

# Mason County Sheriff's Office

## Mason County SO Custody Manual

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### **CORRECTIONS DIVISION PURPOSE AND MISSION**

#### Corrections Division Purpose and Mission

Mission Statement: Together; maintain custody, security, and control in a safe, efficient and constitutional manner.

To accomplish the above, we will hire and retain good people, provide quality training, policy, leadership, supervision, and discipline.

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### **CORRECTIONS DIVISION GOALS AND OBJECTIVES**

#### Corrections Division Goals and Objectives

The goal of the Mason County Corrections Division is to together; maintain custody, security, and order in a safe, efficient, and constitutional manner.

The objectives of the Mason County Corrections Division is to operate a Corrections Facility which is safe, efficient, and effective.

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### **CORRECTIONS DIVISION CORE VALUES**

Core Values are guiding principles for realizing our vision and accomplishing our mission.

- Professionalism- I will always be professional in the performance of my duties. My physical appearance, dress, equipment, and conduct will positively reflect on the department at all times. I am also committed to keeping myself informed on current laws, policies and best practices. I further recognize that continued professional development will be accomplished through quality recruitment, education, and training.
- Integrity-I will be absolutely honest while employed with the Mason County Sheriff's Office. As a community role model this includes all of my activities on and off duty. The citizens of our county have entrusted us with sacred authority with the expectation that we will always do what is right in all personal and professional matters.
- Accountability-I am accountable for my personal and professional actions on a daily basis. I am accountable to ensure my job performance reflects well on the Mason County Sheriff's office, my fellow employees and the public. I recognize that my accountability incorporates qualities of self-restraint and the pursuit of excellence. I am also accountable for my conduct off duty so as to reflect positively on the Mason County Sheriff's Office.
- Respect- I will demonstrate respect for everyone I come into contact with in the course of my duties. This includes fellow employees, the citizens we serve and our community partners. I realize that all persons deserve to be treated with dignity and fairness regardless of their belief system.
- Partnership- I know that in order for our community to be safe and secure, I need the help of others to accomplish this mission. I am committed to forming partnerships with other employees, citizens, officials from there agencies, and other community partners to achieve this common goal.

These values will guide our work and decisions, help us to contribute to the quality of life in Mason County and promote a positive work experience. Our core values and ethics express the commonly held beliefs that we must strive for in our daily operations. The beliefs govern our work behavior and actions.

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## **Chapter 1 - Role and Authority**



# Organizational Structure and Responsibility

## 100.1 PURPOSE AND SCOPE

The organizational structure of this department is designed to create an efficient means to accomplish our mission and goals and to provide for the best possible service to the public.

## 100.2 DIVISIONS

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

- Civil Division
- Patrol Division
- Administrative Services Division
- Jail Operations Division

### 100.2.1 CIVIL DIVISION

The Civil Division is commanded by a Chief Deputy, whose primary responsibility is to provide general management direction and control for the Civil Division. The Civil Division consists of Administrative, Personnel Services, Financial and Training Services.

### 100.2.2 PATROL DIVISION

The Patrol Division is commanded by a Chief Deputy, whose primary responsibility is to provide general management direction and control for the Patrol Division. The Patrol Division consists of Uniformed Patrol and Special Operations, Traffic, and detective units.

### 100.2.3 ADMINISTRATIVE DIVISION

The Administrative Division is commanded by a Chief Deputy, whose primary responsibility is to provide general management direction and control for the financial assistants, I.T. services, and any assigned community service officers.

### 100.2.4 JAIL OPERATIONS DIVISION

The Jail Division is commanded by the Chief Deputy who reports directly to the Undersheriff. The Chief is responsible to maintain custody, security, and control of the facility in a safe, efficient, and constitutional manner.

## 100.3 SUCCESSION OF COMMAND

The Sheriff exercises command over all personnel in the Department. During planned absences the Sheriff will designate the Undersheriff or a Chief Deputy to serve as the acting Sheriff.

Except when designated as above, the order of command authority in the absence or unavailability of the Sheriff is as follows:

- Undersheriff
- Chief Criminal Deputy

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- Chief Deputy Special Operations
- Chief Civil Deputy
- Chief Deputy Corrections
- Lieutenant
- Sergeant
- Corporal

##### **100.3.1 UNITY OF COMMAND**

The principles of unity of command ensure efficient supervision and control within the Department. Generally, each employee shall be accountable to one supervisor at any time for a given assignment or responsibility. Except where specifically delegated authority may exist by policy or special assignment (e.g., Field Training Officer, Terminal ACCESS Coordinator), any supervisor may temporarily direct any subordinate if an operational necessity exists.

##### **100.3.2 ORDERS**

Members shall respond to and make a good faith and reasonable effort to comply with the lawful order of superior officers and other proper authority.

##### **100.3.3 CONFLICTING OR UNLAWFUL ORDER**

Should an order conflict with any order given previously by another superior officer or with any departmental order, the officer to whom such order is given shall respectfully call attention to the conflict. If the superior officer giving such order does not change it to eliminate the conflict, the order shall stand and the responsibility shall be theirs. Employees are not required to obey an order which is contrary to federal, state, or local laws or ordinances. Responsibility for refusal to obey rests with the employee who must be prepared to justify his or her action. Employees who are given orders which they feel are unjust or contrary to regulations must obey the orders, but then should, at first opportunity, report the incident in writing, through established chain of command to the Sheriff.

#### **100.4 RANKS OF COMMAND WITHIN THE MCSO**

##### **100.4.1 SHERIFF**

The Sheriff is the Chief Executive of Mason County and of the Mason County Sheriff's Office. Upon him rests the final responsibility for the operations and effectiveness of the department. In his capacity as Chief Executive of the department, the Sheriff maintains control and governs departmental matters through executive officers who act on his behalf. The Sheriff shall have the power and authority to discipline employees of the department for non-compliance with rules, regulations, procedures, and lawful orders issued by him or any superior officer of the department. He may delegate whatever authority he deems necessary to ensure accountability within the department as well as effectiveness of departmental operations.

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##### 100.4.2 UNDERSHERIFF

The Undersheriff is an Executive Officer appointed by the Sheriff to manage and command the total operations of the Office. He is responsible for the safe, orderly and effective operations of the Sheriff's Office. Accountability for all departmental matters shall begin with the Undersheriff. He shall have the power and authority to discipline employees of the department for non compliance with departmental rules, regulations, procedures, and lawful orders issued by him or any superior officer of the department. The Undersheriff is second in command of the Office and shall act in the capacity of the Chief Executive Officer in the absence of the Sheriff.

##### 100.4.3 CHIEF CRIMINAL DEPUTY/CHIEF CIVIL DEPUTY/CHIEF DEPUTY SPECIAL OPERATIONS

The Chief Criminal Deputy, Chief Civil Deputy and Chief Deputy Special Operations are Executive Officers who are appointed by the Sheriff. They direct the activities of their respective divisions in accordance with policies and procedures prescribed by the Sheriff. They may prescribe rules and regulations for the conduct of employees under their command which do not conflict with the general rules and regulations prescribed by the Sheriff. The Chief Criminal Deputy, Chief Civil Deputy, and Chief Deputy Special Operations are subordinate to the Undersheriff and superior to the rank of Lieutenant.

##### 100.4.4 CHIEF DEPUTY CORRECTIONS DIVISION

The Chief Deputy Corrections Division is an Executive Officer appointed by the Sheriff to manage and command the Corrections Division. The Chief Deputy Corrections Division directs the activities of the Mason County Jail in accordance with policies and procedures prescribed by the Sheriff. The Chief Deputy Corrections Division may prescribe rules and regulations for the conduct of employees under his or her command which do not conflict with the general rules and regulations prescribed by the Sheriff. The Chief Deputy Corrections Division is subordinate to the Undersheriff and superior to the rank of Lieutenant.

##### 100.4.5 LIEUTENANT

The Lieutenant is appointed by the Sheriff from a certified eligibility list provided by the Civil Service Commission of Mason County. The rank of Lieutenant will be subordinate to the rank of Chief Deputy and superior to Sergeant.

##### 100.4.6 SERGEANT

The Sergeant is appointed by the Sheriff from a certified eligibility list as provided by the Civil Service Commission of Mason County. Sergeants shall be responsible for operational control of their assigned units or shifts in accordance with the rules, regulations, and policies of the department. The rank of Sergeant shall be subordinate to that of Lieutenant and Chief Deputy and superior to Corrections Officer and Deputy.

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##### 100.4.7 ACTING SERGEANT

The Acting Sergeant is appointed by a Chief Deputy with the recommendation of a Sergeant. He or she will have the full authority and responsibility of a Sergeant when working in that capacity. This is a temporary assignment which serves at the discretion of the Division Chief.

##### 100.4.8 CORPORAL

The Corporal is appointed by the Sheriff from a certified eligibility list provided by the Civil Service Commission of Mason County. Corporals shall be responsible to assist the Sergeant running the shift. The Corporal is subordinate to the Sergeant and superior to Corrections Deputy.

## Authority and Legal Assistance

### 102.1 PURPOSE AND SCOPE

This policy acknowledges and reflects the legal authority under which the Mason 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 (RCW 70.48.180 and RCW 70.48.190).

### 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 Mason 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 Prosecutor and legal specialists can be of benefit to the Office:

- (a) Analyze and alert the jail executive and 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 the following:
  - 1. Use of force
  - 2. Faith-based requests
  - 3. Complaints and grievances
  - 4. Allegations of abuse by staff
  - 5. Americans with Disabilities Act (ADA) issues, policies and procedures
- (d) Serve as legal counsel in legal matters brought against this office and the Sheriff.

### 102.5 CORRECTIONS DEPUTY AUTHORITY AND COMMISSION

Mason County Sheriff Corrections Deputies have authorization, under a Special Commission, to act on behalf of the elected Sheriff for specific duties limited to matters dealing with the care and custody of inmates confined in the Mason County Jail:

- To serve warrants and other court directed orders.

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- To take custody of persons ordered by a judge.
- To apprehend inmates who have escaped from care of the Mason County Jail.
- To intercede in any disturbance that falls within the scope of training while in the jail and courthouse complex.
- To reasonably detain a person while in the courthouse complex until a commissioned law enforcement officer arrives to handle the situation.
- To perform the duties associated with inmate management and jail operations of the Mason County Jail.

This Special Commission shall be in effect while in uniform in the jail, the courthouse complex, when in direct supervision of inmates outside the courthouse complex, while traveling to and from inmate locations, or whenever directed by the Sheriff or designee. This Special Commission is limited to the term of the current elected Sheriff.

# Custody Manual

## 105.1 PURPOSE AND SCOPE

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

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

## 105.2 POLICY

The manual of the Mason County Sheriff's Office jail is hereby established and shall be referred to as the Custody Manual. All members are to conform to the provisions of this manual.

### 105.2.1 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 Mason 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 Mason County Sheriff's Office reserves the right to revise any policy content, in whole or in part.

## 105.3 RESPONSIBILITIES

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

The Jail Chief Deputy shall ensure that the Custody Manual is reviewed annually, updated whenever necessary, and staff trained accordingly to ensure that the policies in the manual are current and reflect the mission of the Mason County Sheriff's Office. 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 (RCW 70.48.071).

### 105.3.1 COMMAND STAFF

The command staff should consist of the following:

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- Sheriff
- Undersheriff
- Chief Deputy of Corrections
- Lieutenant of Corrections

The staff shall review all recommendations regarding proposed changes to the manual at staff meetings.

#### **105.4 DEFINITIONS**

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

**Office** - The Mason County Sheriff's Office.

**Custody Manual** - The Office Custody Manual.

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

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

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

- Full- and part-time employees.
- Corrections Deputies.
- Reserve corrections deputies.
- Non-sworn employees.
- Volunteers.

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

**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 corrections deputy.

**Shall or will** - Indicates a mandatory action.

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

#### **105.5 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.



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

#### **105.6 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.

#### **105.7 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 network for review prior to implementation. The Training Supervisor will forward revisions to the Custody Manual as needed to all personnel via electronic mail. Each member shall acknowledge receipt by return email or online acknowledgement, review the revisions and seek clarification as needed.

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

## General Order

### 108.1 PURPOSE AND SCOPE

General Orders establish a interdepartmental communication that may be used by the Sheriff to make immediate changes to policy and procedure. General Orders will immediately modify or change and supersede the sections of this manual to which they pertain.

### 108.2 GENERAL ORDERS PROTOCOL

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

All existing General Orders have now been incorporated in the updated Policy Manual as of the below revision date.

Any General Orders issued after publication of the manual shall be numbered consecutively, starting with the last two digits of the year, followed by the number "01". For example, 08-01 signifies the first General Order for the year 2008.

### 108.3 RESPONSIBILITIES

#### 108.3.1 SHERIFF

The staff shall review and approve revisions of the Policy Manual, which will incorporate changes originally made by a General Order.

#### 108.3.2 MANAGERS AND SUPERVISORS

The Sheriff shall issue all General Orders.

#### 108.3.3 ACCEPTANCE OF GENERAL ORDERS

All employees are required to read and obtain any necessary clarification of all General Orders. All employees are required to acknowledge in writing the receipt and review of any new General Order. Signed acknowledgment forms and/or e-mail receipts showing an employee's acknowledgment will be maintained by the Civil Division.

## Grievances

### 115.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines for the Mason County Sheriff's Office grievance system. The grievance system is intended to facilitate communication and to promptly and equitably address employee grievances in the workplace.

#### 115.1.1 GRIEVANCE DEFINED

A grievance is a difference of opinion or dispute regarding the meaning, interpretation, or application of any of the following:

- The employee bargaining agreement (Memorandum of Understanding)
- This Custody Manual
- Office rules and regulations governing personnel practices or working conditions
- Workplace issues that do not amount to misconduct under the Personnel Complaints Policy, 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

Specifically outside the category of grievances are complaints related to allegations of discrimination or harassment subject to the Discriminatory Harassment Policy. Also outside the category of grievances are personnel complaints regarding any allegation of misconduct or improper job performance against any office employee that, if true, would constitute a violation of office policy or federal, state, or local law, as set forth in the Personnel Complaints Policy.

### 115.2 POLICY

It is the policy of this office to provide a just and equitable system for the prompt handling of employee grievances without discrimination, coercion, restraint, or retaliation against any employee who submits or is otherwise involved in a grievance.

### 115.3 PROCEDURE

Any employee desiring to file a grievance will follow the grievance procedure outlined in Article 10 of the Corrections/Support Staff Contract.

### 115.4 MEMBER REPRESENTATION

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

### 115.5 GRIEVANCE RECORDS

At the conclusion of the grievance process, all documents pertaining to the process shall be forwarded to the Civil Division for inclusion into a secure file for all written grievances. Copies of the documents should also be sent to the Administrative Department.

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#### *Grievances*

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##### **115.6 GRIEVANCE AUDITS**

The Training Supervisor should perform an annual audit of all grievances filed the previous calendar year to evaluate whether any change in policy, procedure, or training may be appropriate to avoid future grievances. The Training Supervisor should record these findings in a confidential memorandum to the Sheriff without including any identifying information about any individual grievance.

##### **115.7 POLICY OR TRAINING IMPLICATIONS**

If an employee who participates in the grievance review process identifies any issue that may warrant an immediate revision to this Custody Manual, a procedural change, or an immediate training need, the employee should promptly notify the Sheriff in the memorandum.

## Anti-Retaliation

### 116.1 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 collective bargaining agreement.

### 116.2 POLICY

The Mason 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.

### 116.3 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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##### **116.3.1 RETALIATION PROHIBITED FOR INTERVENING OR REPORTING**

A corrections deputy shall not be retaliated against in any way for intervening or reporting in good faith any wrongdoing by another law enforcement officer. Wrongdoing means conduct that is contrary to law or office policies (RCW 10.93.190).

##### **116.4 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 Finance 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.

##### **116.5 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.

#### **116.6 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.

#### **116.7 WHISTLE-BLOWING**

Washington law protects employees who make good faith reports of improper government actions. Improper government actions include violations of Washington law, abuse of authority, gross waste of funds, and substantial and specific danger to the public health or safety (RCW 42.40.010 et seq.; RCW 49.60.210; RCW 42.41.010 et seq.).

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 Detective Unit for investigation pursuant to the Personnel Complaints Policy.

##### **116.7.1 DISPLAY OF REPORTING PROCEDURES**

The office shall display the county policy to employees regarding their rights and the procedures for reporting information of an alleged improper government action. A copy of the policy shall be made available to employees upon request (RCW 42.41.030).

#### **116.8 RECORDS RETENTION AND RELEASE**

The Chief Civil Deputy shall ensure that documentation of investigations is maintained in accordance with the established records retention schedules.

#### **116.9 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**



## Staffing Plan

### 202.1 STAFFING

The Jail Chief Deputy should maintain an up-to-date staffing plan for the purpose of exercising position 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 Jail Chief Deputy should adhere to the following strategies for the management of position control and personnel costs (RCW 41.14.140):

- (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. Supervisory approval should be required prior to payment.
- (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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# Supervision of Inmates - Minimum Requirements

## 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 inmates through appropriate staffing levels that are sufficient to operate the facility and perform functions related to the safety, security, custody and supervision of inmates. In an effort to protect the dignity and privacy rights of the inmates and to comply with existing case law, at least one member of the same sex of each inmate represented in the population should be on-duty at all times.

## 204.3 SUPERVISION OF INMATES

There should be, at all times, sufficient staff designated to remain in the facility for the supervision and welfare of inmates, to ensure the implementation and operation of all programs and activities and to respond to emergencies when needed. Such staff must not leave the facility while inmates are present and should not be assigned duties that could conflict with the supervision of inmates.

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

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

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

The Chief Deputy of Corrections 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.

## 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 inmates.

## Prohibition on Inmate 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 inmate population under their supervision and should prevent inmates from controlling other inmates within the facility.

### **206.2 POLICY**

All staff, including support staff, contractors and volunteers should exercise control and supervision of all inmates under their control. It is the policy of this Office to prohibit any staff member to implicitly allow, or by dereliction of duty allow, any inmate or group of inmates to exert authority over any other inmate.

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

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

## 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

The Chief Deputy of Corrections shall ensure that all jail property and fixed assets are inventoried annually and that all supplies purchased are reconciled with the invoice, in accordance with the limits set by the auditor, prior to payment.

The Jail maintains a secure storage area for the purpose of storing supplies and equipment. The Chief Deputy of Corrections shall maintain oversight of the area.

With the exception of medical supplies, which are ordered by the medical staff, the Deputy assigned to purchasing is responsible for the purchasing 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 Department Finance Manager should be completed and received by the Finance Manager 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 Chief Deputy of Corrections and the Finance Manager.

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

### 208.3 PURCHASING

The Chief Deputy of Corrections, along with the Finance Manager, is responsible for managing the purchasing process to ensure that amounts and types of purchases fall within budget parameters. The Chief Deputy of Corrections must also ensure that this facility's purchasing process complies with applicable laws, regulations and Department policies.

With approval of the Chief Deputy of Corrections and the Finance Manager, 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.

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- (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.
- (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.

#### **208.4 EQUIPMENT INVENTORY**

The Jail Chief Deputy or authorized designee will conduct an audit on all supplies and equipment annually. All losses will be reported by the Sheriff to the County Commissioners. The Finance Manager may also conduct an interim audit on all fixed assets in order to maintain a complete and accurate accounting of equipment and its location.

# Tool and Culinary Equipment Control

## 210.1 PURPOSE AND SCOPE

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

## 210.2 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.

### 210.2.1 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 secured cabinets or storage rooms when not in use. Tools should be inspected regularly for damage or wear and repaired or replaced as necessary.

Any time tools are brought into a secure area where inmates are present, staff supervising the area shall count the number of tools brought in to ensure that the same number of tools are 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. Inmates who are assigned tasks that require these tools shall be closely supervised.

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

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

The staff member responsible for the supervision of the use of missing tool will prepare and submit a report to the Shift Supervisor documenting the specific tool that is missing and the circumstances of the disappearance. The report will be forwarded to the Jail Chief Deputy. All staff members involved in the search will submit a report to the on-duty supervisor documenting their findings.

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##### 210.2.2 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.

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

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

##### 210.2.3 EXTERIOR-USE TOOLS

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

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

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

All tools will be re-inventoried and returned to the tool storage area at the end of each shift. Inmate workers should not be released from the work assignment until all tools are accounted for.

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

##### 210.2.4 KITCHEN EQUIPMENT

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

All kitchen knives or metal tools with sharp edges shall be stored in a locked cabinet. There shall be an outline of the tool's assigned location in the cabinet so that any tool missing from the cabinet

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can be easily identified. When in use, all knives shall be tethered to the work area. All tools shall be returned to the secure cabinet when not in use.

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

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

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

#### **210.3 TOOL MAINTENANCE**

Tools should be inspected regularly for damage or wear and repaired or replaced as needed.



## 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 Mason 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, 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 corrections 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.

### 212.4 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 Department.

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

Staff may authorize inmates to release money one time during their incarceration.

Inmates being transferred to another facility must make arrangements to have property picked up. Property not picked up, shall be stored for 60 days and then disposed of. Inmates authorizing release must sign a property release form. Law enforcement may seize an inmates property without a warrant. The release authorization shall be signed by the approving staff member and must match the items listed on the property inventory or must specify the items to be released. A

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signature of the person receiving the property shall be recorded on the release of property form. Upon release, the proper entry shall be documented and placed into the inmate booking file.

## 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 Mason County Sheriff's Office or in the custody or control of Department employees, volunteers or contractors are regarded as non-public and/or confidential.

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

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. Photographs and information concerning a person convicted of a sex offense as defined in RCW 9.94A.030 may be released as provided in RCW 4.24.550.

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

### 214.3 RETENTION OF RECORDS

All official files, documents, records, electronic data, video and audio recordings and information held by the Mason County Sheriff's Office shall be maintained subject to WAC 44-14-03005. Record retention schedules are established by the Washington Secretary of State and are available on the office's [website](#).

### 214.4 STAFF TRAINING

Prior to being allowed to work inside this facility, all custody staff, volunteers and contractors will receive training on Department records, policies and confidentiality requirements, including the potential criminal and civil penalties that may result from a breach of confidentiality in violation of this policy and all applicable statutes (RCW 40.16.010 and RCW 40.16.020).

## Research Involving Inmates

### 216.1 PURPOSE AND SCOPE

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

### 216.2 POLICY

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

### 216.3 AUTHORIZATION REQUIREMENTS

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

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

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

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

Research or studies involving more than the information identified as public information may require signed release/waiver forms from the involved inmates. The Sheriff should consult and seek guidance from the legal counsel serving the Department or other legal expert in these matters.

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

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

#### **216.4 LEGAL CONSIDERATIONS**

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

#### **216.5 INMATES IN COMMUNITY-BASED RESEARCH**

When inmates who are participants in a community-based research protocol are admitted to the facility, the following shall occur:

- (a) The intake nurse shall collect all relevant data including name and contact information of the treating physician, and all available detail about the treatment regimen and the condition being treated.
- (b) The responsible physician shall be contacted prior to the initiation of treatment.
- (c) Consultation with community researchers shall be made by the responsible physician to determine the intent of the study and any necessary parameters to measure as the treatment period progresses.
- (d) Necessary information shall be obtained so that withdrawal from the research protocol is done without harming the health of the inmate.

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

This Department does not endorse enrolling inmates into human research studies. Requests to enroll inmates in human research studies will not ordinarily be approved. However, any request to enroll an inmate into such a study must be reviewed by the Sheriff, the Responsible Physician and legal counsel, and authorization provided prior to enrollment. Any authorized enrollments shall comply with all state and federal guidelines.

# Inmate Records

## 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 inmate's period of confinement, as well as histories of previous confinement in this facility. All inmate records are official office documents and should be used for official business only. Inmate records are a vital component of the criminal justice system and should only be released to authorized persons.

### 218.2.1 RECORD MAINTENANCE

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

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

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

The inmate records shall be identified and separated according to a format developed and approved by the Jail Chief Deputy or the authorized designee.

#### **218.2.2 RELEASE OF INMATE RECORDS**

Inmate records are confidential and shall be used for official business only. Any release of inmate records shall be made only in compliance with a lawful court order or as authorized by state and federal law to persons having a legitimate criminal justice need, or with a consent form signed by the inmate (RCW 70.48.100). A copy of the release authorization document shall be maintained in the inmate record file.

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

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

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

#### **218.3 ACCESS TO INMATE OR FACILITY RECORDS**

Inmate or facility records will be limited to official business and a "need to know" basis according to the laws of privacy on personal information and data.

Inmates are prohibited from having facility records or copies of facility records in their possession.

Copies of facility records will not be given to inmates for souvenirs or any other personal use.

Each inmate may have access to his/her personal records when reasonable, and reasonable access to information contained therein.

In no event will an inmate's record be accessible by other inmates, the public, or to casual interests.

Data that is permitted for public disclosure will be accessible to media personnel by the Chief Civil Deputy or, if available, the Undersheriff.

#### **218.4 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):

- (a) Sending information to, or requesting or receiving such information from federal immigration officials
- (b) Maintaining such information in office records

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- (c) Exchanging such information with any other federal, state, or local government entity

#### 218.4.1 NON-DISCLOSURE OF PERSONAL INFORMATION

Members shall not disclose to a federal immigration official who is investigating a non-criminal matter, nonpublic personal information about an inmate except as required by state or federal law (RCW 10.93.160).



# Report Preparation

## 220.1 PURPOSE AND SCOPE

Report preparation is a major part of each corrections deputy's responsibility. The purpose of these reports is to document incidents at the facility, refresh the corrections deputy's memory and 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 reports are sufficiently detailed for their purpose and free from errors prior to submission. Reports shall be prepared by the staff assigned to investigate or document an incident, approved by a supervisor and submitted to the Jail Chief Deputy or the authorized designee in a timely manner. Any incident resulting in death, injury or endangerment to staff or a visitor, serious injury to an inmate, escape, a major disturbance, a facility emergency or an unsafe condition at the facility shall be submitted to the Jail Chief Deputy as soon as practicable but within 24 hours of the incident. It is the responsibility of the assigned employee to ensure the above listed reports meet this requirement or 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.

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

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

## 220.3 REQUIRED REPORTING

Written reports are required in the following situations on the appropriate Department-approved form unless otherwise approved by a supervisor.

### 220.3.1 CRIMINAL ACTIVITY REPORTING

When an employee responds to an incident, or as a result of selfinitiated 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. Crimes committed in the facility shall be investigated by the Mason County Sheriff's Office.

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##### 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 Department shall establish a filing system differentiating between incident reports, crime reports and disciplinary actions. When duplication of information exists, cross-referencing will facilitate retrieval of one or both forms. (note: items with an asterisk are reported to the Washington Association of Sheriffs and Police Chiefs)

Incidents shall be documented using the appropriate approved report include:

- (a) Non-criminal incidents of rule violations by inmates.
- (b) Suicide\*, attempted suicide or suicidal ideation on the part of an inmate, if known.
- (c) Non-criminal breaches of security or evidence of an escape attempt.
- (d) Non-criminal security threats, including intelligence related to jail activities.
- (e) Incidents related to medical issues, health or safety in the jail.
- (f) Discovery of contraband in the possession of inmates or their housing areas.
- (g) Detaining or handcuffing any visitor at the facility.
- (h) Traffic collisions involving Department vehicles.
- (i) Risk management incidents to include injuries to inmates and lost or damaged property.
- (j) Accidental injuries of staff, inmates or the public.
- (k) Deaths in the facility\*.
- (l) Escape\* or attempted escape.
- (m) Assaults on inmates or staff.
- (n) Riots, Disorders, and disturbances.
- (o) Fires\*.
- (p) Natural disasters, e.g. floods, earthquakes, etc.
- (q) Unusual disruptions of facility routine.
- (r) Special category inmates.
- (s) Use of force.
- (t) Major or serious violations of discipline.
- (u) Negative changes in the Jail climate or mood.

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##### **220.3.3 DEATHS**

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

Reporting of deaths will be handled in accordance with the Reporting In-Custody 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 office 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. Incomplete reports, 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.

##### **220.4.1 GENERAL POLICY OF HANDWRITTEN REPORTS**

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

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

##### **220.4.2 GENERAL USE OF OTHER HANDWRITTEN FORMS**

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

#### **220.5 REPORT CORRECTIONS**

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

After review and approval of the supervisor, the employee shall document such approval at the end of the report narrative: "Approved by Sgt. \*\*\*\*"

#### **220.6 REPORT CHANGES OR ALTERATIONS**

Reports that have been approved by a supervisor for filing and distribution shall not be modified or altered except by way of a supplemental report. Reviewed reports that have not yet been filed may be corrected or modified by the authoring employee only with the knowledge and authorization of

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the reviewing supervisor. Reviewing supervisors should not alter reports. When modifications are required, these should be the responsibility of the authoring employee.

#### **220.7 POLICY**

It is the policy of the Mason County Sheriff's Office that members shall act with promptness and efficiency in the preparation and processing of all reports.

# Key and Electronic Access Device Control

## 222.1 PURPOSE AND SCOPE

The control and accountability of facility keys and electronic access devices are vital factors in maintaining a safe and secure environment for inmates, staff, volunteers, contractors and the public. 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.

## 222.2 POLICY

It is the policy of this office 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.

### 222.2.1 KEY IDENTIFICATION

Keys which open doors within the facility shall be marked with unique identification codes allowing for quick inventory. All keys not assigned to personnel shall be inventoried in the electronic key control system with unique identifying names not associated with the numbers/codes on the keys or locks.

