goals as identified in an individualized treatment plan developed and implemented by a multidisciplinary clinical team that includes medical, mental health and substance abuse professionals.
- (d) Other assessments as determined by the program director.

#### **1026.3 PROGRAM OBJECTIVES**

The expected results of this program are:

- (a) To provide diagnosis and treatment plans, establish goals and objectives for the inmate, provide education and counseling, relapse prevention and discharge planning and transition services.
- (b) To provide a structured program to identify physical, social, medical, mental health, community and spiritual needs.
- (c) To provide linkage to community-based programs upon the inmate's return to the community.

#### **1026.4 RESPONSIBILITIES OF THE DIRECTOR**

The director of the program shall institute a procedure to assist in the treatment of inmates and will provide information related to the following:

- (a) A diagnosis of the inmate and his/her problem areas
- (b) Individual treatment and counseling plans with clearly defined treatment goals and objectives
- (c) Substance abuse education plan
- (d) Activities and education designed to prevent relapse after release
- (e) Treatment objectives that are sensitive to the various cultures represented in the inmate population
- (f) The utilization of self-help groups in support of treatment plans
- (g) Services offered to inmates before their release and transitional services to support continued care after release
- (h) Connections with community support and treatment services for continued care and sobriety after release

#### **1026.5 PROGRAM PARTICIPATION**

The therapeutic community treatment program is voluntary; participants must consent to program treatment services in advance of receiving the service. This program is focused on providing participants with the necessary knowledge, insight and skill for successful reentry into the community.

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##### **1026.6 DRUG AND ALCOHOL TESTING**

Program participants are expected to submit to random urinalysis. Failure to submit or a positive reading will result in termination from the program and possible disciplinary action.

##### **1026.7 PROGRAM INCENTIVES**

The director will develop program incentives designed to support and encourage success on the part of program participants. Incentives can include, but are not limited to:

- (a) Certificates of completion for satisfactory completion of the program.
- (b) Separate housing for program participants.
- (c) Early release from custody, if authorized by the sentencing court.

##### **1026.8 TERMINATION FROM THE PROGRAM**

Termination from the program may occur for the following reasons:

- (a) A participant's failure to comply with the responsibilities of the program is grounds for dismissal by the director at any point during the course of the program.
- (b) A participant may withdraw from the program by notifying any staff person verbally or in writing.
- (c) A participant may be terminated for any major institutional disciplinary violation if it is determined that the inmate is no longer suitable for participation in the program.

## **Incarcerated Person Work Program**

### **1026.1 PURPOSE AND SCOPE**

The purpose of this policy is to establish the guidelines and requirements for the Incarcerated Person Work Program. The Incarcerated Person Work Program allows incarcerated persons to improve and/or develop useful job skills, work habits, and experiences that will facilitate a successful transition back to the community.

### **1026.2 POLICY**

The San Luis Obispo County Sheriff's Office shall operate an Incarcerated Person Work Program in accordance with all applicable federal, state, or local work safety laws, rules, and regulations, and to the extent that the operation of incarcerated person work programs do not pose a risk to the safety of the staff, other incarcerated persons, or the public. This policy establishes the requirements, selection process, supervision, and training of persons prior to and after entering the facility's Incarcerated Person Work Program.

### **1026.3 WORK CRITERIA**

#### **1026.3.1 SENTENCED INCARCERATED PERSON WORK REQUIREMENTS**

All sentenced incarcerated persons who are physically and mentally able should work. Incarcerated persons shall not be required to perform work that exceeds their physical limitations. Incarcerated persons may be excused from work in order to maintain their participation in an educational, vocational, drug abuse treatment, or other program. The Office will abide by all laws, ordinances, and regulations when using incarcerated persons to work in the facility.

#### **1026.3.2 PRETRIAL AND UNSENTENCED INCARCERATED PERSON WORK REQUIREMENTS**

Pretrial and unsentenced incarcerated persons may volunteer to participate in the Incarcerated Person Work Program but shall not be required to participate in work beyond maintaining the immediate living area.

### **1026.4 INCARCERATED WORKER SELECTION**

The Incarcerated Person Work Program Coordinator shall be responsible for the selection and assignment of incarcerated persons to the various work assignments. The coordinator should solicit input from other custody staff in assisting with incarcerated person selection and assignment. Staff shall take into consideration the following eligibility criteria:

- (a) Incarcerated persons who have posed a threat in the past or have been charged with escape should be carefully screened for incarcerated person work projects.
- (b) The incarcerated person's charges and classification are such that the person will not pose a security risk to other incarcerated persons, staff, or the public.
- (c) The incarcerated person's capacity to perform physical tasks, including which tasks can be performed by the incarcerated person while pregnant, will match the job requirements.

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- (d) The incarcerated person is able to learn the necessary work routines.
- (e) The special interests, abilities, craft, or trade of the incarcerated person will benefit the work assignment.

Incarcerated persons 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 persons who work in the kitchen, around food products, or who serve meals to the incarcerated person population.

#### **1026.5 WORK ON PUBLIC PROJECTS**

Sentenced incarcerated persons may be assigned to public works projects with state, municipal and local government agencies, or to community service projects, with the approval of the Sheriff and in accordance with all applicable laws and regulations.

#### **1026.6 PROHIBITION OF NONPUBLIC WORK PROJECTS**

Work projects on behalf of any private individual or to an individual's private property are strictly prohibited and may constitute a violation of the law.