A separate secure document identifying keys will be maintained by the Key Watcher System.

### 222.2.2 KEYSSET CONTENTS

Keysets issued to staff for use within the secure perimeter of the facility shall not contain keys permitting access to areas outside the secure perimeter. Exterior door keys shall not be permitted inside the facility except during an emergency requiring access to the exterior doors. Staff shall not possess key sets for use within the secure perimeter of the facility, and exterior door keys at the same time.

### 222.2.3 KEY CONTROL

Facility keys shall be maintained in a secure lock box, or the Key Watcher System. The Key Watcher System and lock box shall have controlled access for staff only. Each person assigned to the facility shall be issued a unique login and password to access facility keys. At the end of each shift, employees shall return all keys which they checked out, to their assigned location.

Under no circumstances shall an employee pass a key or key set to another employee. Keys must be checked out through the Key Watcher System or lock box logs. Employees shall not possess any key for which they have not been authorized.

Employees shall not duplicate, mark, alter or manufacture any key without written authorization from the Jail Chief Deputy or the authorized designee. No employee shall remove the electronic tag or battery from any key set without authorization.

Keys must be accounted for by the shift supervisor at the beginning of his/her shift.

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

##### 222.2.4 LOCK POLICY

All security perimeter entrances, Control Room doors and cell doors shall be kept locked, except when used for admission or exit of employees, inmates or visitors, and in an emergency. Operators of sally ports (a sally port is an area consisting of two consecutive doors) shall assure only one of the doors of a sally port 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. Supervisors must approve non-emergency overrides. Electronically controlled doors will not be left unsecured or "propped." A propped door is a door left unlocked and not physically controlled by a staff member.

##### 222.2.5 TESTING

Locks to security doors or gates shall be tested for proper function at least annually to ensure proper operation. This testing shall be documented and a report forwarded to the Jail Chief Deputy.

##### 222.2.6 EXTERIOR DOOR KEYS

Keys for exterior doors to the facility shall be kept in a locked cabinet in a secure location.. The supervisor assigned to key inventory shall, annually, inventory and account for these keys.

##### 222.2.7 MISSING KEYS

Staff members who discover key or key set missing shall immediately make a verbal report to a supervisor and shall prepare a written incident report as directed by the supervisor. The supervisor shall immediately initiate a search for the missing key. If a reasonable effort to locate the key fails, the supervisor shall order a lockdown of the facility. All inmates shall be locked in their cells/housing units. Inmates shall not be allowed to pass into or out of the facility without being thoroughly searched for the missing key. The supervisor shall, as soon as practicable, notify the Jail Chief Deputy 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 key set is not located, the Jail Chief Deputy will determine whether to re-key any locks that may have been compromised, and whether this should be done immediately.

The Jail Chief Deputy 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.

Should a staff member mistakenly take a key or key set home, they shall return the key or key set at the direction of the on-shift supervisor.

##### 222.2.8 DAMAGED KEYS, LOCKS, OR TAGS

Damaged keys, locks, or key tags shall be promptly reported to a supervisor and the Key Watcher System administrators. No part of a broken key shall be left in the lock. All portions of the damaged

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

#### **222.3 KEY CONTROL RECORDS**

The Key Watcher System will electronically maintain records of all keys stored in it. A separate log will be maintained for keys stored in lock boxes. In the event the Key Watcher System is offline, a manual inventory of keys will be conducted by the shift supervisor at the beginning and end of his/her shift.

## Daily Activity Logs and Shift Reports

### 224.1 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.

### 224.2 POLICY

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

### 224.3 PROCEDURES

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

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

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

### 224.4 SHIFT ACTIVITY LOGS

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

- Personnel on-duty
- Bookings and releases
- Formal counts
- Safety checks, security checks and inspections and routine activities
- All searches/shakedowns



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#### *Daily Activity Logs and Shift Reports*

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- Inmate movement within the facility and inmates received at a housing assignment
- Meal service
- Professional visits to the housing units, including maintenance work and tours
- Alarms and security equipment tests
- Medication delivery, sick call or inmate complaint of illness or injury and the action taken
- Locking and unlocking of inmate cells
- Disciplinary actions
- Supervisor rounds to the housing area and/or to specific inmates
- Unusual inmate behavior
- Discovered contraband
- Activities and programs offered and the attendees
- Unusual occurrences
- Use of emergency equipment
- Any use of force
- Sanitation inspections
- Key counts

The daily activity log will be retained in accordance with the Secretary of State records retention schedule and the Office records retention schedule (WAC 44-14-03005).

#### **224.5 SHIFT REPORT**

The supervisor, shall prepare a shift report for the oncoming staff. This report shall include the following:

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

The shift report will be retained in accordance with the Secretary of State records retention schedule and the Office records retention schedule (WAC 44-14-03005).

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#### *Daily Activity Logs and Shift Reports*

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##### **224.6 STAFF RESPONSIBILITIES**

Corrections Staff shall review the electronic incident log during the first part of their daily shift. The review shall include incidents which occurred since their last shift. In addition to the electronic incident log review, Supervisors shall review the facility activity log and daily shift report during the course of each shift. Supervisors shall sign and include the date and time of review on each log or report. When appropriate, supervisors should include comments in the logbook with regard to an incident or unusual occurrence in the facility.

Whenever a major event in the facility requires a coordinated command response, the incident commander should designate someone to keep a running log that identifies, at 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 onscene
- Orders issued by the incident commander
- Significant events that occurred as a result of the incident

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

# Administrative and Supervisory Inspections

## 230.1 PURPOSE AND SCOPE

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

## 230.2 POLICY

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

## 230.3 INSPECTIONS

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

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

### 230.3.1 AREAS TO BE INSPECTED

Supervisor inspections shall occur in all occupied areas of the facility once per shift, including weekends and holidays. Inspections should be conducted randomly and special effort should be given to tour and informally inspect the following areas:

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

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##### **230.4 INSPECTIONS OF SECURITY EQUIPMENT**

The Jail Staff shall be responsible for conducting regular and routine inspections of all security devices, identifying those in need of repair or maintenance and providing a written incident report of the problems identified. The Corrections Staff shall document all action taken to correct identified deficiencies, including maintenance records, and shall retain those records in accordance with established records retention schedules (WAC 44-14-03005).

##### **230.5 DOCUMENTATION AND REPORTING**

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

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

## Perimeter Security

### 232.1 PURPOSE AND SCOPE

The purpose of this policy is to establish this facility's security perimeters, to assure incarcerated inmates remain inside the perimeter, and visitor, vendor, volunteer 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 also be maintained to prevent contraband from entering the secure areas of the facility.

### 232.2 POLICY

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

#### 232.2.1 ACCESS TO FACILITY

This facility shall be maintained as a secure area and no person shall enter any portion of the inner perimeter (non-public areas) without specific authorization from the Jail Chief Deputy or the authorized designee. Authorization for entrance, without escort, into the secure areas of the facility is approved for law enforcement personnel, Sheriff's Office employees, volunteers and contractors, county maintenance and information technology personnel, Mason County indigent defense counsel members, or others who have been screened and approved through the security clearance application process. The Programs Coordinator shall maintain a current list of clearance approved people which will be readily available to Corrections staff.

Volunteer's or Contractors who are cleared to access the facility who have a prior felony conviction, may not be granted unescorted access to the facility by Washington State Patrol's A Centralized Computer Enforcement Service System (ACCESS). Those volunteers/contractors shall be escorted anytime they are in transit from an ingress or egress point to/from their internal destination to assure compliance with ACCESS computer security requirements. The Programs coordinator will maintain an electronic file accessible to Corrections staff which readily identifies the differing access designations.

For the purpose of this section, the term "visitor" is defined as any non-cleared person allowed access into non-public security areas of the jail. All visitors shall be required to provide satisfactory identification, such as a valid state-issued driver license or identification card, valid passport or military identification. 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.

Criminal Justice, County, and Municipal employees may enter the facility through the Sally Port. Access for all other's shall be through the Public Lobby/Administrative area.

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Everyone who accesses the facility beyond the inner security perimeter shall wear visible identification.

#### **232.3 PROCEDURE**

The secure perimeter shall be maintained by assigned staff. The Jail Chief Deputy or the authorized designee shall assure a staffing plan is in place to monitor the secure perimeter of this facility. Suspicious activity at or near the perimeter shall immediately be reported to the Shift Supervisor and Control Room. Control Room staff shall initiate an appropriate law enforcement response.

Individuals suspected to be in violation of any law may be subject to detention or arrest. 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.

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

Individuals, granted access to the inner security areas of the facility, shall wear a visitor badge. The badge shall be issued in exchange for Keys or ID from the Control Room Operator. When the badge is returned, the keys or ID will be returned.

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 jail staff.

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

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

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

Operation of the sallyport doors will be done in such a manner as to effectively control movement into and out of the secure perimeter of this facility; unless given specific supervisory authorization, the Sally port door shall never be open at the same time as the interior sally port man entrance door.

"Man traps" are defined as two consecutive doors allowing ingress and egress to the inner security areas of the facility. Man trap doors shall not be open at the same time unless exigent circumstances exist necessitating emergency entry or exit. Control Room staff are responsible for assuring 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.

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Outer perimeter lighting should be designed to illuminate areas of the exterior to allow visual inspection by video monitor or perimeter patrols.

## Accessibility - Facility and Equipment

### 234.1 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.

#### 234.1.1 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.

### 234.2 POLICY

The Mason County Sheriff's Office prohibits discrimination of persons with disabilities. The Mason 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 the public and usable by staff and visitors with disabilities.

#### 234.2.1 ACCOMMODATIONS

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

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



## Community Relations - Public Information Plan

### 238.1 PURPOSE AND SCOPE

This policy provides guidelines to custody personnel when dealing with the public or interested groups when requests are received to share information generated within the facility. It guides personnel in their interactions with the community and with inmates.

This policy is intended to provide custody personnel with guidelines for processing information requests during routine contacts, as well as in the event of an incident or emergency (See the News Media Relations Policy for guidance on media releases).

### 238.2 RESPONSIBILITIES

The Jail Chief Deputy is responsible for ensuring that the following information is public and available to all who inquire about it. It includes:

- (a) Visitation schedule; this should include days and times visiting is allowed and how many visits inmates may receive, as well as reasons why visiting may be restricted.
- (b) Telephone and correspondence rules and availability to inmates.
- (c) A brief description of the education programs.
- (d) Facility rules and limits of discipline.
- (e) Access to personal care items for the indigent inmate.
- (f) Access to medical, mental health and dental care.
- (g) The process by which inmates are oriented to the facility.

This information is to be made available for public viewing. Additionally, a copy should be provided for use by inmates. At the discretion of the Sheriff, the information may also be made available electronically. No information will be released on persons whose booking process is not completed.

### 238.3 PROHIBITED MATERIALS

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

### 238.4 TOURS OF THE CUSTODY FACILITY

Tours of this facility may be arranged through the Jail Chief Deputy. 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) An ID check will be conducted before an applicant is approved to participate in a tour.
- (c) An acknowledgement of the provisions of the Washington Public Records Act.

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A record of all facility tours should be maintained in accordance with applicable retention requirements (WAC 44-14-03005).

#### **238.5 CONTACTING THE CUSTODY FACILITY**

This office provides 24-hour telephone service to the public for information. This informational number is public and the line is staffed by trained personnel during regular business hours.

# Victim Notification of Inmate Release

## 240.1 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 Washington law.

## 240.2 POLICY

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

## 240.3 PROCEDURE

The Jail Chief Deputy 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 Holds Screen 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.

Individuals requesting release notification should be directed to the Mason County Jail website or Vinelink.com to register for electronic notification.

## 240.4 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 release screen of the inmate's booking 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.

### 240.4.1 REQUIRED NOTIFICATIONS

The Jail Chief Deputy shall ensure that a system is in place to ensure release and other relevant information is entered into the automated victim information and notification system in a timely and accurate manner (RCW 36.28A.040). The Jail Chief Deputy should ensure that staff who use the automated system receive proper training and that victims who wish to receive notices regarding an inmate's release or other information are appropriately instructed on the use of the system.

# Inmate Work Crew

## 243.1 PURPOSE AND SCOPE

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

## 243.2 POLICY

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

## 243.3 PROGRAM GUIDELINES

Any community service program is subject to the approval of the Jail Chief Deputy or the authorized designee.

Any such program shall be subject to the following guidelines:

- (a) The program complies with all statutes, ordinances, regulations, labor agreements, permissions or restrictions relating to inmates whenever they are assigned to public works and community service projects.
- (b) There is an availability of inmates who, as a matter of classification, are deemed to be eligible for participation in the community service program.
- (c) The number of work opportunities available in the community will determine the availability of opportunities to participate in the community service program.
- (d) Staff assigned to manage the program should strive to develop work assignments that give inmates an opportunity to develop good work habits and attitudes that can be applied to jobs obtained after release.
- (e) Victim and community input should be solicited and considered when developing community service programs.
- (f) There shall be sufficient staff assigned to supervise inmate work crews.
- (g) Inmates shall receive appropriate training for the work assignment and the use of any related tools or equipment.
- (h) The inmate workday should approximate the typical workday in the community for the type of work being performed. The normal work hours should not exceed eight hours per shift and must include adequate break and meal time.
- (i) Inmate performance while in the program should be regularly evaluated and recorded. Poor performance in the work program or violation of rules may render the inmate ineligible to participate in the work program. Any violation of work rules may result in disciplinary action that may include the loss of credits previously awarded for good

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behavior and work time. Inmates who do not comply with program rules, or for any reason cannot work, will be reclassified in accordance with the policies and procedures of the Mason County Sheriff's Office.

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

#### **243.4 SELECTION PROCESS**

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

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

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

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

## Staffing Plan

### 248.1 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.

### 248.2 POLICY

It is the policy of the Mason 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.

### 248.3 STAFFING PLAN REQUIREMENTS

The Jail Chief Deputy 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.

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

### 248.4 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.

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

The staffing analysis should be used to identify whether required activities are being performed competently and in compliance with current laws and office policies. If deficiencies are noted, the staffing analysis should also include recommendations regarding what corrective measures may be needed, including the following:

- (a) Operational changes

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- (b) Equipment requirements
- (c) Additional training
- (d) Supervisory intervention
- (e) Additional personnel

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

#### **248.5 REPORTING**

The Sheriff will cause a report of the findings of the staff analysis to be submitted to the officials responsible for funding the jail operation.

## Firearms - Corrections Officers

### **253.1 PURPOSE AND SCOPE**

This policy provides guidelines for issuing firearms, the safe and legal carrying of firearms, and firearms maintenance

This policy only applies to those corrections deputies who are authorized to carry firearms (RCW 9.94.050).

### **253.2 POLICY**

The Mason County Sheriff's Office will equip its corrections deputies with firearms to address the risks posed to the public and office corrections deputies by violent and sometimes well-armed persons. The Office will ensure firearms are appropriate and in good working order.

### **253.3 AUTHORIZED FIREARMS, AMMUNITION, AND OTHER WEAPONS**

Corrections Deputies shall only use firearms that are issued or approved by the Office and have been thoroughly inspected by the Armorer. Except in an emergency or as directed by a supervisor, no firearm shall be carried by a corrections deputy who has not qualified with that firearm at an authorized office range.

All other weapons not provided by the Office, including but not limited to edged weapons, chemical or electronic weapons, impact weapons, or any weapon prohibited or restricted by law or that is not covered elsewhere by office policy, may not be carried by corrections deputies in the performance of their official duties without the express written authorization of the corrections deputy's Chief Deputy. This exclusion does not apply to the carrying of a single folding pocketknife that is not otherwise prohibited by facility policy or law.

#### **253.3.1 AMMUNITION**

Corrections Deputies shall carry only office-authorized ammunition. Corrections Deputies shall be issued fresh duty ammunition in the specified quantity for all office-issued firearms during the corrections deputy's firearms qualification. Replacements for unserviceable or depleted ammunition issued by the Office shall be dispensed by the Armorer when needed, in accordance with established policy.

### **253.4 EQUIPMENT**

Firearms carried on- or off-duty shall be maintained in a clean, serviceable condition.

#### **253.4.1 REPAIRS OR MODIFICATIONS**

Each corrections deputy shall be responsible for promptly reporting any damage or malfunction of an assigned firearm to a supervisor or the Armorer.

Firearms may be repaired or modified only by a person who is office-approved and certified as an armorer or gunsmith in the repair of the specific firearm. Such modification or repair must be authorized in advance by the Armorer.



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##### 253.4.2 HOLSTERS

Only office-approved holsters shall be used and worn by corrections deputies. Corrections Deputies shall periodically inspect their holsters to make sure they are serviceable and provide the proper security and retention of the handgun.

##### **253.5 SAFE HANDLING, INSPECTION, AND STORAGE**

Corrections Deputies shall maintain the highest level of safety when handling firearms and shall consider the following:

- (a) Corrections Deputies shall not unnecessarily display or handle any firearm.
- (b) Corrections Deputies shall be governed by all rules and regulations pertaining to the use of the range and shall obey all orders issued by the Armorer. Corrections Deputies shall not dry fire or practice quick draws except under Armorer supervision.
- (c) Corrections Deputies shall not clean, repair, load, or unload a firearm anywhere in the Office, except where clearing barrels are present.
- (d) Shotguns or rifles removed from vehicles or the equipment storage room shall be loaded and unloaded in the parking lot and outside of the vehicle, using clearing barrels.
- (e) Corrections Deputies shall not place or store any firearm or other weapon on office premises except where the place of storage is locked. No one shall carry firearms into the jail section or any part thereof when securing or processing an arrestee, but shall place all firearms in a secured location. Corrections Deputies providing access to the jail section to persons from outside agencies are responsible for ensuring firearms are not brought into the jail section.
- (f) Corrections Deputies shall not use any automatic firearm, heavy caliber rifle, gas, or other type of chemical weapon or firearm from the armory, except with approval of a supervisor.
- (g) Any firearm authorized by the Office to be carried on- or off-duty, that is determined by a corrections deputy to be malfunctioning or in need of service or repair, shall not be carried. It shall be promptly presented to the Office or a Armorer approved by the Department for inspection and repair. Any firearm deemed in need of repair or service by the Armorer will be immediately removed from service. If the firearm is the corrections deputy's primary duty firearm, a replacement firearm will be issued to the corrections deputy until the duty firearm is serviceable.

##### 253.5.1 INSPECTION AND STORAGE

Handguns shall be inspected regularly and upon access or possession by another person. Shotguns and rifles shall be inspected at the beginning of the shift by the corrections deputy to whom the weapon is issued. The corrections deputy shall ensure that the firearm is carried in the proper condition and loaded with approved ammunition. All firearms shall be pointed in a safe direction or into clearing barrels.

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Office-owned firearms shall be stored in the appropriate equipment storage room. Handguns may remain loaded if they are secured in an appropriate holster. Shotguns and rifles shall be unloaded in a safe manner and then stored in the appropriate equipment storage room.

#### **253.5.2 STORAGE AT HOME**

Corrections Deputies shall ensure that all firearms and ammunition are locked and secured while in their homes, vehicles, or any other area under their control, and in a manner that will keep them inaccessible to children and others who should not have access. Corrections Deputies shall not permit office-issued firearms to be handled by anyone not authorized by the Office to do so. Corrections Deputies should be aware that negligent storage of a firearm could result in civil liability.

#### **253.5.3 ALCOHOL AND DRUGS**

Firearms shall not be carried by any corrections deputy, either on- or off-duty, who has consumed an amount of an alcoholic beverage, has taken any drugs or medication, or has taken any combination thereof that would tend to adversely affect the corrections deputy's senses or judgment.

#### **253.6 FIREARM DISCHARGE**

Except during training or recreational use, any corrections deputy who discharges a firearm intentionally or unintentionally, on- or off-duty, shall make a verbal report to their supervisor as soon as circumstances permit. If the discharge results in injury or death to another person, additional statements and reports shall be made in accordance with the office officer-involved shooting protocol. If a firearm was discharged as a use of force, the involved corrections deputy shall adhere to the additional reporting requirements set forth in the Use of Force Policy.

In all other cases, written reports shall be made as follows:

- (a) If on-duty at the time of the incident, the corrections deputy shall file a written report with their Chief Deputy or provide a recorded statement to investigators prior to the end of shift, unless otherwise directed.
- (b) If off-duty at the time of the incident, the corrections deputy shall file a written report or provide a recorded statement no later than the end of the next regularly scheduled shift, unless otherwise directed by a supervisor.

#### **253.6.1 WARNING AND OTHER SHOTS**

Generally, warning shots or shots fired for the purpose of summoning aid are discouraged and may not be discharged unless the corrections deputy reasonably believes that they appear necessary, effective, and reasonably safe.

#### **253.7 FLYING WHILE ARMED**

The Transportation Security Administration (TSA) has imposed rules governing law enforcement officers flying armed on commercial aircraft. The following requirements apply to corrections deputies who intend to be armed while flying on a commercial air carrier or flights where screening is conducted (49 CFR 1544.219):

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- (a) Corrections Deputies wishing to fly while armed must be flying in an official capacity, not for vacation or pleasure, and must have a need to have the firearm accessible, as determined by the Office based on the law and published TSA rules.
- (b) Corrections Deputies must carry their Mason County Sheriff's Office identification card, bearing the corrections deputy's name, a full-face photograph, identification number, the corrections deputy's signature, and the signature of the Sheriff or the official seal of the Office and must present this identification to airline officials when requested. The corrections deputy should also carry the standard photo identification needed for passenger screening by airline and TSA officials (e.g., driver license, passport).
- (c) The Mason County Sheriff's Office must submit a National Law Enforcement Telecommunications System (NLETS) message prior to the corrections deputy's travel. If approved, TSA will send the Mason County Sheriff's Office an NLETS message containing a unique alphanumeric identifier. The corrections deputy must present the message on the day of travel to airport personnel as authorization to travel while armed.
- (d) An official letter signed by the Sheriff authorizing armed travel may also accompany the corrections deputy. The letter should outline the corrections deputy's need to fly armed, detail their itinerary, and include that the corrections deputy has completed the mandatory TSA training for a law enforcement officer flying while armed.
- (e) Corrections Deputies must have completed the mandated TSA security training covering corrections deputies flying while armed. The training shall be given by the office-appointed instructor.
- (f) It is the corrections deputy's responsibility to notify the air carrier in advance of the intended armed travel. This notification should be accomplished by early check-in at the carrier's check-in counter.
- (g) Any corrections deputy flying while armed should discreetly contact the flight crew prior to take-off and notify them of their assigned seat.
- (h) Discretion must be used to avoid alarming passengers or crew by displaying a firearm. The corrections deputy must keep the firearm concealed on their person at all times. Firearms are not permitted in carry-on luggage and may not be stored in an overhead compartment.
- (i) Corrections Deputies should try to resolve any problems through the flight captain, ground security manager, TSA representative, or other management representative of the air carrier.
- (j) Corrections Deputies shall not consume alcoholic beverages while aboard an aircraft, or within eight hours prior to boarding an aircraft.

#### **253.8 CARRYING FIREARMS OUT OF STATE**

Qualified, active, full-time corrections deputies of this office are authorized to carry a concealed firearm in all other states subject to the following conditions (18 USC § 926B):

- (a) The corrections deputy shall carry their Mason County Sheriff's Office identification card whenever carrying such firearm.

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- (b) The corrections deputy may not be the subject of any current disciplinary action.
- (c) The corrections deputy may not be under the influence of alcohol or any other intoxicating or hallucinatory drug.
- (d) The corrections deputy will remain subject to this and all other office policies (including qualifying and training).

Corrections Deputies are cautioned that individual states may enact local regulations that permit private persons or entities to prohibit or restrict the possession of concealed firearms on their property, or that prohibit or restrict the possession of firearms on any state or local government property, installation, building, base, or park. Federal authority may not shield a corrections deputy from arrest and prosecution in such locally restricted areas. Active permits from other states are subject to all requirements set forth in 18 USC § 926B.

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

# 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
- Corrections Code of ethics
- Employee Core Values
- Mason County Personnel policy manual
- Sheriff Department Policy Manual
- Mason County Custody Manual
- Employee rights and responsibilities
- Overview of the criminal justice system
- Tour of the facility
- Tour of the Sheriff's Office
- Tour of MACECOM
- Tour of Shelton Police Department
- Tour of Mason County Criminal Justice Campus
- Corrections Division goals and objectives
- Corrections Division Purpose and Mission
- Sheriff's Office Vision Statement
- Sheriff's Office Mission Statement
- Facility organization
- Staff rules and regulations
- Program overview
- Ride along with Operations
- Orientation with Civil Division

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- Orientation with Financial Division
- Evidence

#### **302.3 EMPLOYEE ACKNOWLEDGEMENTS**

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

A Sergeant or above will collect a signature page from the employee, acknowledging receipt, review and understanding of the documents. A copy of the signature page shall be retained in the employee's personnel file in accordance with established records retention schedules (WAC 44-14-03005).

## Continuing Professional Education

### 304.1 PURPOSE AND SCOPE

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

#### 304.1.1 PHILOSOPHY

The Mason County Sheriff's Office seeks to encourage continuing education whenever practical. All continuing education programs will be within the framework of negotiated employee agreements and the availability of funds to provide ongoing efforts for self improvement.

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

### 304.2 OBJECTIVES

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

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

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

### 304.3 REQUIRED TRAINING

Every Corrections Deputy, having responsibility for the care and custody of inmates in the Mason County Jail, shall possess a basic Corrections Deputy Training Certificate issued by the Washington State Criminal Justice Training Commission within six months of their employment. In addition to the County mandated training, Corrections Deputies will participate in the following departmentally designated mandatory training requirements:

1. Unarmed defensive tactics-yearly;
2. Firearms training-yearly;
3. Firearms qualification-yearly;
4. First aid-current certification.
5. Jail Legal Issues
6. Inmate Suicide prevention
7. PREA-every other year



# 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.

## **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 managers and supervisors (full- or part-time) are required to have management and supervision training as specified by the Washington State Criminal Justice Training Commission (WSCJTC) within the first year of their appointment.

Managers shall hold the supervisory certificate of the training commission, successfully complete a middle management course provided by the training commission and at least 40 additional elective training hours on topics that are intended or approved for the middle management position (WAC 139-25-110).

## **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 Supervisor 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
- The name of the person coordinating the training

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It shall be the responsibility of the involved employee to provide his/her immediate supervisor or the Training Supervisor with evidence of completed training or education in a timely manner. The Training Supervisor 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 (WAC 44-14-03005).

## Jail Training Officer

### **308.1 PURPOSE AND SCOPE**

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

### **308.2 TRAINING OFFICER**

The TO is an experienced corrections deputy trained in the art and science of supervising, training, and evaluating entry-level corrections deputies in the application of their previously acquired knowledge and skills.

#### **308.2.1 SELECTION PROCESS**

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

- (a) A desire to be an FTO.
- (b) A minimum of 24 months employment with this Department in the Corrections Division.
- (c) Demonstrated ability as a positive role model.
- (d) Successfully passed an internal oral interview selection process.
- (e) An evaluation by supervisors and current FTOs.
- (f) Ability to complete the 40 hour State certified FTO course by the Washington State Criminal Justice Training Commission, upon selection.

#### **308.2.2 TRAINING**

A corrections officer selected as a Field Training Officer shall successfully complete a CJTC Certified (40-hour) Field Training Officer's Course prior to being assigned as an FTO.

### **308.3 TRAINING OFFICER RESPONSIBILITIES**

The TO's responsibilities include the following:

- (a) TOs shall complete and submit a written evaluation on the performance of their assigned trainees to the TO's immediate supervisor on a daily basis.
- (b) TOs shall review the performance evaluations with the trainees each day.
- (c) TOs shall be responsible for signing off all completed topics contained in the training manual, noting the methods of learning and evaluating the performance of the assigned trainee.

### **308.4 TRAINING OFFICER PROGRAM SUPERVISOR**

The TO program supervisor will be selected from the rank of sergeant or above by the Jail Chief Deputy or the authorized designee and shall possess a supervisory certificate from the Washington State Criminal Justice Training Commission (WAC 139-25-110). The supervisor's responsibilities include the following:

- (a) Assign trainees to TOs

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

#### **308.5 IMMEDIATE SUPERVISOR RESPONSIBILITIES**

The immediate supervisor shall be responsible for the following:

- a. Ensuring that the FTO and trainee are assigned work details together, that allow for continuous training opportunities.
- b. Monitoring the FTO's daily performance and reporting any problems to the Training Coordinator.
- c. Review the Daily Trainee Performance Evaluations and forward them to the Field Training Coordinator.
- d. Review the trainee's training checklist weekly, to ensure that training documentation is complete.
- f. Attend FTO meetings, to discuss the progress of the trainee with other shift supervisors, Field Training Officers, and the Field Training Coordinator.

#### **308.6 POLICY**

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

# Training

## **311.1 PURPOSE AND SCOPE**

This policy establishes training requirements and guidelines for corrections deputies, support personnel, supervisors, and managers. The policy addresses the training program and the probationary evaluation.

## **311.2 MINIMUM TRAINING REQUIREMENTS**

All corrections deputies, full- or part-time, shall begin orientation and training as described in RCW 43.101.220 and in accordance with WAC 139-10-210, within six months from the date of assignment, unless an extension or waiver has been granted by the Criminal Justice Training Commission. Corrections Deputies shall also successfully complete the training.

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 corrections deputy.

## **311.3 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 field training program consists of the three (3) training phases, an observation period, and a solo performance evaluation period as described below.