#### **1026.7 SUPERVISION OF INCARCERATED WORKERS**

Facility staff in charge of work programs or who provide supervision of incarcerated persons assigned to work crews should adhere to the following:

- (a) Incarcerated 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) Incarcerated workers should be provided with work breaks to allow them to take care of personal needs.
- (d) Incarcerated workers shall have access to nutritious meals and a reasonable amount of time to consume those meals during their work period.
- (e) Incarcerated persons who work shifts during the early morning or late-night hours should be provided with quiet space to allow for sleep during daytime hours.
- (f) Incarcerated workers shall not access incarcerated person records, incarcerated person monies, or commissary.
- (g) Incarcerated workers shall not participate in the maintenance of locking systems or other security detention devices.
- (h) The incarcerated person workday approximates the workday in the community.
- (i) Incarcerated person performance is regularly evaluated and recorded.
- (j) Incarcerated persons receive written recognition of the competencies they acquire.

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Incarcerated workers shall be under the direct supervision of the facility staff at all times and shall not be supervised by other incarcerated persons when they are on assignment through the Incarcerated Person Work Program.

Persons who are responsible for the supervision of incarcerated persons on work crews should receive training in basic areas of safety, security, and reporting procedures.

Disciplinary action for incarcerated worker misconduct shall adhere to the Discipline Policy.

#### **1026.8 INCARCERATED WORKER TRAINING**

Incarcerated persons who are assigned to work in any area that may require the handling of any chemicals or the use of any equipment shall receive training from the respective office supervisor prior to using the chemicals or equipment. Work-crew supervisors shall also train incarcerated workers on safety practices. Incarcerated persons should never be assigned to handle dangerous chemicals or equipment that normally require a level of expertise and competency beyond their demonstrated ability.

#### **1026.9 INCARCERATED WORKER INCENTIVES**

The Facility Manager is responsible for establishing a recognition program for incarcerated persons assigned to the Work Program. Recognition of incarcerated persons 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. Incarcerated person 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.



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## Pretrial Release Program

### 1029.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the value relating to inmate population management that the Office places on the Pretrial Release Program, and to acknowledge the commitment of staffing, space and equipment to ensure its success. This office is committed to the treatment of inmates with the intent of increasing the likelihood of a successful return to the community, while controlling program costs and maximizing organizational efficiency. Staffing costs typically represent the majority of the operating costs of such a program.

### 1029.2 POLICY

It shall be the policy of the San Luis Obispo County Sheriff's Office to commit resources to a Pretrial Release Program. The goals of the program are for inmates awaiting trial to secure or maintain gainful employment, to reduce costs to taxpayers for incarceration of the inmates, and to increase the likelihood of an inmate's successful return to the community.

The Facility Manager or the authorized designee shall be responsible for the staffing, space allocation and equipment requirements of the Pretrial Release Program. The following factors should be considered when selecting personnel for this assignment:

- Professional qualifications
- Accreditation status
- Client's ownership (e.g., public, private not-for-profit, private for-profit)
- The complexity of the client (more complex clients require higher staffing levels)

### 1029.3 STAFF RESPONSIBILITIES

Responsibilities of the staff members assigned to the Pretrial Release Program shall include the following:

- Supervision of inmates
- Assessment and selection of inmates considered for pretrial release
- Treatment programs and services
- Documentation and reports to the court
- Drug testing and other services, as directed by the court or other legal authority

Prior to the pretrial release hearing, staff members shall be responsible for collecting, verifying and reporting to the judicial officer information pertaining to the pretrial release of each individual who is charged with an offense. Information should include an assessment of the risk the individual may pose to any individual or to the community, and include a recommendation on whether to release the inmate and the conditions of a proposed release.

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Staff members shall also be responsible for assisting inmates in complying with the conditions of their release, monitoring their compliance and reporting to the court any apparent violations of release conditions.

#### **1029.4 PHYSICAL RESOURCES**

The facility shall provide adequate space and equipment for:

- Staff to interview inmates.
- The collection of urine specimens.
- Urinalysis and/or drug testing equipment.
- Group space/counseling space, if treatment services are offered. Spaces allocated for treatment services should protect confidentiality.

## Vocational Programs

### 1028.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for developing educational and vocational programs that are intended to provide work and learning opportunities for incarcerated persons.

### 1028.2 POLICY

It is the policy of the San Luis Obispo County Sheriff's Office to promote educational and vocational programs that provide work opportunities for incarcerated persons while supporting local public agency projects, non-profit projects or other organizations approved by the Sheriff or Undersheriff. activities that personally benefit individuals, businesses or other private entities are prohibited.

### 1028.3 PROGRAM GUIDELINES

Any vocational program is subject to the approval of the Facility Manager or the authorized designee.

Any program shall be subject to the following guidelines:

- (a) The program complies with all statutes, ordinances, regulations, labor agreements, permissions or restrictions relating to incarcerated persons whenever they are assigned to program projects.
- (b) There is an availability of incarcerated persons who, as a matter of classification, are deemed to be eligible for participation in the program. Programs will make efforts to offer placement to incarcerated persons.
- (c) The number of work stations available in the program area will determine the availability of opportunities to participate in the vocational program.
- (d) Staff assigned to manage the program should strive to develop work assignments that give incarcerated persons an opportunity to develop good work habits and attitudes that can be applied to jobs obtained after release.
- (e) Community input should be solicited and considered when developing vocational programs.
- (f) There shall be sufficient staff assigned to supervise incarcerated persons, work products and training of incarcerated persons.
- (g) Incarcerated persons shall receive appropriate training for the work assignment and the use of any related tools or equipment and training shall be documented.
- (h) The incarcerated persons 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. Evening shifts are permitted.