### **311.3.1 FIRST PHASE - FACILITY ORIENTATION**

The trainee will be assigned to an 40 hour orientation period, reporting to Jail support personnel and/or day shift Supervisor, and generally work 0800-1600 with weekends off.

- (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) Ensure the trainee is provided with any required uniform, equipment or materials.
- (d) Tour the entire facility and support services with the trainee. This includes MACECOM, Shelton Police Department, and the Court systems.
- (e) Introduce the trainee to the Jail Chief Deputy and key supervisory, administrative and support personnel. Allow the trainee time to read all appropriate Department and County policies and Manuals.
- (f) Partake in County provided new hire trainings.
- (g) Ride with patrol for 1- 8 hour shift.
- (h) Orient with Warrants for 2 hours and jail records for 1 hour.
- (i) Document completion of Orientation in the training checklist.
- (j) Allow the trainee to shadow the FTO in unarmed job tasks.

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- (k) Assist the trainee with firearms, unarmed defensive tactics, pepper spray, and conductive energy device training.

#### **311.3.2 SECOND PHASE - ACADEMY**

This phase is to be successfully completed at the Washington State Criminal Justice Training commission's Basic Corrections Academy.

Due to the inability to guarantee a Basic Corrections Academy start date, after completion of Phase 1, a temporary progression to Phase 3 may be implemented in some cases, while awaiting the Basic Corrections Academy.

#### **311.3.3 THIRD PHASE - HANDS-ON WITH CLOSE SUPERVISION**

During this phase, usually a 12 week duration, the FTO 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 FTO.

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

The work performance of the trainee will be evaluated and recorded daily by the FTO on the Daily Observation Report. Areas of deficiency will be discussed and remedial training provided if deemed necessary by the FTO.

#### **311.3.4 SOLO WITH MONITORING**

During this phase, usually two 12 hour shifts, the trainee will be directed to work solo in each area that training has been provided.

The solo activities of the trainee will be monitored by the FTO.

The work performance of the trainee will be evaluated and recorded on the Daily Observation Report by the FTO. Areas of deficiency will be discussed and remedial training provided if deemed necessary by the FTO.

#### **311.3.5 WORKING INDEPENDENTLY WITH SUPERVISION**

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

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

#### **311.4 PROBATIONARY PERIOD EVALUATION**

Probationary employees will receive a written evaluation of their job skills and learning progress at least once during their probationary period. Prior to passing the probationary period, 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.

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#### **311.5 POLICY**

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

## Specialized Training

### 314.1 PURPOSE AND SCOPE

Corrections Deputies who are assigned to specialized 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 unit, corrections deputies are required to be off probation and to have at least one year of experience as a corrections deputy.

### 314.3 TRAINING

The Training Supervisor is responsible for ensuring that all personnel who are assigned to a specialized unit will receive not less than 8 hours of specialized training as specified above or as part of their training requirement.

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

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



# Prison Rape Elimination Act Training

## 318.1 PURPOSE AND SCOPE

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

## 318.2 POLICY

The Mason 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.

Individuals who are considered professional visitors, e.g. legal counsel or investigators, will be advised of the office policy on sexual abuse and the provisions of the PREA.

Professional visitors may be required to sign and acknowledgement that they have read and understand the Department policy on sexual abuse.

## 318.3 MEMBER TRAINING

All staff, volunteers and contractors who may have contact with inmates shall receive office-approved training on the prevention and detection of sexual abuse and sexual harassment within this facility. The Training Supervisor 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 Supervisor shall be responsible for developing and administering this training, covering at minimum (28 CFR 115.31; 28 CFR 115.32):

- The zero-tolerance policy for sexual abuse and sexual harassment and how to report such incidents.
- The dynamics of sexual abuse and sexual harassment in confinement.
- The common reactions of sexual abuse and sexual harassment victims.
- Prevention and intervention techniques to avoid sexual abuse and sexual harassment in the jail.
- Procedures for the investigation of a report of sexual abuse and/or sexual harassment.
- Individual responsibilities under sexual abuse and sexual harassment prevention, detection, reporting and response policies and procedures.
- An individual's right to be free from sexual abuse and sexual harassment.
- The right of inmates to be free from retaliation for reporting sexual abuse and sexual harassment.
- How to detect and respond to signs of threatened and actual sexual abuse.

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- How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex or gender non-conforming inmates.
- How to comply with relevant laws related to mandatory reporting of sexual abuse and sexual harassment to outside authorities.
- 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 the staff has 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 Supervisor 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 staff receiving training in accordance with procedures developed by the Training Supervisor.

The Training Supervisor 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).

The training shall be through the PREA learning Center at: <https://NIC.learn.com>

#### **318.4 SPECIALIZED MEDICAL TRAINING**

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

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

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

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

#### **318.5 SPECIALIZED INVESTIGATIVE TRAINING**

Specialized investigative training for investigators shall include the uniform evidence protocol to maximize potential for obtaining useable physical evidence; techniques for interviewing sexual abuse victims; proper use of *Miranda* and *Garrity* warnings; sexual abuse evidence collection

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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

### **320.1 PURPOSE AND SCOPE**

The purpose of this policy is to establish an orientation period for all new health care staff working in the facility, 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 Department.

### **320.2 NEW HEALTH CARE STAFF ORIENTATION**

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

- The purpose, goals, policies and procedures for the Mason County Sheriff's Office
- Security and contraband regulations
- Access control to include use of keys
- Appropriate conduct with inmates
- Responsibilities and rights of facility employees and contractors
- Universal and standard precautions
- Occupational exposure
- Personal protective equipment (PPE)
- Biohazardous waste disposal
- An overview of the correctional field as it relates to custody functions
- Issues relating to manipulation of staff by inmates, identification of behaviors and tactics and the approved responses to these acts including notification of supervisors
- Health care delivery protocols

### **320.3 HEALTH CARE STAFF REFRESHER TRAINING**

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

### **320.4 TESTING**

All training delivered to qualified health care professionals should include a testing component to document that the employees understand the subject material.

### **320.5 TRAINING RECORDS**

The Training Supervisor, in coordination with the Responsible Physician, shall be responsible for developing and maintaining training records in accordance with established records retention

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schedules (WAC 44-14-03005). The Training Supervisor shall also maintain a file of professional licensure and certifications for each member of the health care staff.

# Volunteer Program

## 322.1 PURPOSE AND SCOPE

It is the policy of this department 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 corrections officers and other personnel. Volunteers can be an important part of any organization and are proven to be a valuable asset to corrections institutions.

### 322.1.1 DEFINITION OF VOLUNTEER

An individual who performs a service for the Department without promise, expectation or receipt of compensation for services rendered. This may include unpaid chaplains, inmate reentry programs personnel and persons providing administrative support.

## 322.2 VOLUNTEER PROGRAM MANAGEMENT

### 322.2.1 PROGRAM COORDINATOR

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

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

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

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

#### 322.2.2 RECRUITMENT

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

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

#### 322.2.3 SCREENING

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

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

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

See attachment: Volunteer Application 031418.pdf

#### 322.2.4 SELECTION AND PLACEMENT

Service as a volunteer with the Department 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 Department, normally the program coordinator. No volunteer should begin an assignment until he/she has been officially accepted for the position. Each volunteer should complete 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 consistent with their knowledge, skills, abilities and the needs of the facility.

Criteria:

- 21 years of age
- No outstanding warrants or protective orders
- No felony convictions within the last three years

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- No alcohol or drug related misdemeanor convictions within the last year
- No drug use within the last year
- No incarceration history within the last 2 years
- Volunteers may be temporarily suspended from program participation if a family member is in custody.
- Must remain active within the last 6 months.
- No personal involvement with inmates
- Must complete applications fully, omission of information may result in denial

#### 322.2.5 TRAINING

The program coordinator or the authorized designee shall be responsible for developing and maintaining training curriculum and any related forms specific to volunteer assignments. The program coordinator or the authorized designee shall be responsible for ensuring that volunteers are provided with an orientation program to acquaint them with the Department, 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) Department and Corrections policies and procedures
- (b) Rules related to contraband in the facility
- (c) Prohibition on carrying weapons in the facility
- (d) Volunteer/offender relationship and general rules of conduct
- (e) Safety and emergency information
- (f) An overview and history of the Office
- (g) Prison Rape Elimination Act
- (h) Criminal Justice Information Security

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

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

Training should reinforce to volunteers they may not intentionally represent themselves as, or by omission infer, they are corrections deputies or other employees of the Department. They shall always represent themselves as volunteers.

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



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##### **322.2.6 FITNESS FOR DUTY**

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

Volunteers shall report to their supervisor any changes in status affecting 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 might impair the volunteer's ability to perform the duties of the position
- (c) Arrests
- (d) Criminal investigations
- (e) The detention of family members, work associates or immediate friends

Volunteers shall adhere to the guidelines set forth by this department regarding drug and alcohol use.

##### **322.2.7 DRESS CODE**

As representatives of the Department, 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 department-approved dress in accordance with their duty assignment. If issued, uniforms authorized for volunteers should be readily distinguishable from those worn by corrections officers. 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 department 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 department property at the termination of service.

##### **322.3 SUPERVISION OF VOLUNTEERS**

Each volunteer who is accepted to a position with the Department 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 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:

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- (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 tapping these valuable resources.

#### **322.4 HEALTH CARE VOLUNTEERS**

The program coordinator will coordinate volunteer activities with the health care staff. Health care volunteers will be subject to the volunteer, recruitment, selection and training requirements of the Department. The qualified health care professionals may have additional requirements and training for health care volunteers.

The program coordinator shall ensure volunteers performing health care duties possesses the appropriate credentials and training, in coordination with the health care staff, and shall ensure signed agreement forms pertaining to the security and confidentiality of information are on file with the Department.

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

#### **322.5 CONFIDENTIALITY**

With appropriate security clearance, volunteers may have access to confidential information, such as criminal histories or investigative files. Unless otherwise directed by a supervisor or office policy, information shall be considered confidential. Only 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 department policy and supervisory personnel.

Each volunteer will be required to sign a nondisclosure agreement before being given an assignment with the Department. Subsequent unauthorized disclosure of 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 information concerning the activities of the Department, or maintain they represent the Department in such matters without permission from the proper department personnel.

#### **322.6 PROPERTY AND EQUIPMENT**

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

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

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##### **322.6.1 VEHICLE USE**

Volunteers assigned duties requiring the use of a vehicle must first complete:

- (a) A safety briefing and department-approved driver-safety course.
- (b) Verification the volunteer possesses a valid driver license.
- (c) Verification the volunteer carries current vehicle insurance.

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

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

##### **322.6.2 TELECOMMUNICATION SYSTEMS USAGE**

Volunteers with access to law enforcement telecommunication systems shall successfully complete 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 appropriate training is provided for volunteers whenever necessary.

#### **322.7 DISCIPLINARY PROCEDURES/TERMINATION**

A volunteer may be removed from the volunteer program at the discretion of the Sheriff, Jail Chief Deputy or the program coordinator. Volunteers shall have no property interests in their continued appointment.

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

##### **322.7.1 EXIT INTERVIEWS**

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

#### **322.8 EVALUATION**

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

#### **322.9 VOLUNTEER REGISTRATION**

All volunteers shall be registered with the Department for insurance purposes, and each volunteer shall be issued an identification card. The facility shall maintain an identification record for each volunteer that includes a photograph, home address, current telephone numbers, background

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certification, training/orientation certifications, and list of special skills, languages spoken or volunteer specialty.

## Briefing Training

### 324.1 PURPOSE AND SCOPE

Briefing training is generally conducted at the beginning of the corrections deputy's assigned shift. Briefing training provides an opportunity for an important exchange of information between employees and supervisors.

### 324.2 POLICY

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

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

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

### 324.3 COMPUTER-BASED TRAINING OPTIONS

The Lexipol Daily Training Bulletins (DTBs) is a web-based system that provides training on the Mason 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 Department.

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

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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.

#### **324.4 TRAINING RECORDS**

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

# Training Plan

## **326.1 PURPOSE AND SCOPE**

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

## **326.2 POLICY**

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

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

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

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

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

## **326.3 TRAINING SUPERVISOR**

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

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

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

## **326.4 TRAINING RECORDS**

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

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

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

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

Training records shall contain the following information:

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

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

#### **326.5 COURSE CERTIFICATION/QUALITY ASSURANCE**

Training courses should be subject to a quality assurance process that, at minimum, provides:

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

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

#### **326.6 TRAINING COMMITTEE**

The Training Supervisor shall serve as the Corrections Division representative for the Sheriff's Office training committee, which will serve to assist with identifying training needs for the Office. The training committee shall be comprised of at least three members, with the senior ranking member of the committee acting as the chairperson. Members should be selected based on their abilities at post-incident evaluation and at assessing related training needs.



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

#### **326.7 TRAINING PROCEDURES**

- (a) All employees assigned to attend training shall attend as scheduled, unless previously excused by their immediate supervisor or the Training Supervisor. Excused absences from mandatory training should be limited to the following:
  - 1. Court appearances
  - 2. Authorized vacation
  - 3. Sick leave
  - 4. Physical limitations preventing the employee's participation
  - 5. Emergency situations
  - 6. Leave under state or federal law (e.g., Family Medical Leave Act)
- (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 Supervisor to attend the required training on an alternate date.

# Support Personnel Orientation and Training

## **328.1 PURPOSE AND SCOPE**

The Office has developed an orientation and training program for support and contractor personnel, whether full- or part-time, to increase competency in their assigned tasks and to help ensure that all support personnel understand the issues that are unique to their position as it relates to this facility.

## **328.2 TRAINING SUPERVISOR RESPONSIBILITIES**

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

## **328.3 PART-TIME PERSONNEL**

Support personnel working part-time, including contractors, shall receive formal orientation and training commensurate with the scope of their work assignments, as determined by the Jail Chief Deputy, before assignment to duties within the facility. At a minimum, the orientation and training should include:

- Safety and security
- Facility regulations
- Facility operations
- Guidelines for conduct with inmates

Support and contract personnel who fail to successfully complete all required training shall not be permitted to work in the secure portions of the facility.

## **328.4 PERSONNEL WITH MINIMAL INMATE CONTACT**

Support personnel, including contractors, whose positions involve minimal contact with inmates shall receive orientation and training commensurate with the scope of their work.

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

- Safety and security
- Custody policies and procedures
- Emergency procedures
- Job-specific training

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- Washington State Criminal Justice Training Commission Support Services Academy (subject to course offerings and available funding)

#### **328.5 PERSONNEL WITH REGULAR INMATE CONTACT**

Support personnel, including contractors, whose positions involve regular or daily inmate contact shall receive orientation and training commensurate with the scope of their work.

Regular inmate contact is defined as tasks that involve the direct provision of services to inmates (e.g., custody assistants, vocational supervisors, teachers, food services, commissary, chaplain) but that do not involve the custodial supervision of inmates in the areas of discipline and control. Orientation and training topics shall include but are not limited to the following:

- Safety and security
- Emergency procedures
- Staff responsibilities
- Guidelines for conduct with inmates
- Aspects and dynamics of the custody environment
- Restricted movement and access according to job function
- Supervision of inmates
- Suicide awareness and dynamics
- Use of force
- Inmate rules and regulations
- Inmate rights and responsibilities
- CPR and first aid
- Zero-tolerance policy and the identification, response, and reporting requirements of sexual abuse and harassment

#### **328.6 TESTING**

All training delivered to support personnel should include testing to document that the employee understands the subject material presented.

#### **328.7 POLICY**

It is the policy of the Mason County Sheriff's Office to establish minimum training guidelines for support and contract personnel.

## **Chapter 4 - Emergency Planning**

## Facility Emergencies

### 400.1 PURPOSE AND SCOPE

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

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

### 400.2 POLICY

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

### 400.3 PROCEDURE

The Jail Chief Deputy should develop, publish and review emergency response plans that address the following:

- (a) Escapes
- (b) Disturbances/Riots
- (c) Taking of hostages
- (d) Civil disturbances
- (e) Natural disasters
- (f) Periodic testing of emergency equipment
- (g) Other emergencies as needs are identified

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

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

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

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

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#### **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 the Control Room and the Shift Supervisor. The Shift Supervisor, or in his/her absence the Officer in Charge (OIC), may determine whether to order a partial or full lockdown of the facility and shall notify the Jail Chief Deputy as soon as practicable.

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

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

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

##### **400.4.1 COMMUNICATION**

If deemed necessary, the Shift Supervisor may request that the telephone company cut, reroute or divert telephone lines for the purpose of preventing telephone communication between the inmates and any person other than a peace officer or a person authorized by the Shift Supervisor (RCW 70.85.110 and RCW 70.85.100).

##### **400.4.2 COMMUNICATION**

If deemed necessary, the Shift Supervisor may order the Control Room Operator to turn off the telephones in the line cells, library, recreation, and booking areas, for the purpose of preventing telephone communication between the inmates and any person other than a peace officer or a person authorized by the Shift Supervisor.

#### **400.5 HUNGER STRIKE**

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

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

##### **400.5.1 NOTIFICATION OF QUALIFIED HEALTH CARE PROFESSIONALS**

The Jail Chief Deputy 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.

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Qualified health care professionals should monitor the health of inmates involved in the hunger strike and make recommendations to the Jail Chief Deputy or the supervisory staff responsible for oversight of the incident.

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

#### **400.5.2 RESPONSE TO HUNGER STRIKES**

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

If the hunger strike remains unresolved, the Jail Chief Deputy may direct the appropriate staff to examine the inmate commissary purchases made in advance of the hunger strike, and to monitor commissary purchases made during the hunger strike. Additional staff should be directed to observe the cell area, including trash containers, of the inmates involved for evidence of food items purchased from the commissary and of food hoarding.

#### **400.5.3 LEGAL GUIDANCE**

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

#### **400.6 RESPONSE TO DISTURBANCES**

The staff should attempt to minimize the disruption to normal facility operations caused by a disturbance by attempting to isolate the disturbance to the extent possible. The staff should immediately notify the Shift Supervisor or the Jail Chief Deputy of the incident. The Shift Supervisor or Jail Chief Deputy may direct additional staff as needed to resolve the disturbance.

##### **400.6.1 NOTIFICATIONS**

The Shift Supervisor should notify the Jail Chief Deputy of the disturbance as soon as practicable. Based on the seriousness of the event, the Jail Chief Deputy should notify the Sheriff.

##### **400.6.2 NOTIFICATION OF QUALIFIED HEALTH CARE PROFESSIONALS**

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

##### **400.6.3 REPORTING**

The Shift Supervisor or Jail Chief Deputy 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 an unruly inmate or inmates 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 inmate-on-inmate violence but should take measures to avoid being engulfed in the problem, thereby exacerbating the situation.

##### 400.7.1 RESPONSE TO RIOTS

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

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

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

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

##### 400.7.2 QUALIFIED HEALTH CARE PROFESSIONAL RESPONSE

A supervisor or the authorized designee should notify the 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 Shift Supervisor or a responsible staff member shall notify the Jail Chief Deputy, who in turn, shall notify the Sheriff.

##### 400.7.4 REPORTING

The Jail Chief Deputy or Shift Supervisor shall direct that a report be written detailing the incident by the end of the shift. If appropriate, a crime report will also be prepared by the responsible law enforcement agency.

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

It is the policy of the Mason County Sheriff's Office to use all available resources necessary to bring about a successful end to a hostage situation.

##### **400.8.1 RESPONSE TO HOSTAGE INCIDENT**

Control Room should immediately be notified at the earliest sign of a hostage incident. Control Room shall notify the Shift Supervisor and Jail Chief Deputy. The Jail Chief Deputy will notify the Sheriff as soon as practicable.

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

##### **400.8.2 NOTIFICATION OF QUALIFIED HEALTH CARE PROFESSIONALS**

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

##### **400.8.3 HOSTAGE RESCUE**

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

##### **400.8.4 REPORTING AND DEBRIEFING**

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

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##### **400.9 ESCAPES**

Upon being made aware that an escape may have occurred, or did in fact occur from the jail facility, the staff member should immediately notify the Control Room Officer/Operator. The Control Room Officer/Operator should notify the all staff members and the Shift Supervisor or Jail Chief Deputy. As soon as practicable, the Jail Chief Deputy should notify the Sheriff.

Once the escape is verified and immediate actions taken inside the facility (lockdown, etc.), the Control Room Officer/Operator should notify MACECOM to contact all local law enforcement agencies.

Should an inmate escape from the personal custody of a Corrections Officer, outside of the jail facility, that Corrections Officer should immediately notify the Control Room Officer/Operator and the Shift Supervisor. The Control Room Officer/Operator should notify the Communications Center for the area that the escape occurred.

Once notification has been made, the Corrections Officer will pursue the escapee if the escapee was the only inmate in personal custody, or remain in place if other inmates are in personal custody, maintaining security of other inmates.

##### **400.9.1 INMATE COUNTS**

As soon as the facility is fully locked down, a full inmate/wristband count should be taken. All inmates who are outside of the secure perimeter of the facility (e.g., court, work details) should be located and identified. Any missing inmate should have his/her identity disclosed and his/her facility record should be accessed by the Jail Chief Deputy.

##### **400.9.2 SEARCH**

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

Corrections officers will develop a flyer with the inmate's name, description, the inmate's latest picture, charges, classification status, time of escape, and direction or method of escape, and supply it to the corrections staff, MACECOM, and local law enforcement. Local law enforcement should also be given the inmate's last known address and a list of his/her associates.

##### **400.9.3 REPORTING**

The Shift Supervisor or a designated staff member should submit an incident report to the Jail Chief Deputy. A crime report should also be written regarding the escape. The incident report should focus on events and physical plant weaknesses that contributed to the escape. The Jail Chief Deputy 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 Shift Supervisor should notify the Jail Chief Deputy. The Jail Chief Deputy should

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make the determination regarding the magnitude of the event and whether it warrants notification of the Sheriff.

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

In the event that the jail can no longer accept additional inmates without compromising the safety and security of the facility, mutual aid may be requested from allied counties.

#### **400.11 REVIEW OF EMERGENCY PROCEDURES**

The Jail Chief Deputy should ensure that there is a review of emergency procedures at least annually. This review should be documented with reports submitted to the Jail Chief Deputy 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:

- Assignment of persons to specific tasks in emergency situations.
- Instructions in the use of the alarm systems and signals.
- Systems for the notification of appropriate persons outside of the facility.
- Information on the location and use of emergency equipment in the facility.
- 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 Supervisor is responsible for developing and delivering appropriate initial training and annual refresher training.

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

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

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

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

## Emergency Staffing Plan

### 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 department to be prepared to operate a safe and secure facility in the event of a 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, Jail Chief Deputy or the authorized designee shall be responsible for ensuring that an appropriate emergency staffing plan exists.

#### 404.2.1 EMERGENCY STAFFING

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

- The facility may go to a lockdown. Minimum activities, including visiting, exercise and other programs will be suspended only if necessary. Meals, cleaning, medical services, court transportation and attorney visits will continue. Other activities will be assessed by the Jail Chief Deputy 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 Department who have custody experience may be used to fill vacancies in the facility.
- Assistance from allied agencies may be requested to help management and 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 Chief of Corrections and medical staff shall be notified in accordance with the Communicable Diseases Policy.

#### 404.2.2 LEGAL ASSISTANCE

Employees of this department may not participate in work stoppages or strikes (RCW 41.56.120).

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

#### 404.2.3 TRAINING

The Jail Chief Deputy or the authorized designee should be responsible for:

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

## Fire Safety

### 406.1 PURPOSE AND SCOPE

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

### 406.2 POLICY

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

The Jail Chief Deputy shall ensure that a fire alarm and automatic detection system 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.

#### 406.2.1 FIRE CODES

The Department 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

The Jail Chief Deputy 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 not be limited to:

- (a) Fire prevention, safety inspection plans and record retention schedules developed by designated staff or as required by applicable law.
- (b) 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.
- (c) An evacuation plan (see the Evacuation Plan Policy).
- (d) A plan for the emergency housing of inmates in case of fire.
- (e) The cross-training of responders and facility staff via drills, 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.

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

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

#### **406.5 FIREFIGHTING EQUIPMENT**

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

While the staff is not trained as fully qualified firefighters, the Jail Chief Deputy 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.

#### **406.6 INSPECTIONS**

The facility shall be inspected on an annual basis to ensure that fire safety standards are maintained. These inspections will be focused on, but not limited to, fire prevention, staff training and proficiency, firefighting equipment availability and functionality, alarms, fire detectors, fire safety equipment, and staff familiarity with prevention and suppression techniques, suppression pre-planning, emergency response, fire safety equipment use and the evacuation plan.

The Jail Chief Deputy or the authorized designee shall ensure that staff conduct fire and safety inspections of the facility and that all fire safety equipment is tested at least quarterly.

A staff member shall be assigned to coordinate with local or state fire officials for any required inspections. The result of all fire inspections and fire equipment testing shall be provided to the Jail Chief Deputy and the Sheriff and maintained for a minimum of two years.

##### **406.6.1 FLAMMABLE, TOXIC AND CAUSTIC MATERIALS**

The Jail Chief Deputy, in collaboration with the local environmental health expert, will review the type of materials introduced into the facility to ensure that they are controlled and used safely. All such materials will be safely stored and only used by inmates under the direction of the staff.

#### **406.7 EMERGENCY HOUSING OF INMATES**

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

#### **406.8 EVACUATION**

Corrections staff are responsible for the safe and orderly evacuation of inmates.



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Inmates will be supervised by and directed to their destination by corrections staff, using the most direct route.

Use of the elevator is prohibited during evacuation of inmates.

#### 406.8.1 SHORT TERM EVACUATION

The primary evacuation areas for short term evacuations are the outside recreation areas, the nearest outside cage, and the main sally port under armed guard.

Corrections staff will maintain direct supervision over inmates that have been moved to evacuation areas.

# Emergency Power and Communications

## 408.1 PURPOSE AND SCOPE

The Mason County Jail 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 Department 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 County to assure that there is sufficient emergency power to operate all essential lighting, security equipment, safety equipment and communications systems. The emergency power system should have sufficient fuel to allow the facility to operate continuously for a three-day period, if necessary, without external resources.

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

### 408.2.2 SAFETY AND SECURITY

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

### 408.2.3 INSPECTION AND TESTING

The County is responsible for scheduled testing of emergency power systems. 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 by a qualified individual at least quarterly.

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

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

# 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 Mason County Sheriff's Office Jail in case of fire and other emergency evacuations.

## 410.2 POLICY

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

## 410.3 EVACUATION PLAN

The Mason County Sheriff's Office maintains an evacuation plan to be implemented in the event of a fire, natural disaster or other emergency. At minimum the evacuation plan shall address the following:

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

The Jail Chief Deputy should ensure that the evacuation plan is maintained and updated as needed and is reviewed for accuracy at least annually by a qualified independent inspector and in coordination with the local fire authority.

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

The evacuation plan should be periodically reviewed for consistency with any county Department of Emergency Management plans.

### 410.3.1 EXITS

All exits in this facility should be distinctly and permanently marked. Exit signs and directional arrows for traffic flow 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.

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

#### **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 inmates.

#### **410.3.3 EMERGENCY HOUSING OF INMATES**

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

#### **410.4 TRAINING DRILLS**

The Jail Chief Deputy 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 inmates may participate. Violent and/or dangerous inmates or those known to be a flight risk will not be involved in the drills.

Drills should be designed to ensure that all staff members are proficient in their duties during each type of evacuation. Each drill should be documented as to its scope and participants.

## **Chapter 5 - Inmate Management**

# Population Management System

## 500.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a system of inmate population accounting which promotes the safety and security of the facility on a daily operational basis. It assembles data that enabling the Department to forecast staffing and facility growth needs into the future, and to plan for the associated expenditures.

## 500.2 POLICY

It is the policy of this facility an inmate population management system should be established and maintained to account for the admission, processing and release of inmates. The Jail Chief Deputy or the authorized designee is responsible for ensuring detailed daily reports of the facility's inmate population are completed and maintained by the staff. The reports shall reflect the average daily population of sentenced and nonsentenced inmates by categories of adult male, and adult female. The Sheriff or the authorized designee should maintain the data in an accessible format for historical purposes, trend analysis and to respond to funding opportunities.

### 500.2.1 DATA COLLECTION

For each reporting period, the report should include, but will not be limited to:

- (a) Current number of beds in:
  - 1. Compliance with local or state standards
  - 2. General housing
  - 3. Medical/mental health
- (b) Average Daily Population (ADP) for:
  - 1. Minimum security
  - 2. Maximum security
  - 3. High security
  - 4. Administrative segregation
- (c) Highest one-day inmate population
- (d) Number and percentage of:
  - 1. Bookings
  - 2. Male inmates
  - 3. Female inmates
  - 4. Non-sentenced inmates
  - 5. Felony inmates

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6. pretrial inmates released
  7. Sentenced inmates released early due to lack of space
  8. Inmates receiving psychotropic medication
- (e) Number of inmates:
1. Enrolled in work release program
  2. Enrolled in work furlough program
  3. Assigned to home electronic monitoring program
- (f) Number of:
1. Inmate-on-inmate assaults
  2. Inmate-on-staff assaults
  3. Escapes/attempted escapes
  4. Active misdemeanor warrants
  5. Active gross misdemeanor warrants
  6. Active felony warrants
  7. Inmate grievances and dispositions
  8. Inmate disciplinary reports and dispositions
- (g) Any other demographic information (e.g., gang activity)

The Jail Chief Deputy or the authorized designee is responsible for ensuring required information is supplied to the Washington Association of Sheriffs and Police Chiefs.