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- (i) Incarcerated persons performance while in the program shall be regularly evaluated and recorded. Poor performance in the program or violation of rules may render the incarcerated persons ineligible to participate in the program. Any violation of rules may result in disciplinary action that may include the loss of credits previously awarded for good behavior and work time. Incarcerated persons 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 San Luis Obispo County Sheriff's Office.
- (j) The working conditions for any incarcerated person must comply with all applicable federal, state or local work safety laws and regulations.

#### **1028.4 SELECTION PROCESS**

Participation in any vocational 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 incarcerated person desiring to participate in a vocational program is subject to the following:

- (a) The incarcerated person must submit to a screening process, including a criminal history check, to ensure his/her criminal history is compatible with work in non-secure areas.
- (b) The incarcerated person shall participate in a risk/ needs assessment administered by qualified staff. A Program Plan shall be developed based on the risk/ needs assessment and the incarcerated person will be expected to attend available programming that addresses their medium/ high risk areas.
- (c) Any incarcerated person considered for vocational programming who does not have a High School diploma or GED will be referred to the Educational Instructor and will participate in classes or individual instruction geared toward obtaining the appropriate certificate.
- (d) Have greater than 90 days on their sentence with 30 days available for program participation.
- (e) Submit to chemical testing at supervisor's request.
- (f) Meet Honor Farm housing guidelines and be fully sentenced by the courts all cases.
- (g) Complete educational and vocational goals and standards established by the supervisor in charge of the program.

#### **1028.5 RECORD KEEPING**

Record keeping shall be maintained in accordance with all applicable federal, state, and local laws and guidelines by the supervisor in charge of the program. Records kept will include material inventory, equipment service, vocational and safety training material and logs, project requests and project costs.

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##### **1028.6 GRAPHIC ARTS PROGRAM**

A Graphic Arts Project Request Form shall be completed for all jobs and approval by the Facility Manager or designee. The project request will include a detailed project description, project costs and billing information. Sheriff's Office needs will take priority over other agencies and will be approved based on departmental need. Personal requests are not considered departmental need.

## Work Release Program

### 1031.1 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.

### 1031.2 POLICY

It is the policy of this office to operate a voluntary Work Release Program to provide inmates with opportunities to secure or maintain employment, support families, assist in the payment of fines and penalties to the court and promote a successful return to the community (Penal Code § 4024.2(a)).

Release programs shall be conducted in accordance with state and local guidelines. In cases of pretrial release, the courts may have jurisdiction over release decisions.

### 1031.3 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 Facility Manager or the authorized designee has sole authority to approve participation in the program for each inmate, and is responsible for the overall conduct and 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.

#### 1031.3.1 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.

#### 1031.3.2 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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The program staff shall provide each employer with the facility's contact information, including the contact person and telephone number, and should be instructed 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.

#### 1031.3.3 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

#### 1031.3.4 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 work place, transportation) must be approved in advance by the Facility Manager or the authorized designee.

#### 1031.3.5 FINANCIAL OBLIGATIONS

All inmates who participate in the Work Release Program shall ensure that the appropriate funds are deposited into their inmate account. Funds from the inmate account will be subtracted for room and board, program drug testing, booking fees, etc. Fines to the court, victim restitution,

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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.

#### 1031.3.6 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.

#### 1031.3.7 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.

#### 1031.3.8 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.

#### **1031.4 RECORDS**

The following records shall be maintained by the Facility Manager 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



## Incarcerated Person Program Credit Reduction

### 1029.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines and maintain procedures governing the credit reduction program pursuant to California Penal Code section 4019.4. Incarcerated persons who successfully complete specific performance objectives for approved rehabilitation programming will be eligible for credit reductions.

### 1029.2 DEFINITIONS

Rehabilitation Programming – Classes that provide a course of instruction that can have a positive effect on a person's life (e.g. Academic programs, vocational programs, vocational training, substance abuse programs, cognitive behavioral therapy, etc.).

Program Credits –A reduction in the sentence for incarcerated persons in the San Luis Obispo County Jail who complete eligible programs.

### 1029.3 GENERAL INFORMATION

- A. Under California Penal Code Section 4019.4, incarcerated persons who successfully complete academic programs, vocational work programs, vocational training, substance abuse programs, and core programs such as anger management and social life skills will be eligible to receive up to six weeks of credits per year for each milestone completion.
- B. Six weeks is the maximum time credit to be earned during a continuous confinement.
- C. Incarcerated persons will have reasonable access to qualifying programs in a manner consistent with institutional security, available resources, program guidelines, and standards established by the San Luis Obispo County Sheriff's Office.

### 1029.4 GUIDELINES

- (a) The establishment of the program credit policy does not automatically create a "right" to participate in rehabilitative programs on the part of the incarcerated persons. The availability of programs will continue to be subject to the availability of adequate funds, facilities and trained staff/instructors. Participation will also be determined by the individual incarcerated person's performance, discipline history, behavior, housing location and classification. Programs are also limited by the number of participants who may attend which will also affect participation. Program credit is a privilege, not a right.
- (b) Unsentenced and sentenced incarcerated persons may participate in eligible programs.
- (c) Program credits will only be applied to incarcerated persons sentenced to more than 179 days in the San Luis Obispo County Jail. Consecutive sentences totaling more than 179 will be eligible for milestones. Concurrent sentences will not be totaled together.