# Inmate Counts

## 502.1 PURPOSE AND SCOPE

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

## 502.2 POLICY

It is the policy of this Department to account for all inmates within and under the control of this facility through scheduled and other counts as needed.

## 502.3 PROCEDURE

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

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

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

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

A complete report of the incident will be prepared and provided to the Jail Chief Deputy and Sheriff as soon as practicable.

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

### 502.3.1 INMATE SURVEILLANCE

A direct staff observation count of each inmate will be performed during meal service, and marked on the headcount sheet.

Personal observation of inmates, in general population, by staff shall be at least once within every sixty-minute period. Video surveillance shall not substitute for personal staff observance.

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Personal observance of inmates, in special housing, by staff shall be according to each inmate's individual need.

- Suicide observation shall be at least once every 15 minutes;
- Behavior observation shall be at least once every 60 minutes;
- Medical observation shall be at least once every 60 minutes or as directed by medical staff;
- Mental health observation shall be at least once every 60 minutes, whenever there is a change in behavior, or as directed by mental health staff.

All personal staff observance of inmates shall be recorded on the jail daily log, individual observation log, or individual suicide log, for every observation round and retained in the jail records.

## Inmate Reception

### **504.1 PURPOSE AND SCOPE**

The Mason 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 all arrest or commitment paperwork is present to qualify the arrestee for booking. Required paperwork includes the following:

- (a) Arrest reports
- (b) Probable cause declarations
- (c) Citations, warrants or court orders
- (d) Victim notification information
- (e) Special needs related to religious practices, such as diet, clothing and appearance (see the Religious Programs Policy)
- (f) Accommodation requests related to disabilities (see the Inmates with Disabilities Policy)
- (g) Information regarding suicidal statements or actions
- (h) Arresting officers observations during arrest.
- (i) Medical screening including questions related to traumatic brain injuries, mental health, medications, and medical conditions.

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

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.

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##### **504.3.1 RECEIVING ARRESTEES**

The Jail Chief Deputy should ensure policies and procedures related to the admission process are communicated to law enforcement agencies which commonly bring arrestees to the jail for booking, including:

- (a) Arrestees in urgent need of medical attention should not be transported to this facility.
- (b) Arrestees brought to this facility should be properly restrained.
- (c) Transporting officer should stay until the arrestee has been searched, screened and accepted.
- (d) All information relevant and necessary to safely process and house the arrestee shall be requested from transporting officer.
- (e) Any inmate property restrictions.

##### **504.4 SEARCHES BEFORE ADMISSION**

All arrestees and their property shall be searched for contraband by the booking corrections deputy before being accepted for booking. All contraband items will be handled according to facility policy. Items of possible evidentiary value may be turned over to the arresting or transporting 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 Officer prior to the arrestee being accepted for booking. A description of the items returned to the transporting Officer shall be documented on the arrestee's booking record.

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

All arrestees shall be changed into a jail uniform and body scanned prior to acceptance. See policy 527. If an inmate is denied access after scanning, they will be changed back into their clothing prior to exiting the facility.

##### **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 corrections deputy and transporting corrections deputy, if different
- Health insurance information

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- Legal authority for confinement, including specific charges, arrest warrant information and court of jurisdiction
- Sex
- Age
- Date and place of birth
- Race
- Height and weight
- Occupation and current or most recent employment
- Preferred emergency contact, including name, address, telephone number and relationship to inmate
- Driver 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
- Fingerprints (RCW 43.43.745)
- Photographs, fingerprints and notation of any marks or physical characteristics unique to the inmate, such as scars, birthmarks, deformities or tattoos
- Medical, dental and mental health screening records, including suicide risk
- Inventory of all personal property including clothing, jewelry and money
- A record of personal telephone calls made at the time of booking or the time the opportunity was provided to place calls if the calls were not made
- Name of booking staff member

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

#### 504.5.1 LEGAL BASIS FOR DETENTION

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

#### 504.5.2 MISSING PERSON REPORT

When completing the admission process, if information from the National Crime Information Center, Washington Crime Information Center, or similar authority reveals that the arrestee is the subject of a missing person report, the Mason County Sheriff's Office shall notify the agency with original jurisdiction for the missing person report that the arrestee is in custody (RCW 68.50.320).

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##### **504.6 TRANSITION FROM RECEPTION TO GENERAL POPULATION**

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

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

##### **504.6.1 MONITORING FOR SIGNS OF INTOXICATION AND WITHDRAWAL**

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

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

##### **504.7 INMATE PROPERTY CONTROL**

All property received from inmates at the time of booking shall be inventoried, placed into a property locker and entered into the Property Take screen of the Spillman Booking System by category, with an accurate description, the quantity taken, and the property storage number. A receipt shall be signed by the booking corrections deputy, and the inmate. The receipt shall be referenced to the inmate name number and the booking number before the admission is completed. The original copy of the property receipt will be retained and placed in the inmate booking file. A second copy will be presented to the inmate at the time of booking. Inmates may refuse to sign for property, at the time of booking. If this occurs, the reason for the refusal will be documented on the receipt, and the intake officer and a witnessing officer will sign the receipt.

At no time shall a paper take form be used as a substitute for the Property Take screen in the Booking System.

A paper take form shall be used when an arrestee is brought into the jail for a cite and release, when corrections staff have possession of the property. Both the inventorying officer and the arrestee must sign the paper take.

We will not accept sharp edged or pointed items, syringes (unless for medical purposes), guns, E-cigarettes/vaporizers and their associated liquids, weapons, illegal drugs, marijuana, or alcohol.

Staff may allow inmates to retain medical identification necklaces and bracelets. Other forms of Jewelry will be removed inventoried and stored in the inmates property. The Shift Supervisor shall consult with medical staff prior to removing jewelry if it appears it may cause injury.

Only property that will fit in one (1) grocery sized property bag will be accepted.

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All excess property and items not allowed within the jail will be returned to the arresting/transporting officer.

Inmate personal property shall not be released once inventoried, unless released for program or legal needs.

Property will be held for 60 days after release of an inmate.

Unclaimed property will be delivered to the Sheriff's Office evidence technician for disposal/destruction in accordance with RCW 63.40.010.

- Sell (Public Auctions) RCW 63.40.020
- Retain (Department use) RCW 63.40.020
- Destroy RCW 63.40.010
- Trade (Law Enforcement Equipment) RCW 63.40.020
- Donate (Charitable Organization) RCW 63.40.060

#### **504.7.1 VERIFICATION OF INMATE'S MONEY**

All monies belonging to the inmate and retained by the booking corrections deputy shall be verified in front of the inmate. When possible, the inmate should initial the dollar amount on the booking sheet. All money should be placed in a separate envelope and sealed.

Negotiable checks or other instruments and foreign currency should also be sealed in an envelope with the amount indicated but not added to the cash total. Jewelry and other small property should also be sealed in an envelope. All envelopes should clearly indicate the contents on the front. The person sealing it should initial across the sealed flap. Should any money be withdrawn or added to the cash envelope, the person making the change shall enter the new amount below the original entry and initial it. The total amount of money in the envelope should always be computed and written on the outside of the envelope.

#### **504.7.2 PROPERTY STORAGE**

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

#### **504.8 INMATE TELEPHONE CALLS**

Every inmate, whether adult or juvenile, detained in this facility shall be allowed access to telephone during the booking process and prior to being housed in general population. The calls may be of a duration that reasonably allows the inmate to make necessary arrangements for matters that he/she may be unable to complete as a result of being arrested. The calls are not intended to be lengthy conversations and the custody staff may use their judgment in determining the reasonable duration of the calls. If it is determined that the person is a custodial parent with responsibility for a minor child, the person shall be entitled to make such additional telephone calls as reasonably necessary for the purpose of arranging care for the minor child.

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

#### **504.8.1 ONGOING TELEPHONE ACCESS**

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

#### **504.9 SHOWERING AND CLOTHING EXCHANGE**

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

#### **504.10 IMMIGRATION DETAINERS**

No individual should be held based solely on a federal immigration detainer under 8 CFR 287.7 unless the person has been charged with a federal crime or the detainer is accompanied by a judicial warrant (RCW 10.93.160).

##### **504.10.1 IMMIGRATION INQUIRIES**

Corrections Deputies shall not (RCW 10.93.160):

- (a) Inquire or collect information about an individual's immigration or citizenship status, or place of birth unless there is a connection between the information and an investigation into a violation of state or local criminal law.
- (b) Provide information pursuant to notification requests from federal immigration officials for the purpose of civil immigration enforcement, except as required by law.

No individual shall be held in custody solely for the purpose of determining immigration status (RCW 10.93.160).

##### **504.10.2 IMMIGRATION OFFICIAL INTERVIEWS**

Members shall not give federal immigration officials access to interview inmates about a noncriminal matter while in custody, except where allowed by state or federal law, court order, or by consent of the inmate (RCW 10.93.160).

Permission may be granted to a federal immigration official to conduct an interview regarding federal immigration violations with an inmate if the inmate consents in writing to be interviewed. The Mason County Sheriff's Office shall provide the inmate with an oral explanation and a written consent form that explains the purpose of the interview, the interview is voluntary, and that the inmate may decline to be interviewed or choose to be interviewed with the inmate's attorney present. The form must explicitly state that the inmate will not be punished or suffer retaliation for declining to be interviewed. The form shall minimally be available in English and Spanish. The form shall be explained orally to an inmate who is unable to read the form or, if necessary, explained



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by an interpreter from the Washington State Patrol (WSP) communications center language line or other WSP resources (RCW 10.93.160).

# Inmate Handbook and Orientation

## 506.1 PURPOSE AND SCOPE

This policy provides for the orientation of inmates booked into the Mason County Jail. The purpose of the orientation is to inform inmates of the jail routine, rules, inmate rights and services.

## 506.2 POLICY

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

### 506.2.1 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:

- (a) Facility rules and disciplinary sanctions
- (b) Correspondence, visiting, and telephone rules
- (c) Availability of personal care items and opportunities for personal hygiene
- (d) Inmate grievance procedure
- (e) Co-pays, fees, and charges
- (f) Medical, dental, and mental health services
- (g) Possibilities for pretrial release
- (h) Programs and activities, including application procedures
- (i) Classification/housing assignments and appeal procedures
- (j) Court appearance, where scheduled, if known
- (k) 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. Reporting sexual abuse or sexual harassment incidents, including how to report such incidents anonymously
  - 5. Treatment and counseling for victims of sexual abuse or sexual harassment

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6. Mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, state, or national victim advocacy or rape crisis organizations (28 CFR 115.53)
7. Information regarding confidentiality, monitoring and mandatory reporting
  - (l) Contacting foreign consuls
  - (m) Requests for religious accommodations
  - (n) Emergency procedures (e.g., fires, evacuations)
  - (o) Voting, including registering to vote
  - (p) Approved list of personal articles and materials
  - (q) Privileged mail as opposed to personal mail

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

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

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

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

#### **506.2.2 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 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.

#### **506.3 FEMALE INMATES**

Information regarding the use of restraints on inmates who are pregnant, in labor, or in postpartum recovery should be provided to all female inmates of childbearing age during intake (RCW 70.48.500; RCW 70.48.501).

# Inmate 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 60 minutes for all inmates, and for creating and maintaining a log to document all safety checks.

## 508.2 POLICY

It is the policy of the Mason County Sheriff's Office that all correctional staff shall conduct safety checks at least once every 60 minutes on all inmates, or more frequently, as determined by inmate 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 in accordance with the Jail Daily Activity Logs and Shift Reports Policy.

## 508.3 SAFETY CHECKS

The staff shall adhere to the following procedures when conducting safety checks:

- (a) Safety checks shall be conducted at least every 60 minutes and more frequently if necessary.
- (b) Safety checks should be conducted on an irregular schedule (staggered) so that inmates cannot predict when the checks will occur.
- (c) Safety checks shall be done by personal observation of the Corrections Deputy and shall be sufficient to determine whether the inmate is experiencing any stress, trauma, and well being.
- (d) Cameras and monitors may supplement the required visual observation safety checks but they shall not replace the need for direct visual observation.
- (e) Safety checks will be clearly documented on permanent logs in accordance with the Jail Daily Activity Logs and Shift Reports Policy.
- (f) Actual times of the checks and notations should be recorded on the daily activity logs.
- (g) Log entries shall never be made in advance of the actual check. Log entries made in this manner do not represent factual information and are prohibited.
- (h) Special management Inmates shall be checked more frequently as detailed in the Special Management Inmates Policy.

## Special Management Inmates

### 510.1 PURPOSE AND SCOPE

Inmates who pose a heightened risk to themselves or others require special management, including frequent interaction and increased supervision by staff. Interaction with special management inmates is essential to maintaining a safe, secure and humane environment. This policy establishes guidelines and procedures for interacting with special management inmates in the custody of the Mason County Jail.

#### 510.1.1 DEFINITIONS

Definitions related to this policy include:

**Administrative segregation** - The physical separation of an inmate who is prone to escape or assault staff or other inmates, or one who is mentally deficient, in need of medical isolation or infirmary status. This is a non-punitive classification process.

**Protective custody** - A level of custody either requested or required for an inmate's protection from others.

**Special management inmate** - An inmate who falls into either of the previously mentioned classifications.

**Restricted Housing**- Single cell occupancy. for Inmates assigned to either Protective custody or Administrative segregation.

### 510.2 POLICY

This department shall provide for the secure and segregated housing of any inmate, but shall not impose more deprivation of privileges than is necessary to obtain the objective of protecting the inmate, staff or the public.

Special Management inmates assigned to restricted housing are not allowed unsupervised contact with other inmates.

### 510.3 SPECIAL MANAGEMENT INMATES HOUSING CRITERIA

The safety and security of this facility is dependent on a classification system which identifies inmates who pose a risk to themselves or to others. Inmates who pose such a risk must be promptly and appropriately segregated from the general inmate population until such time they no longer pose a risk. Staff must have the ability to promptly segregate these inmates pending further review.

Individuals who may be classified as special management inmates include, but are not limited to, inmates who are:

- In protective custody or court-imposed segregation.
- Exhibiting mental health concerns.
- An escape threat.

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- A serious violence threat.
- Known to have gang affiliation.
- A known management problem.
- A suicide risk.
- Exhibiting medical issues.
- Physically impaired.

#### **510.4 CIRCUMSTANCES REQUIRING IMMEDIATE SEGREGATION**

Inmates will generally be assigned to segregation through the classification process. The Jail Chief Deputy or Shift Supervisor has the authority to immediately place any inmate into segregation when it reasonably appears necessary to protect the inmate or others (see the Disciplinary Segregation Policy).

Reasons an inmate may be placed into immediate segregation include the following:

- (a) The inmate requests protection or is under court-ordered protection, or the staff has determined the inmate requires protection.
- (b) There is reason to believe the inmate poses a danger to him/herself or others.
- (c) The inmate poses an escape risk.
- (d) The inmate requires immediate mental health evaluation and medical housing is not reasonably available.
- (e) The inmate is charged with a disciplinary infraction and is awaiting a disciplinary hearing. In the judgment of the staff, the inmate may become disruptive or dangerous if left in general population.
- (f) The inmate is in the process of being transferred to a higher security classification.
- (g) Other circumstances where, in the judgment of the staff, the inmate may pose a threat to him/herself, others or the security of the facility.

##### **510.4.1 REVIEW PROCESS**

The Jail Chief Deputy shall be notified through an incident report and inmate status form when any inmate is placed in immediate segregation and shall be informed of the circumstances leading to the order to segregate. Within 72 hours of the inmate being placed into segregation, the Jail Chief Deputy or the authorized designee must review the circumstances surrounding the segregation to determine which of the following actions shall be taken:

- (a) The inmate is designated for administrative segregation.
- (b) The inmate is designated for protective custody.
- (c) The inmate remains segregated pending a disciplinary hearing.
- (d) The inmate is returned to general inmate population.

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##### **510.5 PROTECTIVE CUSTODY**

The corrections deputy responsible for assigning classifications to incoming inmates shall clearly document the reason an inmate should be placed into protective custody. Inmates in need of protective custody may be placed in a segregation unit when there is documentation the protective custody is warranted and segregation is the least restrictive alternative reasonably available.

Inmates who are in protective custody shall receive services and programs available to inmates in general population and are deemed a privilege. Any deviation from allowing usually authorized items or activities shall be documented in the inmate's file. Protective custody inmates are not allowed unsupervised contact with other inmates. Access to group programs is prohibited.

##### **510.5.1 PREA PROTECTIVE CUSTODY**

Inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing or protective custody unless an assessment of all available alternatives has been made, and a determination has been made that no available alternatives of separation from likely abusers is available. An inmate may be held in administrative segregation or involuntary protective custody for less than 24 hours, while an assessment is completed.

Inmates placed in administrative segregation housing or involuntary protective custody for the above reason shall have access to programs, privileges, education, and work opportunities to the extent possible. If access to these is restricted, the following shall be documented:

- The opportunities that have been limited;
- the duration of the limitation; and
- the reasons for the limitations.

Inmates shall only be assigned to administrative segregation or involuntary protective custody until an alternative means of separation from likely abusers can be arranged, and such housing shall not ordinarily exceed 30 days.

When inmates are placed in administrative segregation or involuntary protective custody, due to no alternative, the following shall be documented:

- The basis for the jail's concern for the inmate's safety; and
- the reason why no alternative means of separation can be arranged.

Weekly, the Classification Committee shall afford inmates, housed in administrative segregation or involuntary protective custody, a review to determine whether there is a continuing need for separation from general population. (28 CFR 115.43)

All documentation shall be included in the inmate's booking file.

##### **510.6 MAINTENANCE OF PRIVILEGES**

Inmates in restricted housing shall be allowed 2 hours out of their cell daily. In extreme circumstances of continued disruptive behavior, a shift supervisor may reduce the time out to 1 hour every 48 or 72 hours.

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Inmates who are classified for housing in non-disciplinary administrative segregation or protective custody shall, at a minimum, be allowed individual access to programs and services including, but not limited to, the following:

- Inmate telephones
- Family visitation
- Educational programming appropriate to the inmate classification
- Access to commissary services
- Library and law library services
- Social services
- Faith-based guidance, counseling and religious services
- Recreation activities and exercise
- Social and professional visits

Nothing in this policy prohibits changing the delivery of programs or services to segregated inmates in order to provide for the safety and security of other inmates and staff.

#### **510.7 REVIEW OF STATUS**

The Classification Committee or classification officer shall review the status of all inmates who are housed in segregation units and designated for administrative segregation or protective custody. This review shall occur every seven days for the first two months of segregation and at least once every 30 days thereafter. The review should include information about these inmates to determine whether their status in administrative segregation and protective custody is still warranted.

If other reasonable housing options exist that will provide for the safety of the inmate, the inmate should be moved out of segregation. In reviewing an alternative housing decision, the safety of the inmate shall receive the utmost consideration.

##### **510.7.1 STATE INMATES**

The following procedures are required for all state facilities. Local facilities may be required to follow these procedures if housing state prisoners under contract.

State prisoners shall be subject to the same rules and disciplinary processes as local prisoners.

#### **510.8 HEALTH EVALUATION REQUIREMENTS**

After notification from staff that an inmate is being placed in segregation, the Shift Supervisor shall ensure 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 Shift Supervisor and coordinate the appropriate plan for



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the inmate based on the safety needs of the facility and the medical needs of the inmate.

##### **510.8.1 HEALTH CONSIDERATIONS**

Due to the possibility of self-inflicted injury and depression during periods of segregation, health evaluations should include notations of any bruises and other trauma markings and the qualified health care professional's comments regarding the inmate's attitude and outlook.

- (a) Unless medical attention is needed more frequently, each inmate in segregation will be reviewed by the Classification Committee weekly. A medical assessment should be documented in the inmate's medical file.
- (b) A qualified health care professional shall also conduct weekly rounds for a mental health evaluation.

When an inmate is classified as a special management inmate due to the presence of a serious mental illness and is placed in a segregation setting, the staff shall document this in the inmate's file via incident report and special housing status form. A copy will be forwarded to medical and mental health professionals.

##### **510.9 SAFETY CHECKS**

A staff member shall conduct a face-to-face safety check of all special management inmates, including those housed in administrative segregation or protective custody, at least every 60 minutes on an irregular schedule. Inmates who are violent, have mental health problems or who demonstrate behavior that is easily identified as out of the ordinary or bizarre in nature should be personally observed by the staff at least every 15 minutes on an irregular schedule.

Inmates who are at risk of suicide shall be under 15 minute checks until seen by a qualified health care professional. Subsequent supervision routines should be in accordance with orders provided by the qualified health care professional.

Special management inmates shall receive increased monitoring to include, at a minimum:

- (a) A daily visit by the Jail Chief Deputy or the authorized designee.
- (b) Visits by members of the program staff, upon request.

All management, program staff and qualified health care professional visits shall be documented in the appropriate records and logs and retained in accordance with established records retention schedules.

##### **510.10 LOG PROCEDURES**

Handwritten logs should be completed in black ink. Once an entry is made it should not be modified. If corrections or changes are needed they should be done by way of a supplemental entry. Electronically captured logs will be maintained in a way that prevents entries from being deleted or modified once they are entered. Corrections or changes must be done by way of supplemental entries. At a minimum the log will contain the following:

- Inmate name

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- Inmate identification number
- Housing location
- Classification status
- Date admitted
- Date and time of entry and exit from the cell
- Type of infraction or reason for admission
- Tentative release date
- Any special medical or psychiatric problems or needs
- Counseling for behavior

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 initials 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 will be documented in detail and should include the exact time of the safety check and the identification information of the employee conducting the check. All documentation will be gathered and provided to the Shift Supervisor or Jail Chief Deputy at midnight each day for review. After review, the documentation will be placed in the inmate's booking file.

#### 510.10.1 LOG INSPECTION AND ARCHIVAL OF LOGS

The Shift Supervisor shall review and evaluate the logs and pass any significant incidents via the chain of command to the Jail Chief Deputy for review.

The logs will be retained by the Department in accordance with established records retention schedules, but in no case less than one year.

## Juvenile Housing

### 512.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure the safety and security of juvenile inmates who are being prosecuted as adults and housed in the Jail.

#### 512.1.1 DEFINITIONS

Definitions related to this policy include:

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

### 512.2 POLICY

It is the policy of this office to prohibit the housing of juveniles.

# 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 Mason 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, inmates, contractors, volunteers or the public.

Firearms shall only be allowed inside the secure perimeter with the approval of the Jail Chief Deputy or authorized designee and under the direct supervision of a supervisor.

## 514.4 OTHER WEAPONS, TOOLS AND CHEMICAL AGENTS

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

Department-approved weapons, tools and chemical agents shall only be allowed inside the secure perimeter with the approval of the Jail Chief Deputy or the authorized designee.

## 514.5 STORAGE OF WEAPONS, CHEMICAL AGENTS AND CONTROL DEVICES

An area 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 storage area shall be limited by the Jail Chief Deputy or the authorized designee.

The following equipment shall be stored and secured:

- (a) All office-approved weapons
- (b) All office-approved control devices and associated supplies, with the exception of the CED
- (c) All security equipment, such as helmets, face shields, stab or protective vests and handheld shields
- (d) All office-approved chemical agents

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#### *Management of Weapons and Control Devices*

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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 Jail Chief Deputy should designate one or more properly trained staff to be responsible for maintaining 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. A log sheet shall be maintained at all times, detailing the exact location of each item. The removal of any weapon, chemical agent or control device shall be documented on the log sheet, showing who removed the item, the date and time of removal and the reason for removal. An additional log entry shall be made indicating the date and time of the item's return.

The Shift Supervisor and the Jail Chief Deputy 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 Armorer or the instructor designated to train on the use of a particular control device or chemical agent. The Armorer or the designated instructor is responsible to ensure replacement of outdated or unserviceable items.

# Inmate Classification

## 516.1 PURPOSE AND SCOPE

This policy describes the Mason 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.

### 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.

**Protective Custody (PC)**-A level of custody either requested or required for an inmate's protection from others.PC shall never be used as a disciplinary sanction.

**Administrative Segregation**- The physical separation of an inmate who is prone to escape or assault staff or other inmates, or one who is mentally deficient, in need of medical isolation or infirmary status. This is a non punitive classification process.

**Classification Committee**- Group will consist of a Classification Deputy, Day shift Supervisor, Alternative Sentencing Deputy, Medical, Mental Health, and jail Lieutenant.

## 516.2 POLICY

All arrestees and detainees entering this facility will be processed 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.

It is the policy of this office to properly classify inmates according to security and health risks so that appropriate supervision, temporary holding and housing assignments may be made.

## 516.3 CLASSIFICATION PLAN

The Jail Chief Deputy or 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:

- Age
- Sex
- Current charges

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#### *Inmate Classification*

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- Behavior during arrest and intake process
- Criminal and incarceration history
- Mental and emotional stability
- Potential risk of safety to others or self
- Special management inmate status
- Special needs assessment for vulnerable inmates
- Behavioral or physical limitations or disabilities
- Medical status
- Level of sobriety at booking
- Suicidal ideation
- Escape history and degree of escape risk
- History of assaultive behavior
- The need to be separated from other classifications of inmates (e.g., juvenile offenders gang affiliation, confidential informant, former law enforcement, sexual orientation)
- Prior convictions for sex offenses against an adult or child
- Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming (see Prison Rape Elimination Act Policy for transgender and intersex definitions)
- Previous sexual victimization
- The inmate's own perception of his/her vulnerability
- Whether the inmate is a foreign national and if so from what country (see 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

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).

#### 516.3.1 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.

#### **516.4 INITIAL CLASSIFICATION**

The initial classification process is intended to identify predatory, violent and at-risk inmates. It should occur during the booking 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.

The booking corrections deputy shall complete the initial risk assessment. The initial assessment includes a place for the booking corrections deputy to make a housing determination. This determination should be based on the risk assessment, an assessment of the inmate's condition, and the inmate's interview responses during intake.

The initial risk assessment shall be placed in the inmate's file and provided to the classification corrections deputy, who will, within the limits of available resources, review the initial classification assessment to assure proper housing.

#### **516.5 REVIEWS AND APPEALS**

Once an inmate is classified and housed, he/she may appeal the decision of the classification corrections deputy. The appeal process shall begin at the first-line supervisor level. The decision by the supervisor may be appealed to the Jail Chief Deputy or the authorized designee. The decision by the Jail Chief Deputy or the authorized designee is final.

##### **516.5.1 PERIODIC CLASSIFICATION REVIEWS**

The classification committee shall review the status of inmates housed in restrictive housing status every 7 days. The review should examine changes in the inmate's behavior or circumstances and should either raise, lower or maintain the classification status (28 CFR 115.41).

Housing and program assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats experienced by the inmate (28 CFR 115.42).

Inmate risk levels shall be reassessed when required due to a referral, request, incident of sexual abuse, or receipt of additional information that increases the inmate's risk of sexual victimization or abusiveness (28 CFR 115.41).

##### **516.5.2 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 corrections deputy.



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##### **516.6 HOUSING ASSIGNMENTS**

Inmates should be housed based upon the following criteria:

- Classification level
- Age
- Sex
- Legal status (e.g., pretrial or sentenced)
- Special problems or needs
- Behavior
- Any other criteria identified by the Jail Chief Deputy

Inmates scoring 0-7 on the objective classification rating tool are considered minimum security; Inmates scoring 8-11 are medium; Inmates scoring 12+ are maximum. Maximum security inmates will not be housed in direct contact with minimum security inmates.

General population inmate classification/risk overrides must be approved by a supervisor or classification deputy. Overrides of more than one risk level are prohibited.

##### **516.6.1 SEPARATION**

Male and female inmates shall be housed to ensure visual and physical separation.

Protective custody inmates shall be housed alone, attend services and programs alone, have time out of cell alone, and are not allowed unsupervised contact with other inmates.

##### **516.7 CLASSIFICATION SPACE ALLOCATION**

The classification plan depends on the ability of the facility to physically separate different classes of inmates. To ensure allocated space meets the current population needs, the Jail Chief Deputy or the authorized designee should periodically meet with representatives of the classification corrections deputies to discuss the fixed resources (e.g., cells, dorms, dayrooms).

The Jail Chief Deputy should report at least quarterly to the Sheriff on the ability of the facility to operate safely and securely and to perform its mission.

##### **516.8 RESTRICTED HOUSING**

Restricted Housing is single-occupancy cells used to house the following categories of inmates:

- Maximum security
- Administrative segregation
- Severe medical disabilities (upon consultation with medical staff and the availability of medical beds); Medical
- Severe mental illness (upon consultation with mental health staff and the availability of mental health beds); Protective Custody-
- Sexual predators; Protective Custody-

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- Any inmate with an elevated risk of being exploited or victimized by others; Protective Custody
- Any inmate whose condition or status indicates a special need for single-occupancy housing; Protective Custody

The classification supervisor shall notify the Jail Chief Deputy 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.

#### **516.9 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 to minimize the risk to other inmates and staff. 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 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 intersex inmate shall include individualized consideration for the inmate's health and safety and any related supervisory, management or facility security concerns. A transgender or intersex inmate's views with respect to his/her own safety shall be given serious consideration.

Lesbian, gay, bisexual, transgender or intersex inmates shall not be placed in dedicated facilities, units or wings solely on the basis of such identification or status, unless such placement is pursuant to a consent decree, legal settlement or legal judgment (28 CFR 115.42).

#### **516.10 STAFF TRAINING IN CLASSIFICATION**

Classification corrections 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 they are under the immediate supervision of a trained and qualified staff member.

# Conducted Energy Device - Corrections Officers

## 518.1 PURPOSE AND SCOPE

This policy provides guidelines for the issuance and use of the conducted energy device (CED).

## 518.2 ISSUANCE AND CARRYING CEDS

The CED may only be issued to corrections deputies who have completed office-approved training for use during their current assignment. Those leaving a particular assignment may be required to return the device to the Office inventory.

Corrections Deputies shall only use the CED and cartridges that have been issued by the Office. The device may be carried as part of a uniformed corrections deputy's equipment.

- (a) The CED shall be maintained in a secure storage location (see the Management of Weapons and Control Devices Policy).
- (b) Each CED shall be clearly and uniquely numbered.
- (c) Upon arriving for work, corrections deputies shall sign out their devices.
- (d) Upon finishing the shift, each corrections deputy shall turn in the device to the approved secure storage area.
- (e) Corrections Deputies shall not pass on the devices to oncoming corrections deputies without signing in and signing out the devices on the CED inventory log.
- (f) At the beginning of each shift, the oncoming Shift Supervisor shall inventory all CEDs.
- (g) Whenever practicable, corrections deputies should carry two or more CED cartridges on their person at all times when carrying the CED.
- (h) Corrections Deputies shall be responsible for ensuring that their issued CED is properly maintained and in good working order at all times. Corrections Deputies carrying the CED should perform a spark test on the unit prior to every shift.
- (i) Corrections Deputies should not hold a firearm and the CED at the same time.
- (j) The CED should be marked with a distinctive color or marking to distinguish it from firearms or any other device.

### 518.2.1 ISSUANCE AND CARRYING CEDS

Only members who have successfully completed department-approved training may be issued and carry the CED.

Staff shall only use the CED and cartridges that have been issued by the Department. The device may be carried as part of a uniformed corrections officer's equipment, in an approved holster.

Each CED shall be clearly and uniquely numbered.

Whenever practicable, corrections officers should carry two or more CED cartridges on their person at all times when carrying a CED.

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Corrections officers shall be responsible for ensuring that their issued CED is properly maintained and in good working order at all times.

Corrections officers carrying a CED should perform a spark test on the unit prior to every shift. Corrections officers should not hold both a firearm and the CED at the same time.

The CED should be marked with a distinctive color or marking to distinguish it from firearms or any other device.

#### **518.3 VERBAL AND VISUAL WARNINGS**

A verbal warning of the intended use of the CED should precede its application, unless it would otherwise endanger the safety of corrections deputies or when it is not practicable due to the circumstances. The purpose of the warning is to:

- (a) Provide the inmate with a reasonable opportunity to voluntarily comply.
- (b) Provide other corrections deputies and inmates with a warning that the CED may be deployed.

If, after a verbal warning, an inmate is unwilling to voluntarily comply with a corrections deputy's lawful orders and it appears both reasonable and feasible under the circumstances, the corrections deputy 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 CED. The aiming laser should never be intentionally directed into the eyes of another person as it may permanently impair their vision.

The fact that a verbal and/or other warning was given or the reasons it was not given shall be documented by the corrections deputy deploying the device in the related report.

#### **518.4 USE OF THE CED**

As with any correctional equipment, the CED has limitations and restrictions requiring consideration before its use. The CED should be used only when its operator can safely approach the individual within the operational range of the device.

Although the CED is generally effective in controlling most individuals, corrections deputies should be aware that the device may not achieve the intended results and be prepared with other options.

##### **518.4.1 APPLICATION OF THE CED**

A corrections deputy may use the CED when circumstances perceived by the corrections deputy at the time indicate that such application is reasonably necessary to control an inmate in any of the following circumstances:

- (a) The inmate is violent or is physically resisting.
- (b) The inmate has demonstrated an intention to be violent or to physically resist and reasonably appears to have the potential to harm corrections deputies, themselves, or others.

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##### 518.4.2 SPECIAL DEPLOYMENT CONSIDERATIONS

The use of the CED 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 corrections deputy, the inmate or others, and the corrections deputy reasonably believes that the need to control the inmate outweighs the risk of using the device. Such individuals include:

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

Because the application of the CED 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 the corrections deputies and the subject, thereby giving corrections deputies time and distance to consider force options or actions.

The CED shall not be used to torture, psychologically torment, elicit statements from, or punish any inmate.

##### 518.4.3 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 corrections deputy to limit the application of the CED probes to a precise target area, corrections deputies should monitor the condition of the inmate if one or more probes strikes the head, neck, chest, or groin until the inmate is evaluated by a qualified health care professional.

##### 518.4.4 MULTIPLE APPLICATIONS OF THE CED

Corrections Deputies should apply the CED for only one standard cycle and then evaluate the situation before applying any subsequent cycles. Multiple applications of the CED against an inmate are generally not recommended and should be avoided unless the corrections deputy reasonably believes that the need to control the inmate outweighs the potentially increased risk posed by multiple applications.

If the first application of the CED appears to be ineffective in gaining control of an inmate and if circumstances allow, the corrections deputy should consider certain factors before additional applications of the device, including:

- (a) Whether the probes are making proper contact.

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- (b) Whether the inmate has the ability and has been given a reasonable opportunity to comply.
- (c) Whether verbal commands, other options or tactics may be more effective.

Corrections Deputies should generally not intentionally apply more than one CED at a time against an inmate.

#### **518.4.5 DOCUMENTATION**

All CED discharges shall be documented in the related incident report and on the CED report form. Notification shall also be made to a supervisor in compliance with the office Use of Force Policy. Unintentional discharges, pointing the device at an inmate, laser activation, and arcing of the CED will also be documented on the CED report form. Any report documenting the discharge of the CED will include an explanation of the circumstances surrounding the discharge.

Following the discharge, the onboard CED memory will be downloaded through the data port by a supervisor or Armorer and saved with the related incident report. Photographs of the probe and contact sites should be taken after the inmate has been seen by a qualified health care professional. Confetti tags should be collected and the expended cartridge along with both probes and wires should be submitted into evidence for future reference by the corrections deputy collecting the cartridge. The cartridge serial number should be documented on the evidence paperwork. The evidence packaging should be marked "biohazard" if the probes penetrated the inmate's skin.

At a minimum the following should be documented:

- (a) Identification of all corrections deputies firing CEDs
- (b) Cartridge serial number
- (c) Identification of all witnesses
- (d) Medical care provided to the inmate
- (e) Observations of the inmate's physical and physiological actions
- (f) Any known or suspected drug use, intoxication, or other medical problems

The Office should periodically analyze the report forms to identify trends, including deterrence and effectiveness. The Training Supervisor should also conduct audits of data downloads and reconcile CED report forms and recorded activations. CED information and statistics, with identifying information removed, should periodically be made available to the public.

#### **518.5 MEDICAL TREATMENT**

Absent extenuating circumstances or unavailability, only a qualified health care professional should remove CED probes from an inmate's body. Used CED probes shall be considered a sharps biohazard, similar to a used hypodermic needle, and handled properly. Universal precautions should be taken.

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All inmates who have been struck by CED probes or who have been subjected to the electric discharge of the device shall be medically assessed. Additionally, any inmate who falls under any of the following categories should, as soon as practicable, be examined by a qualified health care professional:

- (a) The inmate is suspected of being under the influence of controlled substances and/or alcohol.
- (b) The inmate may be pregnant.
- (c) The inmate reasonably appears to be in need of medical attention.
- (d) The CED probes are lodged in a sensitive area (e.g., groin, breast, head, face, neck).
- (e) The inmate requests medical treatment.

Inmates 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 corrections deputies to be brought under control, may be at an increased risk of sudden death and should be examined by a qualified health care professional as soon as practicable. Any inmate exhibiting signs of distress after such an encounter shall be medically cleared.

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

If any individual refuses medical attention, such a refusal should be witnessed by another corrections deputy 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.

#### **518.6 TRAINING**

Corrections Deputies who are authorized to carry the CED shall be permitted to do so only after successfully completing the initial office-approved training. Any corrections deputy who has not carried a CED as a part of their assignment for a period of six months or more shall be recertified by the CED instructor approved by this office prior to carrying or using the device again.

Proficiency training for corrections deputies who have been issued CEDs should occur every year. A reassessment of a corrections deputy's knowledge and/or practical skill may be required at any time if deemed appropriate by the Training Supervisor.

Command staff and supervisors should receive CED training as appropriate for the investigations they conduct and review.

Corrections Deputies who do not carry CEDs should receive training that is sufficient to familiarize them with the device and with working with corrections deputies who use the device.

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The Training Supervisor is responsible for ensuring that all corrections deputies who carry CEDs have received initial and annual proficiency training. Periodic audits should be used for verification.

The application of CEDs during training could result in injury to corrections deputies and should not be mandatory for certification.

All training and proficiency for CEDs will be documented in the corrections deputy's training file.

The Training Supervisor 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 an inmate during the application of the CED and transitioning to other force options.
- (e) Restraint techniques that do not impair respiration following the application of the CED.
- (f) De-escalation techniques.

#### **518.6.1 TESTING**

All training delivered to the corrections deputies should include testing to document that the corrections deputy understands the subject matter presented.

#### **518.7 POLICY**

It is the policy of the Mason County Sheriff's Office to use the CED to control violent or potentially violent inmates. The appropriate use of such a device should result in fewer serious injuries to corrections deputies and inmates.



# Control of Inmate Movement

## 520.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process for the safe and secure movement of inmates between areas within the facility and transportation from the facility to court, medical appointments or other jurisdictions.

## 520.2 POLICY

The staff should be vigilant in the control and movement of inmates between areas within the facility and when transporting inmates outside the secure confines of the facility. Control may be by direct or indirect visual observation. All staff should consider all inmate movement as a high-risk activity. The staff should be aware of their surroundings at all times and take necessary steps to prevent the possession and exchange of contraband.

## 520.3 MOVEMENT OF INMATES

Movement of one or more inmates in the facility should be done in an orderly manner with inmates walking in a single-file line. Staff members should have situational awareness during the movement of inmates and should consider the design of the facility, areas of poor visibility and the presence of other inmates being moved. Staff shall position themselves in a way which prohibits inmates from being in a position of physical control over them. The staff should avoid areas where inmates may have access to contraband items.

Inmates should be restrained during movement based upon individual security classification, with higher risk inmates in handcuffs, waist chains leg irons or stun cuffs. An exception to this procedure is when an inmate has a physical disability where restraint devices may cause serious injury. Pregnant inmates shall be moved in accordance with the Use of Restraints Policy (RCW 70.48.500).

Whenever a high-security inmate is not able to be restrained, the staff should compensate by utilizing stun cuffs or wheelchairs and should secure the inmate to the chair. It may also be necessary to increase the number of staff present to ensure the safe movement of high-security inmates.

The staff should be watchful in and around passageways and ensure that sally port doors are secured to prevent escape.

## Use of Force - Corrections Officers

### 522.1 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 corrections deputy of this office is expected to use these guidelines to make such decisions in a professional, impartial, and reasonable manner.

In addition to those methods, techniques, and control devices 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.

#### 522.1.1 DEFINITIONS

Definitions related to this policy include:

**Deadly force** - Force that is reasonably anticipated and intended to create a substantial likelihood of death or very serious injury.

**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 corrections deputy or another person.

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

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

**Imminent** - Ready to take place; impending. Note that imminent does not mean immediate or instantaneous.

**Totality of the circumstances** - All facts and circumstances known to the corrections deputy at the time, taken as a whole, including the conduct of the corrections deputy and the individual leading up to the use of force.

### 522.2 POLICY

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

Corrections Deputies 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.

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

#### **522.3 USE OF FORCE**

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

The reasonableness of force will be judged from the perspective of a reasonable corrections deputy on the scene at the time of the incident. Any evaluation of reasonableness must allow for the fact that corrections deputies 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 corrections deputy might encounter, corrections deputies are entrusted to use well-reasoned discretion in determining the appropriate use of force in each incident.

It is also recognized that circumstances may arise in which corrections deputies reasonably believe that it would be impractical or ineffective to use any of the control devices, weapons, or methods provided by this office. Corrections Deputies 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 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 corrections deputy to retreat or be exposed to possible physical injury before applying reasonable force.

Force shall never be used as punishment.

##### **522.3.1 FACTORS TO DETERMINE THE REASONABLENESS OF FORCE**

When determining whether to apply force and evaluating whether a corrections deputy has used reasonable force, a number of factors should be taken into consideration, as time and circumstances permit. These factors include but are not limited to:

- (a) Immediacy and severity of the threat to corrections deputies or others.
- (b) The conduct of the individual being confronted, as reasonably perceived by the corrections deputy at the time.

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

#### 522.3.2 DUTY TO INTERCEDE AND REPORT

Any corrections deputy present and observing another law enforcement officer or a member using force that is clearly beyond that which is objectively reasonable under the circumstances should, when in a position to do so, intercede to prevent the use of unreasonable force.

Any corrections deputy who observes another law enforcement officer or a member use force that is potentially beyond that which is objectively reasonable under the circumstances should report these observations to a supervisor as soon as feasible.

#### 522.3.3 ALTERNATIVE TACTICS - DE-ESCALATION

When circumstances reasonably permit, corrections deputies should use nonviolent strategies and techniques to decrease the intensity of a situation, improve decision-making, improve communication, reduce the need for force, and increase voluntary compliance (e.g., summoning additional resources, formulating a plan, attempting verbal persuasion).

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##### **522.3.4 PERSPECTIVE**

When observing or reporting force used by a law enforcement officer, each corrections 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.

##### **522.3.5 PAIN COMPLIANCE TECHNIQUES**

Pain compliance techniques may be effective in controlling a physically or actively resisting individual. Corrections Deputies may only apply those pain compliance techniques for which they have successfully completed office-approved training. Corrections 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 individual can comply with the direction or orders of the corrections deputy.
- (c) Whether the individual has been given sufficient opportunity to comply.

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

##### **522.3.6 RESTRICTIONS ON RESPIRATORY RESTRAINTS**

Corrections Deputies of this office are not authorized to use respiratory restraints, also known as chokeholds or neck restraints (RCW 10.116.020).

##### **522.3.7 USE OF FORCE TO SEIZE EVIDENCE**

In general, corrections deputies may use reasonable force to lawfully seize evidence and to prevent the destruction of evidence. However, corrections deputies are discouraged from using force solely to prevent a person from swallowing evidence or contraband. In the instance when force is used, corrections deputies 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. Corrections Deputies are encouraged to use techniques and methods taught by the Mason County Sheriff's Office for this specific purpose.

#### **522.4 USE OF OTHER WEAPONS AND CONTROL DEVICES**

Control devices may be used when a decision has been made to control or restrain a person who is violent or who demonstrates the intent to be violent, and the use of the device appears reasonable under the circumstances. When reasonable, a verbal warning and opportunity to comply should precede the use of these devices.

When using control devices, corrections deputies should carefully consider potential impact areas to minimize injuries and unintentional targets.

##### **522.4.1 ELECTRONIC CONTROL DEVICES**

The use of conducted energy device (CED) shall be in accordance with the office Conducted Energy Device Policy.

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

##### 522.4.2 CHEMICAL AGENTS

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

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

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

- (a) Health-trained custody member advising the inmate how to decontaminate in the cell.
- (b) Clean clothing if the inmate's clothing was contaminated.
- (c) Monitoring of the in-cell inmate at least every 15 minutes on an irregular schedule, for a period of not less than 45 minutes, by health-trained custody member.

##### 522.4.3 PROJECTILE CHEMICAL AGENTS

Pepper projectile systems are plastic spheres filled with a derivative of OC powder. A compressed gas launcher delivers the projectiles with enough force to burst the projectiles on impact, releasing the OC powder. The potential exists for the projectiles to inflict injury if they strike the head, neck, spine, or groin. Therefore, personnel deploying the pepper projectile system should not intentionally target those areas except when the corrections deputy reasonably believes the inmate may cause serious bodily injury or death to the corrections deputy 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 corrections deputies who have received office-authorized training in their use.
- (b) Corrections Deputies encountering a situation that requires the use of the pepper projectile system shall notify a supervisor as soon as practicable. The supervisor shall respond to all such deployments. The supervisor shall ensure that all notifications and reports are completed as required by this policy.

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

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##### **522.4.4 TEAR GAS GUIDELINES**

Corrections Deputies or other members are not authorized to use tear gas unless necessary to alleviate a present risk of serious harm posed by (RCW 10.116.030):

- (a) A riot.
- (b) A barricaded subject.
- (c) A hostage situation.

Only the Jail Chief Deputy or the authorized designee may authorize the delivery and use of tear gas, and only after evaluating all conditions known at the time and determining that such force reasonably appears justified and necessary and other alternatives to the use of tear gas have been exhausted (RCW 10.116.030).

If tear gas is to be used outside the facility, authorization shall be obtained from the highest elected official of the jurisdiction in which the tear gas is to be used (RCW 10.116.030).

Prior to any use, an announcement shall be made of the intent to use tear gas. Sufficient time and space shall be allowed for compliance with the announcement (RCW 10.116.030).

When practicable, fire personnel should be alerted or summoned to the scene prior to the deployment of tear gas to control any fires and to assist in providing medical aid or gas evacuation if needed.

##### **522.5 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 corrections deputy may be necessary to stop an inmate from inflicting life-threatening injuries to him/herself or to stop an assault on any other person, including other inmates. The destruction of government property may require the immediate use of force by a corrections deputy 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, corrections deputies should attempt to resolve the situation through voluntary compliance or, if it reasonably appears necessary, the calculated use of force. A calculated use of force is called for when an inmate's presence or conduct poses a threat to safety or security and the inmate is located in an area that can be controlled or isolated, or when time and circumstances permit advance planning, staffing, and organization.

The assistance of available non-custodial members (e.g., psychologists, counselors) should be considered when attempting to resolve a situation without confrontation.

A supervisor shall be present in any situation involving the calculated use of force. The supervisor shall notify the Jail Chief Deputy or the authorized designee for approval and consultation prior to any calculated use of force action.

Once it is reasonably safe to do so, medical assistance shall be obtained for any person who exhibits signs of physical distress, has sustained visible injury, expresses a complaint of injury or

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continuing pain, or was rendered unconscious. Any individual exhibiting signs of physical distress after an encounter should be continuously monitored until he/she can be medically assessed.

##### **522.5.1 CONFRONTATION AVOIDANCE PROCEDURES**

Prior to any calculated use of force, the supervisor shall confer with the appropriate persons to gather pertinent information about the inmate and the immediate situation. Based on the supervisor's assessment of the available information, the supervisor should direct the corrections deputy to attempt to obtain the inmate's voluntary cooperation and consider other available options before determining whether force is necessary.

The supervisor should consider including the following persons and resources in the process:

- (a) Mental health specialist
- (b) Qualified health care professional
- (c) Chaplain
- (d) Office Records Division
- (e) Any other relevant resources

Regardless of whether discussions with any of the above resources are accomplished by telephone or in person, the purpose is to gather information to assist in developing a plan of action, such as the inmate's medical/mental history (e.g., asthma or other breathing-related illnesses, hypoglycemia, diabetes), any recent incident reports, or situations that may be contributing to the inmate's present condition (e.g., pending criminal prosecution or sentencing, recent death of a loved one, divorce). The assessment should include discussions with members who are familiar with the inmate's background or present status. This may provide insight into the cause of the inmate's immediate agitation. It also may identify other members who have a rapport with the inmate and could possibly resolve the incident peacefully, without the use of force.

If force is determined necessary and other means of gaining control of an inmate are deemed inappropriate or ineffective, then the force team technique should be used to control the inmate and to apply restraints, if required.

Consideration should also be given to preventing exposure to communicable diseases in calculated use of force situations and to ensuring that medical services personnel are available.

##### **522.6 REPORTING THE USE OF FORCE**

Every corrections deputy 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 corrections deputy participating in the incident, as witnessed by the reporting corrections deputy.

The report should include:

- (a) A clear, detailed description of the incident, including any application of weapons or restraints.



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- (b) The identity of all involved in the incident (e.g., inmates, corrections deputies, members, and others).
- (c) The corrections deputy should articulate the factors perceived and why the corrections deputy 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.

Corrections Deputies shall submit the appropriate documentation before going off-duty, unless directed otherwise by a supervisor.

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.

A video recording is recommended for all calculated use of force incidents and should include the introduction of all corrections deputies participating in the process. The recording and documentation will be part of the investigation package. The supervisor should ensure the recording is properly processed for retention and a copy is forwarded with the report to the Jail Chief Deputy within three working days.

The supervisor responsible for gathering the reports may allow a reasonable delay in preparation of a report in consideration of immediate psychological and/or physical condition of the involved member.

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

#### **522.6.1 NOTIFICATION TO CRIMINAL JUSTICE TRAINING COMMISSION**

Notification shall be made to the Criminal Justice Training Commission within 15 days of any death or serious injury caused by the use of force by a corrections deputy (RCW 43.101.135).

#### **522.6.2 NOTIFICATION TO INDIAN AFFAIRS**

When the use of force by a corrections deputy results in the death of a person who is an enrolled member of a federally recognized American Indian tribe, notification shall be made to the Governor's Office of Indian Affairs within a reasonable period of time, but not more than 24 hours after the office has good reason to believe the person was an enrolled member. Notice shall include sufficient information for the Governor's Office of Indian Affairs to attempt to identify the deceased person and tribal affiliation (RCW 10.114.021).

#### **522.7 SUPERVISOR RESPONSIBILITIES**

A supervisor should respond to a reported application of force, 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:

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- (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) Once any initial medical assessment has been completed or first aid has been rendered, ensure that photographs have been taken of any areas involving visible injury or complaint of pain, as well as overall photographs of uninjured areas.
  - 1. These photographs should be retained until all potential for civil litigation has expired.
- (g) Identify any witnesses not already included in related reports.
- (h) Review and approve all related reports.
- (i) Determine if there is any indication that the individual may pursue 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.
- (j) 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.

If 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.

When an incident results in death, serious bodily harm, or great bodily harm, a supervisor shall immediately contact the Office of Independent Investigations pursuant to the procedures established by the Office of Independent Investigation (RCW 43.102.120).

#### **522.8 USE OF DEADLY FORCE**

When reasonable, the corrections deputy shall, prior to the use of deadly force, warn that deadly force may be used, unless the corrections deputy has objectively reasonable grounds to believe the person is aware of those facts.

Use of deadly force is justified in the following circumstances involving imminent threat or imminent risk:

- (a) A corrections deputy may use deadly force to protect themselves or others from what the corrections deputy reasonably believes is an immediate threat of death or serious bodily injury.

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- (b) A corrections deputy may use deadly force to stop an escaping inmate, or to stop a fleeing individual, when the corrections 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 corrections 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. Under such circumstances, a verbal warning should precede the use of deadly force, where feasible.

Imminent does not mean immediate or instantaneous. An imminent danger may exist even if the individual is not at that very moment pointing a weapon at someone. For example, an imminent danger may exist if a corrections deputy reasonably believes the individual has a weapon or is attempting to access one and it is reasonable to believe the individual intends to use it against the corrections deputy or another person. An imminent danger may also exist if the individual is capable of causing serious bodily injury or death without a weapon and the corrections deputy believes the individual intends to do so.

#### **522.9 USE OF FORCE REVIEW**

The Shift Supervisor shall review all related reports of use of force incidents occurring on their command. The review is to determine whether the use of force was in compliance with policy, procedure, and applicable law, and to determine if follow-up action or investigation is necessary. The Shift Supervisor should also ensure that a review packet containing a copy of all pertinent reports and materials is prepared and forwarded to the Administrative chain of command. If compliance with policy is questionable, Jail Administration will convene the Use of Force Review Committee..

##### **522.9.1 USE OF FORCE REVIEW COMMITTEE**

The review committee shall meet and review all use of force cases within 30 days of the incident.

The committee will comprise the following members:

- (a) The Jail Chief Deputy
- (b) One supervisor assigned on a rotational basis
- (c) The Training Unit
- (d) One qualified health care professional
- (e) A corrections deputy with advanced use of force training
- (f) Other members as selected by the Sheriff

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

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##### **522.10 TRAINING**

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

- (a) Use of force, including the duty to intercede
- (b) Weapons, control devices, and chemical agents
- (c) Self-defense
- (d) Confrontation avoidance procedures:
  - 1. Communication techniques
  - 2. De-escalation techniques
  - 3. Dealing with the mentally ill
  - 4. Application of restraints
- (e) Forced cell extraction techniques
- (f) Force team techniques
- (g) General restraint training (soft and hard restraints)
- (h) Reporting procedures

##### **522.10.1 TRAINING FOR OTHER WEAPONS AND CONTROL DEVICES**

The Training Supervisor shall ensure that all corrections deputies 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 corrections deputy's training file.
- (c) Corrections Deputies 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 corrections deputy cannot demonstrate proficiency with a control device or knowledge of this policy after remedial training, the corrections deputy may be subject to discipline.

##### **522.10.2 PERIODIC TRAINING**

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

## Use of Restraints - Corrections Officers

### 524.1 PURPOSE AND SCOPE

This policy establishes guidelines for the application, supervisory oversight and restrictions on the use of restraints on persons incarcerated in this facility.

This policy shall apply to the use of specific types of restraints, such as four/five-point restraints, restraint chairs, the WRAP, ambulatory restraints and similar restraint systems, as well as all other restraints, including handcuffs, waist chains and leg irons when such restraints are used to restrain any inmate for prolonged periods.

#### 524.1.1 DEFINITIONS

Definitions related to this policy include:

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

**Custody restraints** - Includes steel handcuffs and leg restraints, polyurethane or nylon soft restraints, waist restraints, and chair restraints, and the WRAP applied to control an inmate who is assaultive, engaging in self-injurious behavior, or attempting to damage property.

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

### 524.2 POLICY

It is the policy of this office that restraints shall be used only to prevent self-injury, injury to others, or property damage. Restraints may also be applied according to inmate classification, such as maximum security, to control the behavior of a high-risk inmate while the inmate is being moved outside the cell or housing unit.

Restraints shall never be used for retaliation or as punishment. Restraints shall not be utilized any longer than is reasonably necessary to control the inmate. Restraints are to be applied only when less restrictive methods of controlling the dangerous behavior of an inmate have failed or appear likely to fail. Each incident where restraints are used beyond compliant handcuffing shall be documented as a use of force by the handling staff member and the documents placed in the appropriate file prior to the end of the staff member's shift.

This policy does not apply to the temporary use of restraints, such as handcuffing or the use of leg irons to control an inmate during movement and transportation inside or outside the facility.

### 524.3 USE OF RESTRAINTS - CONTROL

Supervisors shall proactively oversee the use of restraints on any inmate. Whenever feasible, the use of restraints, other than routine use during transfer, shall require the approval of the

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Shift Supervisor prior to application. In instances where prior approval is not feasible, the Shift Supervisor shall be apprised of the use of restraints as soon as practicable.

Restraint devices, such as restraint chairs, shall only be used on an inmate when it reasonably appears necessary to overcome resistance, prevent escape, or bring an incident under control, thereby preventing injury to the inmate or others, or eliminating the possibility of property damage. Restraints shall not be applied for more time than is reasonably necessary to achieve the above goals.

Excluding short-term use to gain immediate control, placing an inmate in a restraint chair or other restraints for extended periods requires approval from the Jail Chief Deputy or the authorized designee prior to taking action. The medical staff shall be called to observe the application of the restraints, when feasible, prior to the application or as soon as practicable after the application, and to check the inmate for adequate circulation.

The use of restraints for purposes other than for the controlled movement or transportation of an inmate shall be documented on appropriate logs to include, at minimum, the type of restraint used, when it was applied, a detailed description of why the restraint was needed, and when it was removed.

The following provisions shall be followed when utilizing restraints to control an inmate:

- (a) Restraints shall not be used as punishment, placed around a person's neck, or applied in a way that is likely to cause undue physical discomfort or restrict blood flow or breathing (e.g., hog-tying).
- (b) Restrained inmates shall not be placed facedown or in a position that inhibits breathing.
- (c) Restraints shall not be used to secure a person to a fixed object except as a temporary emergency measure. A person who is being transported shall not be locked in any manner to any part of the transporting vehicle, except for items installed for passenger safety, such as seat belts.
- (d) Inmates in restraints shall be housed either alone or in an area designated for restrained inmates.
- (e) Restraints shall be applied for no longer than is reasonably necessary to protect the inmate or others from harm.
- (f) Staff members shall conduct direct face-to-face observation at least twice every 30 minutes on an irregular schedule to check the inmate's physical well-being and behavior. Restraints shall be checked to verify correct application and to ensure they do not compromise circulation. All checks shall be documented, with the actual time recorded by the person doing the observation, along with a description of the inmate's behavior. Any actions taken should also be noted in the log.
- (g) The specific reasons for the continued need for restraints shall be reviewed, documented, and approved by the Jail Chief Deputy or the Shift Supervisor at least every two hours.

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- (h) As soon as possible, but within four hours of placement in restraints, the inmate shall be medically assessed to determine whether the inmate has a serious medical condition that is being masked by the aggressive behavior. The medical assessment shall be a face-to-face evaluation by a qualified health care professional and shall recur once every six hours of continued restraint thereafter.
- (i) As soon as possible, but within eight hours of placement in restraints, the inmate must be evaluated by a mental health professional to assess whether the inmate needs immediate and/or long-term mental health treatment.

#### **524.3.1 USE OF RESTRAINTS FOR COURT HEARINGS**

Prior judicial approval should be obtained for any inmate restraints that will be used in any court proceeding.

Juveniles shall not be brought before the court for any court appearance wearing any physical restraint devices except when ordered by the court (JuCR 1.6).