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- (d) Incarcerated persons dropped from any program due to disciplinary reasons will lose all time credit earned up to that point.
- (e) Program credits are not retroactive, and credit will not be given for program completions during a previous incarceration.
- (f) Incarcerated persons shall not be eligible for program credits that result in an inmate being overdue for release.
- (g) Credits shall not be awarded for repeating completed classes during current sentence.
- (h) If an incarcerated person is court-ordered to attend a program, no program credits will be awarded for that program.
- (i) Disciplinary issues during the class may result in removal from class and a loss of credits.
- (j) Incarcerated persons may be removed from class for the following, but not limited to: Non-participation, non-excused absences, violation of rules and regulations, disruptive behavior in class, cause at request of the instructor(s), and being moved out of the housing unit where the program is being conducted.
- (k) Excused absences (court, medical appointments, attorney visits, etc.) will not disqualify an incarcerated person from receiving program credits.
- (l) Program credits earned may be reduced by the Classification Unit through the disciplinary process; in accordance with policy 600 Discipline.
- (m) Incarcerated persons who have already obtained a high school diploma, passed a GED test or high school equivalency exam are not eligible to receive program credit for passing the high school equivalency exam in the San Luis Obispo County Jail.
- (n) The Program Credit Matrix may change at the discretion of the Jail Programs Unit and additional programs may be added as they become available or programs may be removed if they are no longer offered or deemed worthy of program credits.

#### **1029.5 PROCEDURES**

##### **PROCEDURES**

###### **A. INCARCERATED PERSON RESPONSIBILITIES**

- (a) When each program starts, the incarcerated persons will be provided a gold attendance sheet with their name and incarcerated person identification number provided at the top of the sheet.
- (b) The incarcerated persons are responsible for bringing the attendance sheet with them to each class.
- (c) The incarcerated persons will record the date of the class each time, and the instructor will stamp and verify their attendance for each day of attendance.
- (d) If incarcerated persons are provided a graduation certificate those are to be kept by the incarcerated persons along with the attendance sheet.

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- (e) Upon being sentenced to more than 179 days the incarcerated person will send all completed attendance sheets and graduation certificates with a request slip to the Jail Programs Unit for application of program credits.

#### B. JAIL PROGRAM UNIT (JPU) RESPONSIBILITIES

- (a) The Program Manager or Jail Program Sergeant, upon receiving attendance sheets and graduation certificates, will verify the incarcerated person is sentenced to more than 179 days in San Luis Obispo County Jail. If the incarcerated person does not meet the criteria the attendance sheets and graduation certificates will be returned to the incarcerated person.
- (b) The Program Manager or Jail Program Sergeant will verify the program is eligible for program credits with the Program Credit Matrix.
- (c) If criteria is met, the Program Manager or Jail Program Sergeant will verify the attendance sheets and graduation certificates with the Jail Programs Database for accuracy.
- (d) A Program Credit Worksheet will be completed by the Program Manager or Jail Program Sergeant.
- (e) The Program Credit Worksheet needs to be signed by one of the following: Jail Program Sergeant, Correctional Sergeant or Correctional Lieutenant.
- (f) The signed Program Credit Worksheet will be delivered to the Correctional Technician in Booking.
- (g) JPU will send out weekly email to necessary parties of approved incarcerated person credit reductions.

#### C. CORRECTIONAL TECHNICIAN RESPONSIBILITIES

- (a) Upon receiving the Program Credit Worksheet, the Correctional Technician working Booking, will make a copy of the form and place it in the Classification mailbox.
- (b) The Correctional Technician will enter the time credits into the Jail Management System and update the release date.
- (c) The Correctional Technician will place the original Program Credit Worksheet in the Booking Jacket.
- (d) If the incarcerated person is serving time concurrent with another county, the Correctional Technician will notify that county with the updated release date.

## Alternative Sentencing Program

### 1030.1 PURPOSE AND SCOPE

The purpose is to establish the guidelines and requirements for the Alternative Sentencing Program and offer offenders sentenced to the County Jail an opportunity to serve their court ordered sentence in a program as an alternative to physical custody. The Program allows eligible inmates an opportunity to maintain employment, support families and facilitate a successful return to the community.

### 1030.2 POLICY

It is the policy of this office to operate a voluntary Alternative Sentencing Program to provide incarcerated persons 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)). The Correctional Deputies assigned to the Alternative Sentencing Unit shall coordinate the Home Detention Program (HDP), Alternative Work Program (AWP), and Sheriff's Parole (SP).

Release programs shall be conducted in accordance with state, local guidelines and Sheriff's Office Operational Directives. In cases of pretrial release, the courts may have jurisdiction over release decisions.

### 1030.3 ALTERNATIVE SENTENCING PROGRAM

Any incarcerated person who has met the eligibility requirements and received approval may participate in the program.

The Facility Manager or the authorized designee has sole authority to approve participation in the program for each incarcerated person and is responsible for the overall conduct and administration of the Alternative Sentencing Program.

#### 1030.3.1 ELIGIBILITY

In order to be eligible for the Alternative Sentencing Program, an incarcerated person must submit an application and meet the following minimum qualifications:

- Sentenced by the courts.
- Classified as minimum security/low risk incarcerated person as determined by the Alternative Sentencing Coordinator after a background investigation and, if necessary, an in-person interview.
- No outstanding warrants, wants or detainers.

Incarcerated persons 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.

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##### 1030.3.2 STAFF RESPONSIBILITY

Assignment to the Alternative Sentencing Programs Unit will necessitate that Correctional Deputies may work alone in the field. Officer safety dictates that no unnecessary risks be taken.

- Correctional Deputies will not respond to law enforcement calls or activities unless directed to do so or there is threat of imminent harm to another law enforcement official.
- While working in the field, the Correctional Deputy will carry a duty weapon.
- Use of the Sheriff's Office radio system will comply with *Lexipol Policy 802, Communication Operations*.
- All Correctional staff working the Alternative Sentencing Unit who have field contact with incarcerated persons participation in Home Detention, Sheriff's Parole and Alternative Work Programs shall follow *Lexipol Policy 450, Use of Audio/Video Recorder*.
- While driving a county vehicle, the Correctional Deputy will follow the *County Vehicle Use Policy of the County Code Section 2.84.010*.
- Correctional Deputies assigned to the Alternative Sentencing Programs Unit are authorized to wear civilian clothes in accordance with *Lexipol Policy 1046, Uniform Regulations*.
- Random AWP work site and HDP home inspections shall be performed regularly.

##### 1030.3.3 HOME DETENTION PROGRAM (HDP)

Approved applicants may be assigned to the Home Detention Program. Generally, applicants are sentenced to a minimum of twenty (20) days in custody with a maximum of three hundred sixty-four (364) days in custody.

##### 1030.3.4 PROGRAM CONFLICTS

The Alternative Sentencing Program staff shall make every attempt to ensure the incarcerated person's work schedule does not conflict with their required participation in treatment programs at the facility.

##### 1030.3.5 DRUG TESTING

Random and scheduled drug testing shall be conducted on all incarcerated persons participating in the Alternative Sentencing Program. Any positive results may cause the incarcerated person's disqualification from the program, as well as disciplinary sanctions or criminal charges, if warranted.

##### 1030.3.6 APPEALS

Applicants that are denied, as well as participant removals, must be informed of such action in writing detailing the reason for denial or removal. The notice must include the individual's right to appeal the decision. The appeal process shall include three levels:

- Honor Farm/ ASU Correctional Sergeant
- Support Services Lieutenant

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- Correctional Captain
- Undersheriff/ Sheriff (final)

#### **1030.4 RECORDS**

The following records shall be maintained by the Facility Manager or authorized designee on all incarcerated persons participating in the Alternative Sentencing Program:

- (a) All contacts between the staff and employers prior to releasing incarcerated persons to work and confirming all employment information
- (b) All daily logs of time worked
- (c) All denied applications
- (d) All appeals
- (e) All Alternative Sentencing Programs removals

## Religious Programs

### 1031.1 PURPOSE AND SCOPE

This policy provides guidance regarding the right of incarcerated persons to exercise their religion and for evaluating accommodation requests for faith-based religious practices of incarcerated persons (15 CCR 1072).

#### 1031.1.1 DEFINITIONS

Definitions related to this policy include:

**Ministry-** The person(s) appointed by the Facility Manager to oversee and direct the Jail Ministry and religious programs.

**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 incarcerated person'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 incarcerated person in a position of having to choose between following the precepts of his/her religion and forfeiting benefits otherwise generally available to other incarcerated persons, 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 incarcerated person to substantially modify their behavior in violation of their beliefs.

### 1031.2 POLICY

This office permits incarcerated persons to engage in the lawful practices and observances of their sincerely held religious beliefs consistent with the legitimate penological objectives of the facility. Facility staff will not allow their personal religious beliefs to influence them in the daily management of the incarcerated person population, particularly as it relates to religious practices. This office shall not show favoritism or preference to any religion and will not discriminate or retaliate against any incarcerated person for participating or not participating in any religion or religious practice. Incarcerated persons are not required to participate in religious programs or activities.

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##### **1031.3 MINISTRY**

The Facility Manager shall appoint an individual to serve as the minister to coordinate religious activities in the facility. The minister shall be responsible for assisting the Facility Manager with planning, directing and supervising all aspects of the religious program. The minister may be responsible for duties including, but not be limited to:

- (a) Coordination of religious services.
- (b) Maintaining a list of accepted religious practices that have been approved by the Facility Manager and ensure the current list is available to the staff.
- (c) Approval and coordination of training lay clergy and religious volunteers.
- (d) Providing or arranging for grief counseling for incarcerated persons.
- (e) Distribution of a variety of religious texts.
- (f) Developing and maintaining liaison with a variety of religious faiths in the community.
- (g) Making reasonable efforts to enlist religious leaders from outside the community as necessary.
- (h) Seeking donations for religious programs from the community, when appropriate.
- (i) Working with incarcerated person families when requested.
- (j) Providing guidance to the Sheriff and Facility Manager on issues related to religious observance.

##### **1031.4 RELIGIOUS BELIEFS AND ACCOMMODATION REQUESTS**

Incarcerated persons are not required to identify or express a religious belief. An incarcerated person may designate any belief, or no belief, during the intake process and may change a designation at any time by declaring their religious belief in writing to ministry. Incarcerated persons seeking to engage in religious practices shall submit a request through the established process. Requests to engage in practices that are accepted practices should be granted. Requests to engage in religious practices that are not accepted shall be processed as provided in this policy.

All requests for accommodation of religious practices shall be treated equally, regardless of the religion that is involved. Equal and consistent treatment of all religions and religious beliefs shall not always require that all incarcerated persons of the same religion receive the same accommodations. Requests for accommodation of religious practices shall be submitted to the Jail Programs Sergeant. In determining whether to grant or deny a request for accommodation of a religious practice, the Jail Programs Sergeant will work with ministry to determine the sincerity of the religious claim of an incarcerated person. 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.