#### **524.4 USE OF RESTRAINTS - CLINICAL**

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

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

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

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

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additional four hours for an adult or up to two hours for a person who is age 17 or younger.

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

#### **524.5 RANGE OF MOTION**

Inmates placed in restraints for longer than two hours should receive a range-of-motion procedure that will allow for the movement of the extremities. Range-of-motion exercise will consist of alternate movement of the extremities (i.e., right arm and left leg) for a minimum of 10 minutes every two hours.

#### **524.6 FOOD, HYDRATION, AND SANITATION**

Inmates who are confined in restraints shall be given food and fluids. Food shall be provided during normal meal periods. Hydration (water or juices) will be provided no less than once every two hours or when requested by the inmate.

Offering food and hydration to inmates will be documented to include the time, the name of the person offering the food or water/juices, and the inmate's response (receptive, rejected). Provisions shall be made to accommodate any toileting needs at least once every two hours. Inmates shall be given the opportunity to clean themselves should they soil themselves or their clothing while they are in restraints.

#### **524.7 AVAILABILITY OF CPR EQUIPMENT**

CPR equipment, such as barrier masks, shall be provided by the facility and located in proximity to the location where inmates in restraints are held.

#### **524.8 RESTRAINED INMATE HOLDING**

Restrained inmates should be protected from abuse by other inmates. Under no circumstances will restrained inmates be housed with inmates who are not in restraints. In most instances, restrained inmates are housed alone or in an area designated for restrained inmates.

#### **524.9 PREGNANT INMATES**

Leg irons or waist chains shall not be used on any inmate known to be pregnant. Except in extraordinary circumstances no restraints of any kind may be used on any pregnant inmate during



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transportation to and from visits to medical providers or court proceedings at any time during the third trimester of pregnancy or postpartum recovery. "Extraordinary circumstances" exist where a member makes an individualized determination that restraints are necessary to prevent the inmate from escaping or injuring herself, medical or safety personnel or others. Should restraints be necessary, the restraints shall be the least restrictive available and most reasonable under the circumstances (RCW 70.48.500(3)).

##### 524.9.1 INMATES IN LABOR

While an inmate is in labor or in childbirth, no restraints of any kind may be used (RCW 70.48.500(2)). This does not prohibit a treating physician licensed under Title 18 RCW from requesting the use of hospital restraints for the medical safety of an inmate.

## Searches

### 528.1 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 Mason County Sheriff's Jail 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 cause damage to 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.

#### 528.1.1 DEFINITIONS

Definitions related to this policy include:

**Body Scan** - X-ray technology used to produce an image revealing the presence of contraband concealed on or inside a person.

**Contraband** - Anything unauthorized for inmates to possess or anything authorized to possess but in an unauthorized quantity or altered from the original design or purpose.

**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 corrections 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 corrections deputy, the inmate or other inmates.

**Physical body cavity search** - A search that includes a visual inspection and may include a physical intrusion into or touching of 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

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the person's underclothing, buttocks, genitalia or female breasts are visible to the monitoring employee.

**Pretrial-** For purposes of this policy, pre-conviction means any person in custody at a holding detention, or local correctional facility regardless of whether an arrest warrant of or other court order was issued before the person was arrested or otherwise taken into custody unless the court issuing the warrant has determined that the person shall not be released on personal recognizance, bail, or bond. (RCW 10.79.120)

**Post Trial** for purposes of this policy include any person who is serving a sentence imposed by a court or committed to incarceration by order of a court (Post preliminary appearance prisoners).

#### 528.2 POLICY

It is the policy of this office to ensure the safety of staff, inmates and visitors by conducting effective and appropriate searches of inmates and areas within the facility in accordance with applicable laws.

Searches shall not be used for intimidation, harassment or retaliation.

#### 528.3 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 shall occur frequently within the facility. At a minimum, the staff shall conduct pat-down searches in circumstances that include:

- (a) During physical plant searches of entire housing units.
- (b) When inmates leave their housing units to participate in activities outside the facility (e.g. court, medical appointment) and when they return.
- (c) When inmates come into contact with other inmates housed outside of their housing units, such as work detail.
- (d) Any time the staff believes the inmates may have contraband on their persons.

Except in emergencies, male staff may not pat down female inmates. Whenever practical, a pat-down search of a male inmate should be conducted by a male staff member. 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).

#### 528.4 BODY SCAN

- (a) The arrestee will enter the Sally Port area and upon determination that the arrestee is fit for jail, in accordance with Policies 504 and 721, the arrestee will enter the body scanning area and receive a pat-down search conducted by an officer.
- (b) The arrestee will be changed into a jail uniform.
- (c) The arrestees name number will be entered into the ConPass system. When the body scan is complete and is negative for contraband, the Body Scanner officer will indicate as such.

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- (d) If contraband is found during the scan, it will be given to the Arresting Officer (AO) disposition.
  - (e) Only staff that have successfully completed training on the Compass Body Scanner shall operate the device.
  - (f) All persons conducting the body scan or otherwise within sight of the visual display of the body scan (e.g., monitor, image) shall be of the same sex as the inmate being scanned, except for physicians, licensed medical personnel or shift supervisors who have been tasked with confirming a positive read. Furthermore, body scan viewing monitors or generated images shall only be viewed by authorized personnel (corrections staff, medical staff) and shall not be in an area with direct view by inmates.
  - (g) Inmates who are known to be pregnant will not be subjected to a body scan.
  - (h) With the exception of the inmate being scanned, all other persons shall remain outside of the "ion curve" area clearly outlined on the floor around each scanner device while a scan is in progress.
  - (i) All arrestees will be subject to a body scan prior to the arresting officer leaving the facility.
1. In the event an anomaly appears within a subject's body, the officer conducting the scan will inquire with the arrestee to identify the anomaly. If the anomaly is believed to be concealed contraband, the officer will ask the arrestee to voluntarily turn over the item(s). An Officer will utilize a private area to obtain the contraband (See strip search policy 528.5). Once the officer has obtained the items, the arrestee will need to be re-scanned to verify all contraband was removed and any contraband will be given to the AO for disposition.
2. Staff operating the body scanner shall save the image with a descriptive label for future reference and or comparison.
3. If the anomaly is still present on the body scan and/or x-ray, and the arrestee is suspected of concealing contraband, the arrestee shall receive clearance at the hospital prior to admittance into the facility. If the arrestee receives clearance from the hospital and the anomaly is still present, the arrestee will be assessed for placement on Contraband Watch in F cell see Policy 538. If deemed necessary, a search warrant will be obtained for the retrieval of the contraband in accordance with Policy 528.5.4.
4. All in-custody inmates may be subject to a body scan, with shift supervisor approval, to include:
- Inmates who are returning to the facility from court, clinic runs, temporary out-of-custody, work assignments, or any other event that caused the inmate to be removed from the secure area of the facility.
  - Inmates returning from social or professional contact visits.
  - Inmate workers returning to their housing unit after performing their assigned duties.
5. In the event a new arrestee or in-custody inmate refuses to undergo a body scan, staff shall not use physical force to compel their cooperation.

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1. If the refusal occurs during the intake process, the arrestee shall be separated from those inmates who have already been scanned and, after consultation with the shift supervisor, there is reasonable suspicion to believe that a strip search is necessary to discover weapons, criminal evidence, contraband, or other concealed items that constitutes a threat to the security of the facility, a strip search will be conducted in accordance with procedure 528.5.3 of this policy. The shift supervisor shall consider all information and circumstances known prior to authorizing the strip search, including but not limited to the following factors:
    - The nature of the offense for which the person to be searched was arrested;
    - The prior criminal record of the person to be searched; and
    - Physically violent behavior of the person to be searched, during or after the arrest.
  2. The search will be documented in an incident report articulating the need for the search.
  3. If a strip search is conducted and the arrestee continues refusal to undergo a body scan, the arrestee will be assessed for placement on Contraband Watch (See Policy 538).
  4. If an in-custody inmate refuses a body scan and, after consultation with the shift supervisor, there is reasonable suspicion to believe that a strip search is necessary to discover weapons, criminal evidence, contraband, or other concealed items that constitute a threat to the security of the facility, a strip search will be conducted in accordance with procedure 528.5.3 of this policy. The search will be documented in an incident report articulating the need for the search and the inmate shall be placed on Contraband Watch in accordance with policy 538.
6. In addition to the body scan, arrestees are subject to a strip search in accordance with section 528.5.1 of this policy.

#### **528.5 MODIFIED STRIP SEARCHES, STRIP SEARCHES AND PHYSICAL BODY CAVITY SEARCHES**

Modified strip searches, strip searches and physical body cavity searches should be limited to those situations where such searches are necessary (RCW 10.79.060).

In order to limit the necessity of modified strip searches, strip searches and physical body cavity searches, arrestees who are arranging bail shall be permitted a reasonable period of time, not less than 12 hours, and the opportunity to make telephone calls before being placed in general population. Arrestees who are eligible for release or who will be released when they are no longer intoxicated will not be placed into general population or have unmonitored or unsupervised contact with general population inmates.

Corrections 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.

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##### 528.5.1 SEARCHES OF PRETRIAL INMATES

Pat-down searches, clothing searches and electronic metal-detector searches, as appropriate, will be conducted on all pretrial inmates upon admission into the general population and whenever the pretrial inmate has entered an environment where contraband or weapons may be accessed. A pretrial inmate is a person who is being held pretrial without an order that he/she be held without bail. This includes, but is not limited to, the following:

- Upon return from contact visits
- Upon leaving the kitchen, shop, farm, etc.
- Upon return to general population from outside the confines of the facility (court, work-release, work detail, medical visits)

A clothing search should require an inmate to remove some or all of his/her clothing behind a modesty screen and does not include a visual inspection of the underclothing, breasts, buttocks or genitalia of the person. This should include a thorough search of the inmate's removed clothing. This may include requiring the person to squat or bend down behind the screen and reveal his/her hands and feet.

No pretrial inmate shall be subjected to a modified strip search or strip search without one or more of the following (RCW 10.79.130):

- (a) There is reasonable suspicion based upon specific and articulable facts to believe the person has a health condition requiring immediate medical attention.
- (b) There is reasonable suspicion based upon specific and articulable facts to believe the person is concealing on his/her body a weapon, contraband or an item that constitutes a threat to the facility.
  1. Reasonable suspicion is presumed to exist when the person to be searched has been arrested for any of the following offenses (RCW 10.79.130):
    - (a) A violent offense as defined in RCW 9.94A.030
    - (b) Any offense involving escape, burglary, or the use of a deadly weapon
    - (c) Possession of prescription drugs, controlled substances, or imitation controlled substances
- (c) There is probable cause to believe the person is concealing on his/her body evidence not constituting a threat to the facility.
- (d) There is a search warrant authorizing the strip search.

No modified strip search or strip search shall be performed before reasonable efforts have been made to use less intrusive methods, such as pat-down, electronic metal detector or clothing searches.

No modified strip search or strip search shall be performed without prior written authorization from the ranking shift supervisor determining that reasonable suspicion or probable cause exists.

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Pretrial inmates returning from court with release orders should not be returned to general population, except for retrieving personal property under the direct visual supervision of staff.

#### 528.5.2 SEARCHES OF CONVICTED AND NO BAIL ORDERED INMATES

Strip searches will be conducted on all convicted and no bail ordered inmates upon admission into the general population.

A strip search of a convicted or no bail general population inmate 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 general population 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 modified strip searches or strip searches unless 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 general population, 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 written 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.

#### 528.5.3 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. Except at the request of the inmate, no person, other than those who are participating in the search, shall be present or able to observe the search (RCW 10.79.150).

Unless conducted by a physician or other licensed medical personnel or in case of an emergency, a modified strip search or strip search shall be conducted by a staff member of the same sex as the person being searched (RCW 10.79.100). Any cross-gender modified strip searches and cross-gender strip searches shall be documented (28 CFR 115.15).

When additional staff members are necessary for security purposes or to witness the discovery of evidence, the additional staff members shall be of the same sex as the person being searched.

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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 corrections 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 corrections 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 corrections 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.
- (c) The staff member conducting a modified strip search or strip search of a pretrial inmate, an inmate not being admitted into general population or a convicted inmate, other than upon entry into general population and when the inmate has entered an environment where contraband or weapons may be accessed, shall also (RCW 10.79.150):
  - 1. Document the facts (Utilizing the Strip Search Authorization and Report) that led to the decision to perform a strip search of the inmate, including the offense for which the person was arrested if that fact was considered in determining reasonable suspicion to conduct the search.
  - 2. Document the reasons less intrusive methods of searching were not used or were insufficient.
  - 3. Document the supervisor's approval.
  - 4. Document the time, date and location of the search.
  - 5. Document the names of staff present, their serial numbers, sex and their roles.
  - 6. Identify any contraband, weapon, evidence, item or health condition discovered by the search.



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7. Process all contraband and weapons in accordance with the office's current evidence procedures.
8. If appropriate, complete a crime report and/or disciplinary report.
9. Document the search in the appropriate log.
10. Forward a copy of the Strip Search Report to the Jail Lieutenant for review.
11. Ensure the completed documentation is placed in the inmate's file. A copy of the written authorization and any search warrant shall be retained and made available to the inmate or other authorized representative upon request (except for those portions of any warrant ordered sealed by a court).

#### 528.5.4 PHYSICAL BODY CAVITY SEARCH

Physical body cavity searches shall be completed as follows (RCW 10.79.080):

- (a) No person shall be subjected to a physical body cavity search without the prior written approval of the Jail Chief Deputy and the ranking shift supervisor and only with the issuance of a search warrant. Authorization may be obtained electronically from the Jail Chief Deputy or the ranking shift supervisor. 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) Before any physical body cavity search is authorized or conducted, a thorough pat-down search, a body scan, and a thorough clothing search, as appropriate, must be used. No physical body cavity search shall be authorized or conducted unless these other methods do not satisfy the safety, security, or evidentiary concerns of the facility.
- (c) 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.
- (d) 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.
  1. The ranking supervisor may allow an inmate to have a readily available witness, of the inmate's choosing, present at the time the search is conducted. The person chosen shall not be currently in custody or present an unreasonable security risk.
- (e) Privacy requirements, including restricted touching of body parts and sanitary condition requirements, are the same as required for a strip search.
- (f) All physical body cavity searches shall be documented including:
  1. The facts that led to the decision to perform a physical body cavity search of the inmate.
  2. The reasons less intrusive methods of searching were not used or were insufficient.

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3. A copy of the Jail Chief Deputy or ranking shift supervisor's written approval.
  4. A copy of the search warrant and supporting documents.
  5. The time, date, and location of the search.
  6. The names and sex of medical personnel present.
  7. The names, sex, and roles of any staff present.
  8. A statement of the results of the search and a list of any items removed from the inmate as a result of the search.
- (g) 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.
- (h) All contraband and weapons should be processed in accordance with the office's current evidence procedures.
- (i) Any contraband or weapons found in the facility should be documented in the contraband log.
- (j) If appropriate, the staff member shall complete a crime report and/or disciplinary report.

#### **528.6 TRANSGENDER SEARCHES**

Staff shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining genital status (see Prison Rape Elimination Act Policy for transgender and intersex definitions). If genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records or, if necessary, by obtaining that information as part of a broader medical examination conducted in private by a qualified health care professional (28 CFR 115.15).

Strip searches will be conducted by one officer of the gender requested by the inmate. If the inmate does not specify a preference, the search will be conducted by an officer of the same gender as the inmate's gender presentation. If gender presentation or identity is not clear, staff will determine the gender of the inmate based on available evidence such as legal identification, personal property at booking, information gathered during the intake process and pat-down, criminal history, and local record system entries.

#### **528.7 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.

#### **528.8 HOUSING UNIT SEARCHES**

Housing unit searches shall occur as directed by a supervisor. These searches should include all of the living spaces occupied by inmates. Housing unit searches should be scheduled in a

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manner that does not create a pattern where the inmates can predict such searches. During a housing unit search:

- (a) All inmates shall vacate their living areas and be searched by staff.
- (b) Inmates should be escorted to a separate holding area, such as the recreation yard.
- (c) Staff shall search the living areas of the inmates, including bedding, personal storage areas, bunks and other areas with inmate access.
- (d) Any weapons or contraband located shall be processed in accordance with the current evidence procedures.
- (e) The staff shall attempt to identify the inmate who possessed the contraband and file appropriate inmate discipline and/or crime reports.
- (f) Any alcoholic beverage possessed by inmates shall be seized and the appropriate inmate disciplined and/or criminal charges filed.
- (g) Any authorized item found in excess of the limited quantity (e.g., food items, newspapers) shall be seized and discarded.

At the conclusion of the housing unit search, closely supervised inmate workers should clean the unit. All authorized inmate personal property shall be respected and living areas should be returned to an orderly condition.

#### **528.9 PHYSICAL PLANT SEARCHES**

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

- (a) Exercise yards shall be searched for contraband prior to and after each inmate group occupies the yard.
- (b) Holding cells shall be searched prior to and after each inmate occupies the cell.
- (c) Program areas, such as classrooms and multipurpose rooms shall be searched after each use by an inmate or inmate group.
- (d) Laundry areas shall be searched before and after each inmate group occupies the area.
- (e) Kitchen areas shall be frequently searched for contraband and to account for tools, knives and food items.
- (f) Inmate visiting and public areas shall be frequently inspected for contraband.
- (g) The facility perimeter shall be searched at least once each shift for contraband.

##### **528.9.1 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.

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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. Also refer to the Canines Policy.

#### **528.10 CRIMINAL EVIDENCE SEARCHES**

The Jail Chief Deputy 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. Upon suspected discovery of evidence, law enforcement should be contacted in accordance with agency criminal investigation procedures. Evidence will be processed in accordance with investigative procedures and practices and referred for prosecution.

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.

#### **528.11 TRAINING**

The Training Supervisor shall provide training for staff in how to conduct pat-downs, modified strip searches and strip searches in a professional and respectful manner and in the least intrusive manner possible, consistent with facility security needs. This training shall include cross-gender pat downs and searches, as well as searches of transgender and intersex inmates (28 CFR 115.15).

# Reporting In-Custody Deaths

## 532.1 PURPOSE AND SCOPE

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

### 532.1.1 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.

## 532.2 POLICY

It is the policy of this office to follow state and local guidelines for reporting in-custody deaths.

## 532.3 MANDATORY REPORTING

All in-custody deaths shall be reported as required.

If the decedent is a boarder for another agency, the Jail Chief Deputy shall notify that agency so that agency will assume responsibility for the notification of the decedent's family.

Pursuant to Article 37 of the Vienna Convention on Consular Relations 1963, in the case of the death of a foreign national, telephonic notification to the appropriate consulate post should be made without unreasonable delay and confirmatory written notification shall be made within 72 hours of the death to the appropriate consulate post. The notification shall include the inmate's name, identification number, date and time of death and the attending physician's name.

In the event that a juvenile dies while in-custody, the Jail Chief Deputy or the authorized designee shall notify the court of jurisdiction and ensure notification to the juvenile's parent or guardian.

## 532.4 PROCEDURE

Upon determining that a death of any person has occurred while in the custody of this office, the Shift Supervisor is responsible for ensuring that the Sheriff and all appropriate investigative authorities, including the Coroner, are notified without delay and all written reports are completed.

The Shift Supervisor shall also promptly notify the Jail Chief Deputy and make any other notifications required by policy or direction. The Jail Chief Deputy shall observe all pertinent laws and allow appropriate investigating agencies full access to all facts surrounding the death (RCW 68.50.010).

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 (RCW 36.24.130). All property and records shall be retained according to established records retention schedules (WAC 44-14-03005).

The individual designated by the decedent shall be notified of all pertinent information as required by law.

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During an investigation, all inquiries regarding the death shall be referred to the Public Information Officer. Corrections Deputies shall not make a public comment.

#### **532.5 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:

- (a) Sheriff and/or the Jail Chief Deputy
- (b) Prosecutor
- (c) County Prosecutor
- (d) Investigative staff
- (e) Responsible Physician, qualified health care professionals, supervisors or other staff who are relevant to the incident

The in-custody death review should be conducted no later than 72 hours after the incident.

##### **532.5.1 UNEXPECTED-FATALITY REVIEW**

When the death of an inmate is unexpected, the Sheriff or the authorized designee shall conduct an unexpected-fatality review by appointing an unexpected-fatality review team that meets the requirements of RCW 70.48.510. The review should include recommendations regarding changes in practices or policies to prevent fatalities and strengthen safety and health protections for inmates in custody.

Upon conclusion of the review, the Sheriff shall, within 120 days following the fatality, issue a report of the results and distribute it to the governing unit with primary responsibility for the operation of the jail, and appropriate committees of the legislature. The report is subject to public disclosure, but confidential information may be redacted consistent with the requirements of applicable state and federal law.

The Sheriff is responsible for developing and implementing procedures to carry out the responsibilities of the review.

## Staff and Inmate Contact

### 534.1 PURPOSE AND SCOPE

Interaction with inmates allows for continual assessment of the safety and security of the facility and the health and welfare of the inmates. However, inappropriate interaction can undermine security and order in the facility and the integrity of the supervision process.

This policy provides guidelines for appropriate and professional interaction between members and inmates, and is intended to promote high ethical standards of honesty, integrity and impartiality as well as increase facility safety, discipline and morale.

Violation of this policy may result in disciplinary action up to and including dismissal. Members who seek information or clarification about the interpretation of this policy are encouraged to promptly contact their supervisor.

### 534.2 POLICY

The Jail Chief Deputy shall ensure that inmates have adequate ways to communicate with staff and that the staff communicates and interacts with inmates in a timely and professional manner.

### 534.3 GENERAL CONTACT GUIDELINES

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

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

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

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

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

### 534.4 CONSTITUTIONAL MATTERS

Members shall follow all United States and Washington Constitutional requirements pertaining to custodial situations; including, but not limited to, search and seizure, access to counsel and interview and interrogation.

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##### **534.5 ANTI-FRATERNIZATION**

Personal or other interaction not pursuant to official duties between facility staff and current inmates, inmates who have been discharged within the previous year, their family members or known associates have the potential to create conflicts of interest and security risks in the work environment.

Members shall not knowingly maintain a personal or unofficial business relationship with any persons described in this section unless written permission is received from the Jail Chief Deputy.

Prohibited interactions include but are not limited to:

- (a) Communications of a sexual or romantic nature.
- (b) Salacious exchanges.
- (c) Sexual abuse, sexual assault, sexual contact, or sexual harassment.
- (d) Exchanging letters, phone calls, or other similar communications, such as texting.
- (e) Exchanging money or other items.
- (f) Extending privileges, giving or accepting gifts, gratuities, or favors.
- (g) Bartering.
- (h) Any financial transactions.
- (i) Being present at the home of an inmate for reasons other than an official visit without reporting the visit.
- (j) Providing an inmate with the staff member's personal contact information, including social media accounts.

##### **534.5.1 EXCEPTIONS**

The Jail Chief Deputy may grant a written exception to an otherwise prohibited relationship on a case-by-case basis based upon the totality of the circumstance. In determining whether to grant an exception, the Jail Chief Deputy should give consideration to factors including, but not limited to:

- Whether a relationship existed prior to the incarceration of the inmate.
- Whether the relationship would undermine security and order in the facility and the integrity of the supervision process.
- Whether the relationship would be detrimental to the image and efficient operation of the facility.
- Whether the relationship would interfere with the proper discharge of, or impair impartiality and independence of, judgment in the performance of duty.

##### **534.6 REPORTING**

Members shall promptly report all attempts by inmates to initiate sexual acts or any salacious conversations, and forward any correspondence from an inmate or former inmate to the Jail Chief Deputy or the authorized designee.



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Members shall report all attempts by inmates to intimidate or instill feelings of fear to their supervisor.

Members shall promptly notify their immediate supervisors in writing if:

- A family member or close associate has been incarcerated or committed to the custody of the facility.
- The member is involved in a personal or family relationship with a current inmate or with an inmate who has been discharged within the previous year.

# Transportation of Inmates Outside the Secure Facility

## 536.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for the transportation of inmates outside this facility and to ensure that the staff assigned to transportation duties is qualified and adequately trained.

## 536.2 POLICY

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

This office shall transfer all inmates from the jail to the place of imprisonment pursuant to the sentence of the court as soon as practicable after the sentence, in accordance with all laws relating to the transfer of inmates and costs related to transfers to facilities and jurisdictions.

## 536.3 PROCEDURES

Only staff members who have completed Department-approved training on inmate transportation should be assigned inmate transportation duty. All staff members who operate transportation vehicles shall hold a valid license for the type of vehicle being operated.

Any member who transports an inmate outside the secure confines of this facility is responsible for:

- (a) Obtaining all necessary paperwork for the inmate being transported (e.g., medical/dental records, commitment documents).
  - 1. If the inmate being transported has a developmental disability or is suffering from a traumatic brain injury, the nature of the disability and any necessary accommodations must be documented and provided to the receiving facility staff (RCW 70.48.245).
- (b) Ensuring that all inmates are thoroughly searched and appropriate restraints are properly applied.
- (c) Leg irons or waist restraints shall not be used on any inmate known to be pregnant (see the Use of Restraints Policy) (RCW 70.48.500(3)).
- (d) Ensuring that all vehicle security devices (e.g., window bars, inside cages, door locks) are in good repair and are operational.
- (e) Thoroughly searching the transporting vehicle for contraband before any inmate is placed inside, and again after removing the inmate from the transporting vehicle.
- (f) Ensuring the inmate has no physical contact with members of the public.

Staffing transports and escorts outside the facility (non Court related transports): Deputies escorting inmates outside the facility shall adhere to a staff to inmate ratio of 1 to 2 (one Deputy and Two inmates). Low and medium risk inmates require 1 Deputy and no more than 2 inmates

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with waist restraints. High risk inmates require 1 Deputy and no more than 2 inmates with leg and waist restraints. A supervisor may approve deviation from these inmate to staff ratios based on efficiency, safety, and operational needs. Stun Cuff's may be substituted for leg restraints so long as the transporting deputy has been certified in stun cuff use. Stun Cuff's shall not be used on pregnant females, persons with known serious health problems, and elderly persons.

Staffing courtroom escorts: Deputies escorting inmates outside the facility, to a court room, shall transport inmates from the secure perimeter of the facility to the entrance of the court room using a staffing ratio as follows:

- Low and medium risk inmates require 2 inmates with 1 Deputy
- High medium and high risk inmates, or inmates presenting a security risk, generally require 1 inmate with 1 Deputy. Additional staffing may be authorized with supervisory approval.

Corrections Deputies shall not use physical restraints on inmates while in the court room unless a judge gives individual authorization. Corrections Deputies shall screen the daily court dockets for inmates who are high security risks to staff and public safety and make recommendation to the Prosecutor for the use of physical restraints while in the court room. Unless physical restraints are specifically authorized by the judge, Corrections Deputies shall escort inmates to the court room entrance in wrist restraints and stun cuff/cuffs around the lower leg, where Corrections Deputies shall remove the wrist restraints prior to entering the courtroom proper. Once the court proceeding are complete, the inmate will be escorted out of the courtroom proper where the Corrections Deputy shall re-apply the wrist restraints and escort back to the jail.

State of Washington v. William Lundstrom; United States v. Sanchez-Gomez

#### 536.3.1 TRANSFER OF INMATE TO HOSPITAL

When an inmate in custody for a violent or sex offense is taken to a hospital, the transporting corrections deputy shall remain with, or secure, the inmate while the inmate is receiving care, unless (RCW 10.110.020; RCW 10.110.030):

- (a) The medical care provider determines the inmate does not need to be accompanied or secured.
  - (b) The corrections deputy notifies the medical care provider that the corrections deputy is leaving after reasonably determining:
    1. The inmate does not present an imminent and significant risk of causing physical harm to themselves or another person.
    2. There is no longer sufficient evidentiary basis to maintain the inmate in custody.
    3. In the interest of public safety, his/her presence is urgently required at another location and supervisor approval is obtained.
- (a) The corrections deputy shall make a reasonable effort to ensure a replacement corrections deputy is provided or other means of securing the inmate is provided as soon as possible.

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##### **536.4 TRAINING**

The Training Supervisor shall ensure that all employees charged with inmate transportation duties receive training appropriate for the assignment.

Documentation of all training presented shall be retained in the employee's training file in accordance with established records retention schedules.

## Stun Cuff Use Policy

### 537.1 PURPOSE AND SCOPE

The goal in using the Stun-Cuff is to provide the safe and effective restraint of inmates during court proceedings, transportation, jail movement, and extradition. This policy establishes a procedure for proper issuance and use of the Stun-Cuff Device.

### 537.2 POLICY

It is the policy of this office that deputies shall only activate the Stun-Cuff in a situation or incident that reasonably appears necessary, and in accordance with the Offices Use of Force policy.

### 537.3 PROCEDURES

#### (a) ISSUANCE AND STORAGE

1. The Stun-Cuff will be kept secured in the Control Room, where it will be kept charged.
2. Only members who have successfully completed department-approved training in the use, handling, and firing of the Stun-Cuff will be authorized for its use.
3. The on-duty supervisor will assure anyone using the Stun-Cuff has been trained in its application and use.
4. At the end of their shift, the on-shift supervisor shall check to assure all Stun-Cuffs and wireless transmitters have been returned and are being charged properly for the next day.
5. Prior to using a Stun-Cuff, deputies shall conduct a pre-service inspection of the Stun-Cuff and wireless transmitter to confirm its condition. The deputy shall inspect the device, locking strap, and transmitter to ensure it is clean, charged, and in good working order. Deputies shall also conduct a spark test of the Stun-Cuff to check for proper operation.
6. In the event the Stun-Cuff or transmitter fails the pre-service inspection or spark test, the assigned deputy shall notify the on-duty supervisor. The device shall be taken out of service until necessary repairs are made.