The Jail Programs Sergeant who does not grant the accommodation, either in part or in full, should promptly forward the request to the Correctional Lieutenant, who, after consultation with legal counsel as appropriate, should make a determination regarding the request within 10 days following the incarcerated person's request.



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A Correctional Lieutenant who does not grant an accommodation, either in part or in full, should forward the request to the Facility Manager with the basis for the denial within 14 days of the incarcerated person's original request being made. The Facility Manager or the authorized designee will review the denial and respond to the requesting incarcerated person as soon as reasonably practicable.

The Facility Manager shall be informed of all approved accommodations. The Jail Programs Sergeant should make any necessary notifications to staff as necessary to meet an approved accommodation.

All incarcerated person requests for religious accommodations and related determinations shall be fully documented in the incarcerated person's record.

#### **1031.4.1 SUSPENSION OR REVOCATION OF ACCOMMODATIONS**

In an emergency or extended disruption of normal facility operations, the Facility Manager may suspend any religious accommodation. The Facility Manager may also revoke or modify an approved religious accommodation if the accommodated incarcerated person violates the terms or conditions under which the accommodation was granted.

#### **1031.4.2 APPEALS OF SUSPENSION OR REVOCATION OF ACCOMMODATIONS**

Incarcerated persons may appeal the Facility Manager's denial, suspension or revocation of an accommodation through the appeal process.

#### **1031.5 DIETS AND MEAL SERVICE**

The Facility Manager should provide incarcerated persons 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 Jail Programs Sergeant shall provide a list of incarcerated persons authorized to receive religious diets to the food services supervisor. The food services supervisor shall establish a process for managing religious meal accommodations.

##### **1031.5.1 RELIGIOUS DIET APPLICATION**

Incarcerated persons who desire a religious diet shall submit a Request Slip or automated request, which shall be forwarded to the Jail Programs Unit. The Jail Programs Sergeant will supply the incarcerated person with a Religious Diet Request Form and a Religious Diet Verification Form.

- (a) The incarcerated person shall send the Religious Diet Verification Form to their religious organization requesting verification of their participation in a particular religion.
- (b) The accommodation for a religious diet will not be accepted until a completed Religious Diet Verification Form is approved by a Correctional Lieutenant.

Once the Religious Diet Verification Form is approved, The Jail Programs Sergeant assigned to the Jail Programs Unit will complete the Religious Diet Agreement Form and have the incarcerated

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person initial it. The Correctional Sergeant will then notify the Food Services Supervisor of the dietary change.

#### 1031.5.2 RELIGIOUS DIET REMOVAL

Any incarcerated person on a religious diet who is straying from the approved special diet may be removed under the following conditions:

- (a) The Correctional Deputy finds that an incarcerated person is consuming food that is not prescribed under the approved religious diet.
- (b) A *Warning of Non-Compliance with Religious Diet Form* has been completed and forwarded to the Correctional Sergeant assigned to the Jail Programs Unit.
- (c) The Correctional Sergeant has interviewed the incarcerated person and recommended to the Correctional Lieutenant the incarcerated person be removed from the religious diet.

The Correctional Lieutenant will make the final decision of whether or not to remove the incarcerated person from the religious diet.

#### 1031.6 HAIRSTYLES AND GROOMING

Unless it is necessary for the health and sanitation of the facility, incarcerated persons 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 incarcerated person whose appearance is substantially altered due to changes in facial hair or hair length may be required to submit to additional identification photographs.

#### 1031.7 RELIGIOUS TEXTS

Religious texts may be provided to the requesting incarcerated person, if available and if the texts do not pose a threat to the safety, security and orderly management of the facility. If a particular text is not available, an incarcerated person may be directed to have one purchased and sent in to the facility or Jail Program Sergeant. Ministry should also make a good faith effort to obtain the requested text.

#### 1031.8 UNAUTHORIZED PRACTICES OR MATERIAL

The following list, which is not intended to be exhaustive, includes materials or practices that shall not be authorized:

- (a) Animal sacrifice
- (b) Language or behaviors that could reasonably be construed as presenting a threat to facility safety or security
- (c) Self-mutilation
- (d) Use, display or possession of weapons

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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

#### **1031.9 GROUP RELIGIOUS SERVICES**

Group religious services may be allowed after due consideration of the incarcerated person'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).

#### **1031.10 RELIGIOUS SYMBOLS AND IMPLEMENTS**

Religious symbols and implements used in the exercise of religion should generally be allowed unless the symbol or implement poses a threat to the safety and security of the facility. Alternatives to the provision of religious symbols and implements may be considered when security, safety or efficient operations may be jeopardized (e.g., substitution of a towel in lieu of a prayer rug).

#### **1031.11 RELIGIOUS GARMENTS AND CLOTHING**

Incarcerated persons 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 incarcerated persons and maintain security.

Head coverings shall be searched before being worn in the housing areas of the facility and shall be subject to random searches for contraband. Personal head coverings should be exchanged in favor of office-supplied head coverings when available and appropriate.

Incarcerated persons 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 incarcerated person'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 incarcerated person's need for religious attire, while meeting the security needs of the facility.

#### **1031.12 FAITH- AND MORALS-BASED COUNSELING**

The Facility Manager shall be responsible for establishing a plan for incarcerated persons to receive faith- and morals-based counseling from ministry or religious volunteers. Incarcerated persons should be reasonably accommodated, including reasonable access to clergy members

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and spiritual advisers, volunteer religious organizations, faith- and morals-based programs and other secular volunteer programs.

No incarcerated person shall be required to participate in any such program.

#### **1031.13 SPACE AND EQUIPMENT FOR RELIGIOUS OBSERVANCES**

The Facility Manager shall ensure that there is adequate work space, equipment and furnishings for ministry to serve the incarcerated person 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 incarcerated persons 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.

#### **1031.14 COMMUNITY RESOURCES**

Ministry may minister his/her particular faith and any other similar faiths to incarcerated persons but should also establish contacts with clergy of other faiths, who can provide services to incarcerated persons of other religious denominations.

Whenever ministry is unable to represent or provide faith-based services to an incarcerated person, a religious leader or other volunteer from the community should be sought to help provide services. Individuals providing faith-based services must possess the appropriate credentials from the recognized leadership of the particular faith. All faith-based services provided through community resources should be supervised by ministry. 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.

Ministry, in cooperation with the Facility Manager or the authorized designee, shall develop and maintain communication with faith communities. Ministry shall review offers to donate equipment or materials for use in the religious program and shall approve these offers when appropriate. All communication efforts should be documented and retained in accordance with established records retention schedules.

#### **1031.15 TRAINING**

The Office shall provide training to facility staff on the requirements of this policy.

The Office shall also provide training in safety and security to ministry. Ministry shall approve and train lay and clergy volunteers from the faiths represented in the incarcerated person population. This includes the preparation of a training curriculum, as well as the development and maintenance of training records.

## Chapter 11 - Facility Design

## Space and Environmental Requirements

### 1100.1 PURPOSE AND SCOPE

This policy describes the desired space and environmental requirements for the physical plant.

### 1100.2 POLICY

It is the policy of this office to comply with federal and state laws, codes and correctional standards in matters relating to the jail space and environmental requirements. Any designs for renovations, modifications, additions or new construction within the facility should be in compliance with federal and state laws, codes and jail standards.

Planned designs for renovations, modifications, additions or new construction within the facility should facilitate continuous personal contact and interaction between the custody staff and incarcerated persons. This contact should be by direct physical observation of all cells, dayrooms and recreation areas. Electronic surveillance may be used to augment the observation of incarcerated persons but shall not be used as a substitute for personal contact and interaction.

All parts of the facility that are accessible to the public should be accessible to and usable by disabled persons.

### 1100.3 SPACE REQUIREMENTS

Except for emergency accommodations of a limited duration, all areas in the physical plant shall conform to building and design requirements contained in federal and state law, codes and minimum jail standards as required for their intended design and use. Areas that are repurposed for other than their original intended use shall likewise comply with all building design requirements for the new purpose.

### 1100.4 ALTERNATE APPROVED CAPACITY

If needed, the Facility Manager may base the approved capacity on an alternate method of calculation as provided in the jail standards. This alternate method allows capacity to be based on overall living space available to incarcerated persons, adjusted for the time incarcerated persons actually have access to any specific areas. If this method is selected, the Facility Manager, together with City or County officials, should develop a plan to bring the facility into agreement with the space-related standards within a five-year period.

### 1100.5 DETENTION HARDWARE

All locks, detention hardware, fixtures, furnishings and equipment shall have the proper security value for the areas in which they are used. The use of padlocks in place of security locks on cell or incarcerated person housing unit doors is generally prohibited, as unauthorized locking mechanisms may pose a significant threat to the safety and security of the facility in the event of an emergency.

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#### **1100.6 ENVIRONMENTAL REQUIREMENTS**

All occupied areas of the physical plant shall conform to the building and design requirements contained in federal and state law, codes and jail standards with respect to light, air and noise level.

##### 1100.6.1 LIGHTING LEVELS

Lighting throughout the facility shall be sufficient for staff and incarcerated persons to perform necessary tasks. Night lighting levels should permit adequate illumination for supervision but should not unnecessarily interfere with the ability of incarcerated persons to sleep.

##### 1100.6.2 NATURAL LIGHT

All incarcerated person living areas should provide visual access to natural light, unless prohibited by security concerns.

##### 1100.6.3 NOISE LEVEL

Noise levels at night should be sufficiently low to allow incarcerated persons to sleep. Nothing in this policy is intended to limit or impair in any way staff's ability to monitor the jail in a manner that is consistent with safety and security and good correctional practices.

##### 1100.6.4 VENTILATION

The ventilation system shall be sized and calibrated to supply fresh or circulated air in accordance with federal and state laws, codes and jail standards. Toilet rooms and cells with toilets shall be calibrated to have no less than four exchanges of air per hour, unless local codes require a different number of air exchanges.

Other than an emergency situation, incarcerated persons or jail staff shall not adjust or restrict the ventilation systems without the express permission of the supervisor. Any adjustments made to the ventilation system shall only be allowed for the duration of the emergency or until qualified maintenance personnel can adjust or repair the ventilation system.

##### 1100.6.5 TEMPERATURE LEVELS

Temperature and humidity levels shall be mechanically maintained at a level established by facility maintenance personnel and deemed comfortable and cost efficient.

Staff shall immediately contact facility maintenance in the event that temperatures or humidity levels become uncomfortable.