#### (b) USAGE

1. Prior to affixing the Stun-Cuff to the inmate's lower leg or arm, the deputy shall explain under what conditions it will be activated.
2. Prior to using the Stun-Cuff during a jury trial, the Judge shall authorize its use.
3. When used during a jury trial, the Stun-Cuff shall be placed on the leg that is farthest from the jury when the inmate is seated at the defense table. The Stun-Cuff should also be placed under the inmates pant leg.
4. The Stun-Cuff shall be removed from the inmate before he/she is left unattended in a cell.

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5. Whenever possible, a verbal announcement of the intended use of the Stun-Cuff should precede the application of the device in order to provide the inmate with a reasonable opportunity to voluntarily comply, and provide other deputies and individuals with warning that the Stun-Cuff may be deployed.
  6. Deputies should carefully evaluate the circumstances and use of force options before using the Stun-Cuff. A decision must be made as to the appropriate use of force and other options available prior to immediate deployment of the Stun-Cuff.
  7. The Stun-Cuff should not be used on individuals who may be at a greater risk of harm, including:
    - (a) Pregnant women
    - (b) Persons with known serious health problems
    - (c) Elderly persons
  8. When activating the Stun-Cuff, deputies should use it for one standard cycle then stop and evaluate the situation. If subsequent cycles are necessary, the cycles should not exceed two additional activations when possible. The number of cycles deployed will be documented in a use of force report and include an explanation for why additional cycles were necessary, and how the inmate responded after each cycle.
  9. Upon compliance of the inmate, photographs will be taken of the electrode contact area and/or any subsequent injuries following the deployment of the Stun-Cuff.
  10. Following Stun-Cuff deployment, Use of Force forms and reports will be completed prior to going off-shift.
  11. In the event of a Stun-Cuff malfunction the Stun-Cuff will be turned over to the on-shift supervisor.
  12. In the event of an accidental discharge, the on-shift supervisor shall be immediately notified, and a report written.
- (c) MEDICAL TREATMENT
1. Medical staff will be notified to inspect the contact area and/or any subsequent injuries following the deployment of the Stun-Cuff.
  2. If the inmate loses consciousness, deputies shall immediately summon EMS to respond to evaluate the inmate.

#### **537.4 REVIEW**

All activations of the Stun-Cuff will be reviewed in accordance with the office's Use of Force policy.

## Contraband Watch- F Cell and Holding Cells

### 538.1 PURPOSE AND SCOPE

This policy establishes the requirement for placing inmates into and the continued placement of inmates in F cell or holding cells.

#### 538.1.1 DEFINITIONS

Definitions related to this policy include:

**F cell (Safety/Observation cell)** - An enhanced protective housing designed to minimize the risk of injury or destruction of property used for inmates who display behavior that reveals intent to cause physical harm to themselves or others or to destroy property or who are in need of a separate cell for any reason, until suitable housing is available.

**Holding cells (Sobering cells)** - A holding cell designed to minimize the risk of injury by falling or dangerous behavior. It is used as an initial sobering place for arrestees or inmates who are a threat to their own safety or the safety of others as a result of being intoxicated from any substance, and who require a protected environment to prevent injury or victimization by other inmates.

**Contraband Watch-** The placement of an inmate into an observation/holding cell due to their refusal to submit to a body scan, or when an anomaly is still present on the body scan after the arrestee has received clearance at the hospital.

### 538.2 POLICY

This facility will employ the use of holding cells and the F cell to protect inmates from injury or to prevent the destruction of property by an inmate in accordance with applicable law.

Inmates suspected of concealing contraband within their body, having refused to remove the contraband, and who may have been cleared at the hospital will be placed on Contraband Watch (CW). Placing an inmate on CW will be done in an attempt to retrieve the suspected contraband, ensure the contraband is not circulated into the inmate population, and to provide safeguards for the health and safety of the inmate suspected of having concealed the contraband.

A holding cell or the F cell shall not be used as punishment or as a substitute for treatment.

### 538.3 SAFETY CELL PROCEDURES

The following guidelines apply when placing any inmate in the F cell:

- (a) Placement of an inmate into the F cell requires approval of the Shift Supervisor or the Responsible Physician.
- (b) The F cell log shall be initiated every time an inmate is placed into the F cell and should be maintained for the entire time the inmate is housed in the cell. Cell logs will be retained in accordance with established Department retention schedules (WAC 44-14-03005).
- (c) Inmates should be permitted to remain normally clothed or should be provided a safety suit, except in cases where the inmate has demonstrated that clothing articles may

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pose a risk to the inmate's safety or the facility. In these cases, the reasons for not providing clothing shall be documented on the F cell observation log.

- (d) Inmates in the F cell shall be given the opportunity to have fluids (water, juices) at least hourly. Corrections officers shall provide the fluids in paper or foam cups. The inmates shall be given sufficient time to drink the fluids prior to the cup being removed. Each time an inmate is provided the opportunity to drink fluids will be documented on the F cell observation log, including the inmate response (rejected, accepted).
- (e) Inmates will be offered meals during each meal period. Meals will be served on paper plates or in other safe containers and the inmates will be monitored while eating the meals. Inmates shall be given ample time to complete their meals prior to the plate or container being removed. All meals provided to inmates in the F cell will be documented on the F cell observation log, including the inmate response (rejected, accepted).
- (f) The Shift Supervisor shall review the appropriateness for continued retention in the F cell at least every eight hours. The reason for continued retention or removal from the F cell shall be documented on the F cell observation log.
- (g) A medical assessment of the inmate in the F cell shall occur within 12 hours of placement or at the next daily sick call, whichever is earliest. Continued assessment of the inmate in the F cell shall be conducted by a qualified health care professional and shall occur at least every 24 hours thereafter. Medical assessments shall be documented.
- (h) A mental health assessment shall be conducted within 24 hours of an inmate's placement in the F cell. The mental health professional's recommendations shall be documented.

#### **538.4 HOLDING CELLS**

The following guidelines apply when placing any inmate in a Holding cell:

- (a) A Holding cell log shall be initiated every time an inmate is placed into a Holding cell for medical or mental health purposes. The log shall be maintained for the entire time the inmate is housed in the cell. Cell logs will be retained in accordance with established Department retention schedules (WAC 44-14-03005).
- (b) A safety check consisting of direct visual observation that is sufficient to assess the inmate's well-being and behavior shall occur at least once every 15 to 60 minutes, based on the reason for housing in a Holding cell. Each visual observation of the inmate by staff shall be documented. Supervisors shall check the logs for completeness every two hours and document this action on the Holding cell log.
- (c) Qualified health care professional shall assess the medical condition of the inmate in the Holding cell at least every 24 hours in accordance with the Department Detoxification and Withdrawal Policy. Only inmates who continue to need the protective housing of a Holding cell will continue to be detained in such housing.
- (d) Inmates held in Holding cells for observation/segregation will be reviewed at least daily for placement in other jail areas. These inmates will not be moved out of the Holding



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cells until cleared by mental health professionals, the Jail Administrator, medical staff, or those responsible for classification segregation duties.

- (e) Inmates held in Holding cells for detoxification reasons will be moved from the Holding 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) Females and males will be detained in separate Holding cells.
- (g) Inmates housed in holding cells shall be allowed access to shower every 72 hours. They shall have access to recreation at least 3 hours weekly.

#### **538.5 CONTRABAND WATCH PROCEDURES**

The following guidelines apply when placing any inmate on Contraband Watch:

When it becomes apparent through a body scan, emergency room medical examination, direct observation, or reasonable suspicion, that an inmate has concealed contraband in their body, either physically or through ingestion, the inmate will be placed on CW in an observation/holding cell. If an observation/holding cell is not available, the shift supervisor and medical staff will identify another appropriate housing cell where the inmate can be observed by officers and medical staff to be utilized for CW. The inmate will be isolated and un-restrained until the contraband can be retrieved through natural means, voluntarily surrendered or staff are reasonably assured the inmate is contraband free.

##### A. Approval:

- Placing an inmate on CW shall be authorized by the on duty supervisor and medical staff. CW retention shall be approved every day by the shift supervisor and medical staff.
- Inmates who are known to be pregnant shall not be placed on CW, unless, after consultation with the shift supervisor, there is reasonable suspicion to believe that the inmate is concealing items that would constitute a threat to the security of the facility. A strip search will be conducted in accordance with procedure 527.5 of the searches policy. The search will be documented in an incident report articulating the need for the search and the inmate shall be placed on CW until staff are reasonably assured the inmate is contraband free.

##### B. Placement on Contraband Watch:

Prior to the inmate being placed on CW in an observation/holding cell, the following shall be accomplished and documented:

- The shift supervisor shall ensure that an initial medical assessment of the inmate is completed prior to the inmate's placement on CW as part of the inmate's ongoing treatment and care.
- The observation/holding cell shall be thoroughly searched and cleaned.
- The water supply to the observation/holding cell shall be shut off.

#### **537.5.1 REPORTS**

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An incident report shall be written on each inmate placed on CW. The incident report must clearly articulate the reasons for placement and actions taken by the deputies and medical staff as required by "placement" section above.

##### 537.5.2 OBSERVATION

- 60 minute security checks will be conducted, and documented, in accordance with established policy.
- Correctional staff shall be responsible for providing meals at regular meal times. Inmates on CW will be fed meals on disposable trays.
- An inmate shall be released from CW as soon as possible or when reasonably assured the suspected contraband has been fully expelled.
- Medical staff shall evaluate and reassess the inmate's health status periodically throughout the day. Written documentation of the evaluation shall include the evaluator, date, and time.
- The on duty shift supervisor and medical staff will ensure the status of the inmate is reviewed at least once a day to determine the need for continued retention on CW. The review will be documented in an incident report, documenting the need for continued CW.

##### 537.5.3 HEALTH AND SAFETY CONCERNS

During the course of the CW, if for any reason staff observes a decline in the inmate's health, or it is believed that the inmate's health is affected by the concealed contraband, the shift supervisor shall ensure medical personnel are immediately contacted to conduct an assessment of the inmate's condition and determine if outside emergency responders should be called.

##### 537.5.4 REMOVAL FROM CONTRABAND WATCH

- The inmate may be removed from CW when it is reasonably believed that the contraband has been relinquished and it is determined the inmate is contraband free after having undergone a body scan. Termination of an inmate's placement on CW must be authorized by the on duty shift supervisor.
- An incident report shall be written to include the date of CW termination and the findings relative to the body scan and/or contraband removal.
- No inmate will be released from CW and housed in general population unless they comply with a body scan. Any deviations from this must be approved by the Classification Committee.

## Biological Samples

### 540.1 PURPOSE AND SCOPE

This policy provides guidelines for the collection of biological samples from those inmates required to provide samples upon conviction for certain offenses (RCW 43.43.754). 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.

### 540.2 POLICY

The Mason County Sheriff's Office shall assist in the expeditious collection of required biological samples from inmates in accordance with the laws of this state and with as little reliance on force as practicable.

### 540.3 INMATES SUBJECT TO BIOLOGICAL SAMPLE COLLECTION

The following inmates must submit a biological sample (RCW 43.43.754):

- (a) Every inmate convicted on or after June 12, 2008, of any of the following crimes (or equivalent juvenile offenses):
  - 1. Any felony offense
  - 2. Assault in the fourth degree where domestic violence as defined in RCW 9.94A.030 was pleaded and proven (RCW 9A.36.041)
  - 3. Assault in the fourth degree with sexual motivation (RCW 9A.36.041; RCW 9.94A.835)
  - 4. Communication with a minor for immoral purposes (RCW 9.68A.090)
  - 5. Custodial sexual misconduct in the second degree (RCW 9A.44.170)
  - 6. Failure to register (RCW 9A.44.040 et seq.)
  - 7. Harassment (RCW 9A.46.020)
  - 8. Patronizing a prostitute (RCW 9A.88.110)
  - 9. Sexual misconduct with a minor in the second degree (RCW 9A.44.096)
  - 10. Stalking (RCW 9A.46.110)
  - 11. Violation of a sexual assault protection order granted under RCW 7.105.050 et seq. (Civil Protection Orders)
  - 12. Indecent exposure (RCW 9A.88.010)

### 540.4 PROCEDURE

When an inmate is required to provide a biological sample, a trained employee shall attempt to obtain the sample in accordance with this policy.

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##### 540.4.1 COLLECTION

The following steps should be taken to collect a sample:

- (a) Verify that the inmate is required to provide a sample pursuant to RCW 43.43.754.
- (b) Verify that a biological sample has not been previously collected from the inmate by querying the Washington State Patrol (WSP) Crime Lab. There is no need to obtain a biological sample if one has been previously obtained (RCW 43.43.754).
- (c) Use the designated collection kit provided by the WSP to perform the collection and take steps to avoid cross contamination.
- (d) Forward the sample to the appropriate crime laboratory as soon as practicable.

##### **540.5 CALCULATED USE OF FORCE TO OBTAIN SAMPLES**

If an inmate refuses to cooperate with the sample collection process, corrections deputies should attempt to identify the reason for refusal and seek voluntary compliance without resorting to using force. Force will not be used in the collection of samples except as authorized by court order or approval of legal counsel and only with the approval of the Shift Supervisor. Methods to consider when seeking voluntary compliance include contacting:

- (a) The inmate's parole or probation officer when applicable.
- (b) The prosecuting attorney to seek additional charges against the inmate for failure to comply or otherwise bring the refusal before a judge (RCW 43.43.754(11)).
- (c) The judge at the inmate's next court appearance.
- (d) The inmate's attorney.
- (e) A chaplain.
- (f) A supervisor who may be able to authorize disciplinary actions to compel compliance, if any such actions are available.

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

##### 540.5.1 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.

##### **540.6 LEGAL MANDATES AND RELEVANT LAWS**

Washington law provides for the following:

##### 540.6.1 AVAILABLE INFORMATION AND TRAINING

The Sheriff or the authorized designee should maintain relevant information from the WSP in the booking area of the Mason County Sheriff's Office for training and guidance purposes. This should

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include WSP protocols for the collection, preservation, and shipment of biological samples (WAC 446-75-060).

## End of Term Release

### 542.1 PURPOSE AND SCOPE

The purpose of this policy is to establish and maintain procedures governing the release of inmates to ensure inmates are not released in error.

### 542.2 POLICY

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

### 542.3 RELEASE PROCEDURE

Inmates who have reached the end of their sentenced term or who are ordered released by the court will be scheduled for release at staggered times on their release date to avoid congestion in the release area. Inmates scheduled for release shall be escorted by the staff to the transfer/release area to begin the release procedure.

Inmates shall not be released or moved during inmate count, change of shift or at any time that would pose a potential safety threat or disrupt the orderly operation of the facility.

All inmates must be positively identified by the staff prior to being released from the facility. Inmate identities should be verified using intake records bearing the inmate's name, photograph and facility identification number or a single digit fingerprint match system, if available.

Before any inmate may be released, the following conditions must be met:

- (a) The identity of the inmate has been verified.
- (b) Corrections Deputy shall inspect the inmate's living area for damage and cleanliness.
- (c) All required paperwork for release is present. The staff shall review the active inmate file to verify the validity of the documents authorizing the release. The file should also be reviewed for other release-related or pending matters, including:
  - 1. Verifying calculations and release-date adjustments for good time.
  - 2. Any pending arrangements for follow-up, such as medications needed, appointments or referral to community or social resources.
  - 3. Unresolved grievances, damage claims or lost property.
- (d) Releasing staff must complete National Crime Information Center (NCIC) and local warrant checks to ensure that there are no outstanding warrants or detention orders. If any agency has outstanding charges against the inmate, the staff shall notify the agency that the inmate is available for release.
- (e) If an inmate has known mental health concerns, the inmate shall be evaluated by a qualified health care professional and medically authorized for release. To the extent 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 (RCW 70.48.475).

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### *End of Term Release*

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1. If the inmate is subject to a discharge review under RCW 71.05.232, the designated crisis responder shall be notified by the Jail Chief Deputy or the authorized designee 72 hours in advance of the release but in no case later than the actual release of the inmate (RCW 70.48.475).
- (f) All personal property shall be returned to the inmate during the release process;. The inmate must acknowledge receiving his/her property by signed receipt. Any discrepancies shall be promptly reported to the Shift Supervisor.
- (g) All facility property must be returned by the inmate. Any missing or damaged facility property should be documented and promptly reported to the Shift Supervisor. The inmate shall remain in custody until the Shift Supervisor reviews the damage and authorizes the release.
- (h) A forwarding address for the inmate should be on file and verified with the inmate for return of mail.
- (i) Corrections Deputies shall give Inmates with outstanding debt an invoice showing the debt balance and instructions for payment.
- (j) 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.
- (k) If needed, inmates may be allowed to make a reasonable number of phone calls to arrange for transportation.
- (l) Narcan (Naloxone) is provided by the Mason County Health Department for dissemination upon an inmate's release. At an inmate's request, Nursing staff shall disseminate a dose upon an inmate's release. Medical staff track shall log each dissemination

The housing sheet, release log and daily census log shall be updated accordingly after the inmate's release. The Shift Supervisor shall review and initial the release file prior to release for accuracy and completeness.

#### **542.3.1 MISSING PERSON REPORT**

When completing release procedures, if information from NCIC, Washington Crime Information Center, or similar authority reveals that the inmate is the subject of a missing person report, the Mason County Sheriff's Office shall notify the agency with original jurisdiction for the missing person report that the inmate is being released from custody (RCW 68.50.320).

#### **542.4 TEMPORARY RELEASE/FURLOUGHS**

Corrections Deputies shall return an inmate's clothing and personal items when granted a furlough or temporary release. The furloughed inmate must sign a property return receipt. After return to custody, the receiving Deputy shall complete a new property inventory and the inmate must sign.

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#### *End of Term Release*

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#### **542.5 CALCULATING EARNED EARLY RELEASE/GOOD TIME CREDITS**

This Section applies to the calculation of earned early release credits (ERC) and release dates. This section does not apply to EHM, Work Release, Day Reporting, or Alcohol monitoring inmates. RCW 9.92.151 establishes the authority to set the ERC rates and the maximum allowable ERC.

Corrections Deputies shall compute ERC time earned by inmates serving a sentence for a felony, gross misdemeanor, or misdemeanor conviction. Inmates shall earn ERC for presentence incarceration on that particular charge. Staff shall not credit an inmate with ERC in advance of earning the credits.

The ERC shall be accrued at a rate of 1 day for every 3 days served, starting on the 4th day of incarceration. Sentences 72 hours or less shall not be eligible for ERC.

#### Restrictions:

- (a) Inmates convicted of a serious violent offense or Class A sex offense on or after July 1, 1990 shall not be credited more than 15% off the sentence. In no other case shall an county inmate be allowed ERC in excess of one-third of their sentence.
- (b) Inmates sentenced to confinement under RCW 9.94A.670 (5)(a), Special Sex Offender Sentencing Alternative, are not eligible for ERC.
- (c) Inmates serving a sentence for a Civil commitment are not eligible for ERC.
- (d) Inmates serving an administrative jail sanction in Disciplinary Segregation do not earn ERC.

#### Inmates Sentenced to Department of Corrections:

- (a) Corrections Deputies shall complete a certification of earned early release credit form for each inmate transferred to the Department. The Deputy shall include ERC accrued and ERC lost due to disciplinary action.

#### DOC contract prisoners:

- (a) DOC staff is responsible to provide release dates for contract inmates. DOC Community Custody sanction time is consecutive to all other sentences.

#### Concurrent and Consecutive Sentences:

- (a) RCW 9.92.080 establishes concurrent and consecutive sentence criteria.



## **Chapter 6 - Inmate Due Process**

# Inmate Discipline

## 600.1 PURPOSE AND SCOPE

This policy addresses the fair and equitable application of inmate rules and disciplinary sanctions for those who fail to comply.

## 600.2 POLICY

It is the policy of this Department to maintain written general categories of prohibited inmate behavior that are clear, consistent and uniformly applied. Written rules and guidelines will be made available to all inmates. They will include a process for resolving minor infractions and a hearing process for a more serious breach of inmate rules. Criminal acts may be referred to the appropriate criminal agency.

## 600.3 DUE PROCESS

Inmates who are subject to discipline as a result of rule violations shall be afforded the procedural due process established in the policies, procedures and practices relating to inmate discipline. Staff will not engage in arbitrary actions against inmates. All disciplinary actions will follow clearly established procedures. All disciplinary sanctions will be fairly and consistently applied.

The process for an inmate accused of a rule violation include:

- Published rules of conduct related to maintaining facility safety, security and order and clearly defined penalties for a violation of rules.
- A fair hearing in which the Jail Chief Deputy or the authorized designee presents factual evidence supporting the rule violation and the disciplinary action.
- Advance notice to the inmate of the disciplinary hearing, to allow the inmate time to prepare a defense.
- An impartial hearing officer.
- The limited right to call witnesses and/or present evidence on his/her behalf.
- The appointment of an assistant or representative in cases where the inmate may be incapable of self-representation.
- A formal written decision that shows the evidence used by the hearing officer, the reasons for any sanctions and an explanation of the appeal process.
- Reasonable sanctions for violating rules that relate to the severity of the violation.
- The opportunity to appeal the finding.

### 600.3.1 INMATE RULES GENERALLY

The Jail Chief Deputy is responsible for ensuring inmate rules and sanctions are developed, distributed, reviewed annually and revised as needed.

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Inmate rules should be an integral part of the inmate orientation and may be provided verbally by staff to inmates and in a printed inmate handbook. Inmate rules shall be given to each inmate during initial housing in the form of an inmate handbook, or shall be posted in housing units. Penalties for violation of these rules will also be included in this material.

Inmates cannot be held accountable for rules of which they are unaware. However, it is impossible to define every possible prohibited act or rule violation that might be encountered in a detention facility. Therefore, a current list of recognized infractions that are generally prohibited will be available in each housing unit. Any revised inmate rules shall not go into effect until all inmate rule handbooks have been replaced or the revised rules have been made available in each housing unit. All inmates, regardless of their housing unit, shall have access to these rules. Inmate rules shall be translated into the languages that are understood by the inmates.

Disciplinary procedures governing inmate rule violations shall address rules, minor and major violations, criminal offenses, disciplinary reports, prehearing detention and prehearing actions or investigations.

#### 600.3.2 RULE VIOLATION REPORTS

A record of disciplinary infractions and punishment administered will be made. This requirement may be satisfied by retaining copies of rule violation reports, including the disposition of each violation. Rule violation reports are required for major rule violations or other violations requiring 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 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 corrections deputy
- Date and time of the report.

The supervisor investigating the violation shall ensure documentation in the investigation or rule violation report includes:

- Date and time the explanation and the written copy of the complaint and appeal process was provided to the inmate.

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- The inmate's response to the charges.
- Reasons for any sanctions.
- The identity of any staff or witnesses involved, as revealed by the inmate.
- The findings of the hearing officer.
- The inmate's appeal, if any.
- The appeal findings, if applicable.

#### **600.4 RULE VIOLATION PROCEDURES**

Minor acts of non-conformance to the rules may be handled informally by any corrections deputy by issuing an on site adjustment. On Site adjustments must be agreed upon with the inmate. A Corrections Deputy must complete an incident report. Sanctions may include less than twelve (12) hours of lock down, or other minor sanctions which are less than those for a minor infraction.

A violation of rules observed by general service employees, volunteers or contractors will be reported to a corrections deputy for further action. Corrections Deputies are authorized to recommend informal sanctions on minor violations.

Any staff member imposing informal discipline (minor infractions) shall complete the reporting portion of the disciplinary report and provide the form to the supervisor for review prior to the imposition of the sanction.

The following are disciplinary sanctions which may be imposed for minor rule violations:

- Counseling the inmate regarding expected conduct
- Removal from work detail (without losing work time credits previously earned)
- Loss of television, telephone and/or commissary privileges for a period not to exceed 72 hours
- Lockdown in the inmate's assigned cell or confinement in the inmate's bunk area for a period not to exceed 48 hours
- Loss of access to group programs during lockdown

An inmate may request a supervisor review the imposed sanction. However, this request must be made within one hour of receiving notice of the sanction. The supervisor should respond to the request within a reasonable time (generally within two hours) and shall have final authority as to the imposition of informal discipline.

#### **600.4.1 MULTIPLE MINOR RULE VIOLATIONS**

Staff may initiate a major rule violation report if an inmate is charged with three or more minor rule violations in a consecutive 180-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.

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##### **600.4.2 MAJOR RULE VIOLATIONS**

Major rule violations are considered a threat to the safety, security or efficiency of the facility, its staff members, inmates or visitors. Staff members witnessing or becoming aware of a major rule violation shall take immediate steps to stabilize and manage the situation, including immediate notification of a supervisor. The supervisor shall assess the situation and initiate any emergency action, if necessary.

The staff member who learned of the rule violation shall write and submit a disciplinary report, along with relevant evidence, to the appropriate supervisor prior to the end of the shift.

Reports shall be concise, explain the facts of the violation and should describe evidence supporting the accused inmate did or did not commit the violation. The report shall contain the elements identified in the Rule Violation Reports section of this policy.

##### **600.4.3 ADMINISTRATIVE SEGREGATION HOUSING**

Inmates who are accused of a major rule violation may be moved to administrative segregation housing for prehearing detention, with the Shift Supervisor's approval, if there is a threat to safety or security. Inmates placed in prehearing detention are subject to the property and privilege restrictions commensurate with segregated confinement. The Shift supervisor shall assure an Inmate Classification Form is completed and submitted to the Classification Committee.

The Classification Committee shall weekly review the status of any inmate in prehearing detention to determine whether continued prehearing segregation housing is appropriate.

##### **600.5 INVESTIGATIONS**

Investigations involving major rule violations should be initiated within 24 hours of the initial report and completed in sufficient time for the inmate to have a disciplinary hearing, which is to be conducted within a reasonable time of when the inmate was informed, in writing, of the charges.

If upon completion of the investigation, the investigating officer finds insufficient evidence to support a major rule violation, he/she may discuss alternative discipline with the Shift Supervisor, including handling the incident as a minor violation or recommending charges be removed. Such alternatives shall be documented in the inmate's log through an incident report.

After the investigating officer completes the investigation and the supervisor determines sufficient evidence exists to support a major rule violation, he/she will act as the hearing coordinator and will be responsible for:

- Reviewing all reports for accuracy and completeness.
- Overseeing or conducting any required additional investigation.
- Making a determination as to the final charges.
- Making preliminary decisions about the appointment of a staff member to act as an assistant to the inmate.
- Identifying any witnesses that may be called to the hearing.

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##### **600.6 NOTIFICATIONS**

An inmate charged with a major rule violation shall be given a written description of the incident and the rules violated at least 24 hours before a disciplinary hearing.

Unless waived in writing by the inmate, hearings may not be held in less than 24 hours from the time of notification.

##### **600.7 HEARING OFFICER**

The Jail Chief Deputy shall appoint at least one hearing officer to preside and conduct disciplinary hearings of rule violations. The hearing officer should be a qualified supervisor or suitably trained designee, who will have the responsibility and authority to rule on charges of inmate rule violations. The hearing officer shall also have the power to impose sanctions. The hearing officer shall not investigate nor preside over any inmate disciplinary hearing on cases where he/she was a witness or was directly involved in the incident which generated the complaint.

##### **600.8 HEARING PROCEDURE**

Inmates charged with 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. Staff shall inform the hearing officer when any inmate is excluded or removed from a scheduled hearing and shall document the reasons for the exclusion or removal. A copy of the report shall be forwarded to the Jail Chief Deputy.

Hearings may be postponed or continued for a reasonable period of time for good cause. Reasons for postponement or continuance shall be documented and forwarded to the Jail Chief Deputy.

The hearing officer shall disclose to the accused inmate's witnesses who will be participating in the hearing. Inmates have no right to cross-examine witnesses. However, the accused inmate may be permitted to suggest questions the hearing officer, in his/her discretion, may ask.

##### **600.8.1 EVIDENCE**

Accused inmates have the right to make a statement, present evidence and call witnesses at the hearing.

The hearing officer may deny the request when it is determined allowing the witness to testify would be unduly hazardous to institutional safety or correctional goals, when the witness's information would not be relevant or would be unnecessarily duplicative, or is otherwise unnecessary. The reason for denying a witness to testify shall be documented in the hearing report. The reason for denial of any documents requested by the inmate shall also be documented in the hearing record.

A witness's signed written statement may be submitted by the inmate as an alternative to a live appearance. The hearing officer shall review and determine whether the statement is relevant to the charges and shall document the reason for exclusion when written statement is not given consideration.

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Absent a safety or security concern, staff reports and evidence, including exculpatory evidence, obtained during the disciplinary investigation shall be made available to the accused inmate prior to the hearing.

#### 600.8.2 CONFIDENTIAL INFORMANTS

If information from any confidential informant is to be presented at the hearing, information establishing the reliability and credibility of the informant shall be provided to the hearing officer prior to the hearing. The hearing officer shall review such information to determine whether the informant is reliable and credible.

#### 600.8.3 STAFF ASSISTANCE

A staff member shall be assigned to assist an inmate who is incapable of representing him/herself at a disciplinary hearing due to literacy, developmental disabilities, language barriers or mental status.

The scope of the duties of the assistant shall be commensurate with the reasons for the appointment. The assistant should be allowed sufficient time to confer with the inmate to fulfill his/her obligations. In these cases the inmate does not have a right to appoint a person to assist in his/her disciplinary hearing. The final decision regarding the appointment rests with the hearing officer.