##### 1100.6.6 CELL FURNISHINGS

Each incarcerated person housed in this facility shall be provided with the following items:

- A sleeping surface and mattress at least 12 inches off the floor
- A writing surface and seat

#### **1100.7 DAYROOMS**

Dayrooms shall be equipped with at least one shower for every 20 inmates or fraction thereof, and tables and sufficient seating for all incarcerated persons at capacity. Where incarcerated persons

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do not have continuous access to their cells, dayrooms shall also equipped with one toilet, an immediate source of fresh potable water and lavatory with hot and cold water for every 10 inmates or fraction thereof.

#### **1100.8 JANITOR CLOSETS**

Janitor closets shall be located near or inside each housing unit. Each janitor closet should contain a sink and the necessary cleaning implements. Access to the janitor closets shall be controlled and supervised by the staff. Only incarcerated persons with an appropriate classification status shall be allowed access to the janitor closets, and then only under the supervision of staff.

#### **1100.9 EMERGENCY POWER**

The facility shall be equipped with a sufficient emergency power source to operate communications, security and alarm systems in control centers, and emergency lighting in corridors, stairwells, all incarcerated person housing areas, security control points and audio-visual monitoring systems.

#### **1100.10 NEW CONSTRUCTION AND RENOVATION**

In the case of partial renovation of an existing facility, it is intended that these standards should apply only to the part of the facility being renovated. The remainder of the facility would be subject to the existing standards.



## Smoking and Tobacco Use

### 1102.1 PURPOSE AND SCOPE

This policy establishes limitations on the use of tobacco products by employees and others while on-duty or while in San Luis Obispo County Sheriff's Office facilities or vehicles.

### 1102.2 POLICY

The San Luis Obispo 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 San Luis Obispo County Sheriff's Office to prohibit the use of tobacco by employees while on-duty or at any time the employee is acting in an official capacity for the Office.

### 1102.3 EMPLOYEE USE

Tobacco use by employees is prohibited any time employees are in public view representing the Office.

Smoking and the use of other tobacco products is not permitted inside any county facility, office or vehicle.

It shall be the responsibility of each employee to ensure that no person under his/her supervision smokes or uses any tobacco product inside county facilities and vehicles.

### 1102.4 ADDITIONAL PROHIBITIONS

Smoking and use of other tobacco products is not permitted inside office facilities or any office vehicle, or any other county building (Labor Code § 6404.5).

No person shall smoke tobacco products within 20 feet of a main entrance, exit or operable window of any public building, including any office facility or a building on the campuses of the University of California, California State University and the California community colleges, whether present for training or any other purpose (Government Code § 7596 et seq.).

## Control Center

### 1104.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for a control center for monitoring and coordinating the facility security, safety and communications.

### 1104.2 POLICY

It is the policy of this office to maintain a control center, designated as Central Control, which shall be secure and staffed 24 hours each day to monitor and coordinate security, safety and communications.

### 1104.3 COMMUNICATIONS AND MONITORING CAPABILITIES

Central Control shall have multiple means of direct communication capabilities with all staff control stations in incarcerated person housing areas, including telephone, intercom or radio.

The Central Control staff shall be responsible for monitoring fire, smoke and life safety alarms and shall have the means to summon assistance in the event of an emergency.

### 1104.4 POST ORDERS

Comprehensive post orders for every correctional deputy position shall be developed. Copies of the orders should be maintained at each post. Daily activities and procedures should be incorporated into post orders including, but not limited to, safety checks, head counts, meals, sick call, recreation, clothing exchange, mail distribution and response to emergencies, such as fires, natural disasters and criminal acts.

### 1104.5 TRAINING

The Training Coordinator shall ensure that all staff members assigned to posts are properly trained to perform all duties and responsibilities described in the post orders. This is particularly true in fire, life safety and the emergency response procedures that have been implemented by the Facility Manager. 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 employee's training file and retained in accordance with established records retention schedules.

## Crowding

### 1106.1 PURPOSE AND SCOPE

One of the determining factors in maintaining a safe and secure jail is to limit the incarcerated person population to the number of beds constructed in each incarcerated person classification level. Occasionally, emergencies occur that will require the jail to exceed its approved bed capacity. This policy establishes the approved bed capacity of the facility, addresses temporary population excess and provides a plan for gathering statistics and projecting long-term space needs via a jail needs assessment.

### 1106.2 POLICY

It is the policy of the San Luis Obispo County Sheriff's Office to manage the incarcerated person population, to the extent as is reasonably possible to avoid exceeding the facility's approved bed capacity. The approved bed capacity of this facility is 797. The Sheriff is responsible for ensuring that the number of incarcerated persons does not exceed the approved bed capacity.

The facility has a sufficient number of housing units in an appropriate configuration so that incarcerated persons 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 incarcerated person 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 incarcerated person population remains over capacity or continues to increase, a crowding committee should be formed to examine any and all methods to ensure that the facility population is reduced and remains within the approved bed capacity.

### 1106.3 INCARCERATED PERSON POPULATION REPORTS

The Operations Correctional Lieutenant or the authorized designee is responsible for ensuring that detailed daily logs of the facility's incarcerated person 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 incarcerated persons by categories of male, female and juvenile as of midnight of each day. The number of incarcerated persons occupying holding cells shall also be counted at midnight each day. An incarcerated person population report summarizing this information shall be created daily and distributed to the Sheriff, Undersheriff and the Correctional Captain. The Correctional Captain or their authorized designee, shall provide the Board of State and Community Corrections with applicable incarcerated person demographic information as described in the Jail Profile Survey (15 CCR 1040).

## Attachments



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