Inmate discipline is an administrative and not a judicial process. Inmates do not have a right to an attorney in any disciplinary hearing. Additionally, disciplinary matters may be referred for criminal prosecution and jail disciplinary action concurrently as there is no double jeopardy defense for an administrative process.

#### 600.8.4 DISCIPLINARY DECISIONS

Disciplinary decisions shall be based on the preponderance of evidence, meaning "it is more likely than not, based on supporting evidence, the violation occurred", presented during the disciplinary hearing.

The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to the inmate's behavior when determining what type of discipline, if any, should be imposed (28 CFR 115.78(c)).

#### 600.8.5 REPORT OF FINDINGS

A record of all disciplinary hearings shall be maintained in accordance with established records retention schedules.

The hearing officer shall write a report regarding the decision and detailing the evidence and the reasons for the disciplinary action. A copy of the report shall be provided to the inmate. The original shall be filed with the record of the proceedings. All documentation related to the disciplinary process shall be retained and a copy should be placed in the inmate's file.

If it is determined that the inmate's charge is not sustained at the end of the disciplinary hearing, the disciplinary report shall be removed from the inmate's file but otherwise maintained in accordance with records retention requirements.

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All disciplinary hearing reports and dispositions shall be reviewed by the Jail Chief Deputy or the authorized designee soon after the a final disposition.

#### **600.9 DISCIPLINARY APPEALS**

Inmates wishing to appeal the decision of the hearing officer must do so in writing within five days of the decision. All appeals will be forwarded to the Jail Chief Deputy or the authorized designee for review.

Only appeals based on the following will be considered:

- (a) The disciplinary process or procedures were not followed.
- (b) There was insufficient evidence to support the hearing officer's decision.
- (c) The discipline imposed was not proportionate to the violation committed.

A final disposition shall be rendered as soon as possible if the inmate's appeal is granted or discipline is reduced but no later than 10 days after the appeal. The decision of the review authority shall be final and the result of the appeal shall be provided to the inmate in writing.

#### **600.10 LIMITATIONS ON DISCIPLINARY ACTIONS**

The U.S. and State Constitutions expressly prohibit all cruel or unusual punishment. Additionally, there shall be the following limitations:

- In no case shall any inmate or group of inmates be delegated the authority to punish any other inmate or group of inmates.
- In no case shall a safety cell, as specified in the Juvenile Housing Policy and the Safety and Sobering Cells Policy, be used for disciplinary purposes.
- In no case shall any restraint device be used for disciplinary purposes.
- Food shall not be withheld as a disciplinary measure.
- Correspondence privileges shall not be withheld except in cases where the inmate has violated correspondence regulations, in which case correspondence other than legal mail may be suspended for no longer than 72 hours without the review and approval of the Jail Chief Deputy.
- In no case shall access to the courts and/or legal counsel be suspended as a disciplinary measure.
- No inmate may be deprived of the implements necessary to maintain an acceptable level of personal hygiene.
- Disciplinary segregation in excess of 10 days without review by the Jail Chief Deputy is prohibited. The review shall include a consultation with health care staff. Such reviews shall continue at least weekly thereafter until the disciplinary status has ended.
- Discipline may be imposed for sexual activity between inmates. However, such activity shall not be considered sexual abuse for purposes of discipline unless the activity was coerced (28 CFR 115.78(g)).



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- No discipline may be imposed for sexual contact with staff unless there is a finding that the staff member did not consent to such contact (28 CFR 115.78(e)).
- No inmate may be disciplined for falsely reporting sexual abuse or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation, if the report was made in good faith based upon a reasonable belief that the alleged conduct occurred (28 CFR 115.78(f)).

#### **600.11 GUIDELINES FOR DISCIPLINARY SANCTIONS**

The sanctions imposed for rule violations can range from counseling, loss of privileges, extra work, loss of good and/or work time and restitution for damaging jail property, to implementation of the Disciplinary Segregation Policy. To the extent that there is available therapy, counseling or other interventions designed to address and correct underlying reasons or motivations for sexual abuse, the facility shall consider whether to require an inmate being disciplined for sexual abuse to participate in such interventions as a condition of access to programming or other benefits (28 CFR 115.78(d)).

Discipline shall be commensurate with the nature and circumstances of the offense committed, the inmate's disciplinary history and the sanctions imposed for comparable offenses by other inmates with similar histories (28 CFR 115.78(b)).

Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse (28 CFR 115.78(a)).

The Sheriff or the Jail Chief Deputy shall be responsible for developing and implementing a range of disciplinary sanctions for violations.

#### **600.12 TRAINING**

The Jail Chief Deputy 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 Supervisor 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 Segregation

## 602.1 PURPOSE AND SCOPE

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

### 602.1.1 DEFINITIONS

Definitions related to this policy include:

**Disciplinary segregation** - 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. Inmates confined in Disciplinary Segregation shall be allowed two (2) hours out of their individual cell every 24 hours or in extreme circumstances of continued disruptive behavior, a supervisor or classification committee may reduce the time out to 1 hour every 24, 48 or 72 hours.

## 602.2 POLICY

The Mason County Jail will maintain a disciplinary segregation area to house inmates who, after an impartial due process hearing, are being sanctioned for violating one or more jail rules. Restrictions on privileges will be subject to the disciplinary process and in accordance with this policy.

## 602.3 DISCIPLINARY SEGREGATION

Inmates may be placed into disciplinary segregation only after an impartial hearing (Major Infraction Hearing) to determine the facts of the rule violation, in accordance with the office Inmate Discipline Policy. The hearing officer shall impose sanctions in accordance with the sanctioning schedule established by the Jail Chief Deputy. Maximum sanctions for any one incident, regardless of the number of rules violated, shall not exceed 10 days.

## 602.4 INMATE ACCESS TO SERVICES

The ability to sanction inmates for conduct violations is not absolute. Absent legitimate penological reason, inmates continue to have a right to receive certain services. However, inmates in disciplinary segregation, in accordance with the Inmate Discipline Policy, or special management inmates, who are sanctioned for one or more rule violations, may be subject to loss of privileges or credit for good time and work. The maximum good time credit reduction for each violation shall not exceed 10% of earned credit or 3 days whichever is greater.

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. Activities needing to be conducted outside the inmate's individual room, must be done during their scheduled time out. All custody staff will adhere to the following policy sections to guide them in the supervision of inmates held in disciplinary isolation or classified as requiring special management needs.

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##### 602.4.1 MEDICATION, CLOTHING AND PERSONAL ITEMS

Inmates placed in disciplinary segregation are considered special management inmates and shall not be denied prescribed medication.

Special management inmates will be provided with clothing that identifies their status, but in no case will this clothing be used to intentionally degrade 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 segregation shall not be deprived of bedding or clothing except in cases where the inmate destroys such articles or uses them to attempt suicide. The decision to continue to deprive the inmate of these articles must be made by the Jail Chief Deputy or the authorized designee and reviewed every 24 hours.

##### 602.4.2 SHOWERING AND PERSONAL HYGIENE

Inmates in disciplinary segregation should be allowed to shower with the same frequency as the general inmate population, if reasonably practicable, but at minimum shall be afforded the opportunity to shower at least every other day and shave twice a week. The opportunities for each inmate to shave and shower will be documented on the unit logs.

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

##### 602.4.3 DENIAL OF AUTHORIZED ITEMS OR ACTIVITIES

Personal items may be withheld when it reasonably appears the items will be destroyed by the inmate or it is reasonably believed the personal item will be used for a self-inflicted injury or to harm others.

Whenever an inmate in disciplinary segregation is denied personal care items or activities are usually authorized to the general population inmates, except for restrictions imposed as a result of a disciplinary hearing, the corrections deputy taking such action shall prepare a report describing the circumstances which necessitated the need to restrict personal items or activities. The report shall be submitted to a supervisor for review, who will then forward it to the Jail Chief Deputy. A copy of the report shall be placed in the inmate's file.

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##### 602.4.4 MAIL AND CORRESPONDENCE

Inmates in disciplinary segregation shall have the same privileges to write and receive correspondence as inmates in general population, except in cases where inmates violated correspondence regulations. In such cases, mail privilege may be suspended. The Jail Chief Deputy or the authorized designee shall approve mail privilege suspensions exceeding 72 hours. Legal mail shall not be suspended from access or delivery to the inmate.

##### 602.4.5 VISITATION

Inmates in disciplinary segregation 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 segregation 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 daily log. Access to courts and legal counsel shall not be suspended as a disciplinary measure.

##### 602.4.7 EXERCISE

Inmates in disciplinary segregation 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 segregation may have their telephone privilege restricted or denied. Exceptions include the following:

- (a) Making calls to attorneys
- (b) Responding to verified family emergencies when approved by a supervisor

All telephone access based on the above exceptions shall be documented on the daily log.

##### 602.4.9 BEDDING AND CLOTHING

Inmates in disciplinary segregation shall not be deprived of bedding or clothing except in cases where the inmate destroys such articles or uses them to harm him/herself or others or for something other than the intended purpose. Clothing and bedding shall be returned to the inmate as soon as it is reasonable to believe the behavior that caused the action will not continue. The decision to continue to deprive the inmate of these articles must be made by the Jail Chief

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Deputy 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 DETENTION DIET**

Under no circumstances will an inmate be denied food as a means of punishment. A disciplinary detention diet may only be used for major violations of jail rules. No inmate receiving a prescribed medical diet is to be placed on a disciplinary detention diet without review and written approval of the Responsible Physician or pursuant to a written plan approved by the Responsible Physician. Disciplinary detention 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 Detention Diet Policy.

Before any inmate is placed on a disciplinary detention diet, the following shall occur:

- (a) The Responsible Physician shall review the medical condition and history of the inmate and approve the alternative meal service.
- (b) The Jail Chief Deputy shall review the incident report and medical reports and shall approve the use of a disciplinary detention diet.
- (c) The custody staff and qualified health care professionals shall monitor these special circumstances and report their observations to the Jail Chief Deputy.
- (d) Disciplinary detention diets shall not be served in any case for more than 72 hours without the written approval of the Jail Chief Deputy and the Responsible Physician.

#### **602.6 INITIAL EVALUATION OF INMATES UPON PLACEMENT**

After notification from staff an inmate is being placed in segregation, the Shift Supervisor shall ensure 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 Shift Supervisor 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 segregation, health evaluations should include notations of any bruises and other trauma markings, and the qualified health care professional's comments regarding the inmate's attitude and outlook.

- (a) Unless medical attention is needed more frequently, each inmate in segregation should have weekly interaction with a qualified health care professional. A medical assessment should be documented in the inmate's medical file.

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- (b) Mental health staff or a qualified mental health professional should also conduct weekly rounds.

Where reasonably practicable, a qualified health care professional should provide screening for suicide risk following admission to the segregation unit.

#### **602.8 SAFETY CHECKS**

A staff member shall conduct a face-to-face safety check of all disciplinary segregation inmates at least every 60 minutes on an irregular schedule. Inmates who are violent, have mental health problems or who demonstrate unusual behavior should be personally observed by the custody staff every 15 minutes on an irregular schedule.

Inmates who are at risk of suicide shall be under 15 minute minimum 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 segregation inmates shall receive increased monitoring to include at a minimum:

- (a) Visits by members of the program staff, upon request.
- (b) Daily visits by a qualified health care professional, unless medical attention is needed more frequently.

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.

##### **602.8.1 DOCUMENTATION OF SEGREGATION CHECKS**

Segregation rounds shall be documented on door cards, logs and/or rounds forms, and include the following:

- (a) Date and time of contact
- (b) Signature or initials of the qualified health care professional making rounds
- (c) Any needed referrals
- (d) All significant findings and observations, medical assessment, treatment, recommendations, notifications and actions should be documented in the inmate's health record

#### **602.9 LOG PROCEDURES**

All management, program staff and qualified health care professional visits shall be documented on the appropriate records and logs and retained in accordance with established records retention schedules.

Handwritten logs should be completed in ink. Once an entry is made it should not be modified. If corrections or changes are needed they should be done by way of a supplemental entry.

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Electronically captured logs will be maintained in a way that prevents entries from being deleted or modified once they are entered. Corrections or changes must be done by way of supplemental entries. At a minimum the log will contain the following:

- Inmate name
- Inmate identification number
- Housing location
- Classification status
- Date admitted
- Date and time of entry and exit from the cell
- Type of infraction or reason for admission
- Tentative release date
- Any special medical or psychiatric problems or needs
- Counseling for behavior

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 will be documented in detail and should include the exact time of the safety check and the identification information of the employee conducting the check. All documentation will be gathered and provided to the Shift Supervisor or Jail Chief Deputy.

#### 602.9.1 LOG INSPECTION AND ARCHIVAL OF LOGS

The Shift Supervisor shall review and evaluate the logs and pass any significant incidents via the chain of command to the Jail Chief Deputy for review.

The logs will be retained by the Department in accordance with established records retention schedules but in no case less than one year.

# Inmates with Disabilities

## 604.1 PURPOSE AND SCOPE

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

### 604.1.1 DEFINITIONS

Definitions related to this policy include:

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

## 604.2 POLICY

This Department will take all reasonable steps to accommodate inmates with disabilities while they are in custody and will comply with the ADA and any related state laws. Discrimination on the basis of disability is prohibited.

## 604.3 JAIL ADMINISTRATOR RESPONSIBILITIES

The Jail Chief Deputy, in coordination with the Responsible Physician, will establish procedures to assess and reasonably accommodate disabilities of inmates. The procedures will include, but not be limited to:

- Establishing housing areas that are equipped to meet the physical needs of disabled inmates, including areas that allow for personal care and hygiene in a reasonably private setting and for reasonable interaction with inmates.
- Establishing classification criteria to make housing assignments for inmates with disabilities.
- Assigning individuals with adequate training to assist disabled inmates with basic life functions as needed. Inmates should not provide this assistance except as allowed in the Inmate Assistants Policy.
- Establishing transportation procedures for transporting inmates with limited mobility.
- Establishing guidelines for services, programs and activities for the disabled and ensuring that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect and respond to sexual abuse and sexual harassment (28 CFR 115.16).
- Enlisting or contracting for trained service personnel with experience working with disabled people.
- Establishing procedures for the request and review of accommodations.
- Establishing guidelines for the accommodation of individuals who are deaf or hard of hearing, have common disabilities such as sight and mobility impairments, developmental disabilities and common medical issues, such as epilepsy.



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- Identification and evaluation of all developmentally disabled inmates, including contacting the regional center for the developmentally disabled to assist with diagnosis and/or treatment within 24 hours of identification, excluding holidays and weekends.

The Jail Chief Deputy is responsible for ensuring the Mason County Jail is designed or adapted to reasonably accommodate inmates with disabilities. At a minimum this includes:

- (a) Access to telephones equipped with a telecommunications device for the deaf (TDD) for inmates who are deaf, hard of hearing or speech-impaired.
- (b) If orientation videos are used to explain facility rules to newly admitted inmates, subtitles may be displayed on the video presentation to assist inmates who have impaired hearing.
- (c) Some cells and dormitories should be equipped with wheelchair accessible toilet and shower facilities. Inmates with physical disabilities should be allowed to perform personal care in a reasonably private environment.
- (d) Tables designed for eating should be accessible to those in wheelchairs.

#### **604.4 CORRECTIONS OFFICERS RESPONSIBILITIES**

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

Corrections officers who work in the classification process should be aware of inmates with disabilities before making housing decisions. For example, persons with mobility issues may require a lower bunk and accessible toilet and shower facilities. When necessary or required, a supervisor of classification corrections deputy should consult with the qualified health care professional or the Responsible Physician regarding housing location.

Corrections officers should assist an inmate with a disability by accommodating the inmate consistent with any guidelines related to the inmate's disability. If there are no current guidelines in place, corrections deputies receiving an inmate request for accommodation of a disability should direct the inmate to provide the request in writing or assist the inmate in doing so, as needed. The written request should be brought to the on-duty supervisor as soon as practicable but during the corrections deputy's current shift. Generally, requests should be accommodated upon request if the accommodation would not raise a safety concern or affect the orderly function of the jail. The formal written request should still be submitted to the on-duty supervisor. All written requests will be placed in the inmate's booking file folder.

Requests that are minor and do not reasonably appear related to a significant or ongoing need may be addressed informally, such as providing extra tissue to an inmate with a cold. Such requests need not be made in writing.

#### **604.5 ACCOMMODATION REQUESTS**

Inmates shall be asked to reveal any accommodation requests during the intake PREA screening process. Any such request will be addressed according to the classification process.

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Requests for accommodation after initial entry into the facility should be made through the standard facility request process and should be reviewed by a supervisor within 24 hours of the request being made. The reviewing supervisor should evaluate the request and, if approved, notify the Jail Chief Deputy and any other staff as necessary to meet the accommodation. The supervisor should make a record of the accommodation in the inmate's file.

A supervisor who does not grant the accommodation, either in part or in full, should forward the request to the Jail Chief Deputy within 48 hours of the request being made. The Jail Chief Deputy, with the assistance of legal counsel, should make a determination regarding the request within five days of the request being made.

#### **604.6 TRAINING**

The Training Supervisor should provide periodic training on such topics as:

- (a) Policies, procedures, forms and available resources for disabled inmates.
- (b) Working effectively with interpreters, telephone interpretive services and related equipment.
- (c) Training for management staff, even if they may not interact regularly with disabled individuals, so that they remain fully aware of and understand this policy and can reinforce its importance and ensure its implementation.

# Inmate Access to Courts and Counsel

## 606.1 PURPOSE AND SCOPE

The purpose of this policy is to protect the constitutional rights of inmates to access the courts and legal counsel, while holding inmates accountable to the rules and regulations that govern conduct in this facility. The staff at every level is reminded that 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 all inmates will have access to the courts and the ability to consult with legal counsel.

## 606.3 INMATE ACCESS

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

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

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

Inmate access to discovery materials can either be provided by an attorney in the attorney visitation area, or through materials left for the inmate to review while in custody. Staff shall accept discovery materials at an attorney's request. Discovery materials will not be allowed in the inmate living areas and shall be stored in a secure area. Staff notify the inmate the materials are available for review. The inmate must request to review the materials. Supervisors shall assure the inmate has frequent access outside of the living areas to review the documents. Corrections Staff shall make a log entry whenever an inmate is given review access. After the inmate is finished with their review in totality, the materials will be returned to the attorney.

The Jail Chief Deputy shall be responsible for ensuring information regarding access to courts and legal counsel and requesting legal materials or legal assistance is included in the inmate handbook provided during inmate orientation.

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##### **606.4 CONFIDENTIALITY**

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

Outgoing and incoming legal correspondence shall be routed through the staff, who have received special training in inspecting confidential documents and who are accountable for maintaining confidentiality. Incoming legal correspondence shall be opened and inspected for contraband in the presence of the recipient inmate.

Inmates may seek the assistance of other inmates in writing writs and other legal correspondence to the courts when needed, subject to the security and safety needs of the inmates, staff and the facility.

##### **606.5 INMATE REQUEST FOR ASSISTANCE**

Written materials addressing how an inmate can access local attorneys and key legal documents shall be available in each housing unit. Staff shall provide these materials to any inmate upon request. However, staff shall not provide legal advice or assist any inmate in the completion of any legal document.

Habeas corpus and 1983 civil lawsuit forms shall be made available to any inmate by the staff upon request.

Legal forms filled out by the inmate shall be forwarded to court administration directly or via an appointed legal assistant.

##### **606.6 VISITATION RELATED TO LEGAL DEFENSE**

Visits with inmates 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. Contact visits may be approved by the Jail Chief Deputy for special circumstances.

- (a) Visits shall be of a reasonable length of time to discourage any allegation the defense of the inmate was hindered due to the length of time allowed for the legally authorized visit. These visits shall be of such a length of time they do not interfere with the security, order and discipline of this facility. The permissible time for visitation should be flexible but shall not substantially interfere with other facility schedules, such as medical examinations, meal service or other required activities.
- (b) Only materials brought to this facility by an approved legal assistant shall be allowed.
- (c) All materials shall be subject to security inspections by the staff and shall be routed through the Shift Supervisor for logging and distribution.

##### **606.7 MAIL**

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

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##### **606.8 IN PRO SE INMATES**

Inmates may be granted pro se status by court order only. Any time a court order is received designating an inmate as having been granted pro se status, all relevant records systems at the facility shall be updated to reflect this information. A copy of the court order shall be maintained in the inmate's file in accordance with established records retention schedules.

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

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

##### **606.8.1 PRO SE STATUS MISUSE**

Any inmate who is granted pro se status and is found to be misusing or abusing that status to the extent it poses a demonstrable threat to the safety and security of the facility shall be immediately reported to the Jail Chief Deputy. The Jail Chief Deputy may recommend the suspension or a limitation of the inmate's pro se privileges if they adversely affect the safety and security of the jail.

Upon the concurrence with the findings and recommendation of the Jail Chief Deputy, 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 se privileges.

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

##### **606.8.2 PRO SE STATUS - MATERIALS AND SUPPLIES**

The facility may provide the following materials and supplies to a pro se inmate. These items may be retained by the inmate. The items may include the following:

- Standard legal size envelopes
- A reasonable amount of paper
- manila envelopes

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

Access to ink pens, for use while in the law library area, will be provided. The use of the pen will be supervised by the staff and taken from the inmate immediately after its use.

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

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Inmates may purchase their own soft cover legal books and materials. However, such materials will be subject to safety inspection and rules pertaining to items permitted to be in the inmate's possession. Personal books must be marked with the inmate's name and booking number.

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

#### 606.8.3 PRO SE INMATES INTERVIEWING WITNESSES

A pro se inmate may be permitted to interview prospective witnesses in the regular visitation area. Requests for visits outside of normal visiting hours will be directed to a supervisor for approval and should be accommodated when practicable.

Interviews conducted by pro se inmates are subject to the following rules and restrictions:

- (a) No interview will be permitted without notification from a judge confirming or validating the prospective witness. The pro se inmate is responsible for providing the judge with the list of prospective witnesses for validation.
- (b) No visit shall be permitted by a prospective witness who is in the custody of this office or otherwise detained by a government agency, except upon a specific court order.

#### 606.8.4 PRO SE INMATES TELEPHONE USAGE

Pro se inmates may use unrecorded telephones to place calls concerning their cases. Court-authorized pro se telephone calls shall not be monitored and shall be provided without charge to the inmate in accordance with the orders of the court (see the Inmate Telephone Access Policy).

## Foreign Nationals and Diplomats

### 608.1 PURPOSE AND SCOPE

This policy addresses the privileges and immunities afforded to members of foreign diplomatic missions and consular posts.

This policy also addresses the legal requirements related to immigration and consular notifications that should occur when a foreign national is in custody.

### 608.2 POLICY

The Mason 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 Mason County Sheriff's Office Jail will also honor the laws related to foreign nationals in custody by making proper consular notifications and by assisting those who wish to contact their consular representative.

### 608.3 DIPLOMATIC AND CONSULAR IMMUNITY

#### 608.3.1 AVAILABILITY OF RESOURCES

The Shift Supervisor will ensure that current contact information for the U.S. Department of State and the U.S. Mission to the United Nations is readily available for Department members who need to verify a claim of diplomatic or consular immunity. Relevant material for law enforcement published by the U.S. Department of State Bureau of Diplomatic Security should be readily available as well.

#### 608.3.2 ADDRESSING CLAIMS OF DIPLOMATIC OR CONSULAR IMMUNITY

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

- (a) Do not accept custody of the person from the transporting officer. The person should not be brought inside the Mason County Sheriff's Office Jail unless doing so would facilitate the investigation of his/her claim of immunity.
- (b) Do not handcuff the person, or, if handcuffs have been applied, remove them unless there is an articulable threat that would justify their use.
- (c) If the person has already been accepted into custody, inform the person that he/she will be detained until his/her identity and immunity can be confirmed. Attempt to obtain a U.S. Department of State-issued identification card or other identification or documents that may relate to the claimed immunity.
- (d) In all cases, verify the status and level of immunity by contacting the U.S. Department of State or the U.S. Mission to the United Nations, as appropriate.

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It will be the responsibility of the Shift Supervisor to communicate the claim of immunity to the on-duty supervisor of the arresting agency (if not the Mason County Sheriff's Office).

The Shift Supervisor may assist another agency in determining the person's immunity status. The Shift Supervisor is responsible for ensuring appropriate action is taken based upon information received regarding the person's immunity status.

#### **608.3.3 REPORTING**

If the person's immunity status has been verified, the Shift Supervisor should ensure a report is prepared describing the details and circumstances of any detention or custody. A copy of the report should be faxed or mailed as soon as possible to the U.S. Department of State in Washington, D.C. or to the U.S. Mission to the United Nations in New York in cases involving a member of the United Nations community.

#### **608.4 CONSULAR NOTIFICATIONS**

##### **608.4.1 CONSULAR NOTIFICATION LIST AND CONTACTS**

The Jail Chief Deputy will ensure that the U.S. Department of State's list of countries and jurisdictions that require mandatory notification is readily available to office members. There should also be a published list of foreign embassy and consulate telephone and fax numbers, as well as standardized notification forms that can be faxed and then retained for the record. Prominently displayed placards informing inmates of rights related to consular notification should also be posted.

##### **608.4.2 CONSULAR NOTIFICATION ON BOOKING**

Office members assigned to book inmates shall:

- (a) Inform the foreign national, without delay, that he/she may have his/her consular officers notified of the arrest or detention and may communicate with them. Members shall ensure this notification is acknowledged and documented.
- (b) Determine whether the foreign national's country is on the U.S. Department of State's mandatory notification list.
- (c) If the foreign national's country is not on the list for mandatory notification but the foreign national requests that his/her consular officers be notified, then:
  1. Notify the nearest embassy or consulate of the foreign national's country of the person's arrest or detention by faxing the appropriate notification form. If no fax confirmation is received, a telephonic notification should be made and documented.
  2. Forward any communication from the foreign national to his/her consular officers without delay.
- (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



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form. If no fax confirmation is received, a telephonic notification should be made and documented.

2. Tell the foreign national that this notification has been made and inform him/her without delay that he/she may communicate with his/her consular officers.
3. Forward any communication from the foreign national to his/her consular officers without delay.
4. Document all notifications to the embassy or consulate and retain the faxed notification and any fax confirmation for the inmate's file.

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

#### 608.4.3 NOTICE TO INMATES

To ensure compliance with all treaty obligations including consular notification, and state and federal law, written notice shall be given to an inmate explaining that the inmate has the right to refuse to disclose their nationality, citizenship, or immigration status and that disclosure may result in civil or criminal immigration enforcement, including removal from the United States (RCW 10.93.160).

# Inmate Rights - Protection from Abuse

## 610.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines to ensure that inmates are afforded a safe, healthful environment free from abuse, corporal punishment or harassment, and that inmate property is protected.

## 610.2 POLICY

It is the policy of this Department to make every reasonable effort to protect inmates from personal abuse, corporal punishment, personal injury, disease, property damage and harassment by other inmates or staff. Staff shall take reasonable actions to safeguard vulnerable inmates from others and shall use the classification policies and procedures to make housing decisions that will provide for inmate safety. Abuse of inmates by staff or other inmates will not be tolerated.

The Jail Chief Deputy or the authorized designee shall be responsible for including prohibitions against inmate abuse and harassment, rules regarding respect for the property of others, and the prevention of disease in the inmate handbook. All inmates shall receive a copy of the inmate handbook during the booking process, which shall be printed in a language understood by the inmate. The inmate also shall receive verbal instruction on inmate rights during orientation.

## 610.3 RESPONSIBILITY

It shall be the responsibility of all facility staff to adhere to policies, procedures and practices, and to make every reasonable effort to prevent inmate injury, harassment and abuse, to prevent theft or damage to inmate property and to eliminate conditions that promote disease. These procedures include, but are not limited to:

- Following the classification guidelines for inmate housing.
- Closely supervising inmate activities and interceding as needed to prevent violence, harassment or abuse of inmates.
- Using force only when necessary and to the degree that is reasonable.
- Reporting all inmate injuries, investigating the cause of reported injuries and documenting these efforts in an incident report.
- Enforcing all rules and regulations in a fair and consistent manner.
- Preventing any practice of inmates conducting kangaroo courts or dispensing discipline toward any other inmate.
- Conducting required safety checks of all inmate housing areas.
- Checking all safety equipment for serviceability and making a report of any defective equipment to the appropriate supervisor or Jail Chief Deputy.
- Referring sick or injured inmates to a qualified health care professional without unnecessary delay.

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#### *Inmate Rights - Protection from Abuse*

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- 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 Supervisor shall be responsible for developing and delivering a training curriculum on the topic of protecting inmates from abuse to all staff. A roster of attendees shall be maintained from each class. Training completion documents shall be filed in each employee's training file.

## Indigent Inmates

### 613.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for providing basic services to indigent inmates. An inmate is considered indigent when they have carried a balance of five dollars, or less in their jail financial account during the last 7 days of their incarceration. An inmate's access to health care, programs, services and activities is not precluded by the inmate's inability to pay.

### 613.2 POLICY

It is the policy of this Department that no inmate shall be denied access to hygiene products, medical and mental health services, outgoing legal correspondence or qualified inmate programs due to a lack of funds.

The Jail Chief Deputy or the authorized designee shall establish policies and procedures for providing basic services to indigent inmates. A debit accounting procedure should also be established by the financial services division to recoup fees from inmates who have received funds after having accessed discretionary services, but before inmates have access to the funds for non-discretionary items, such as commissary products.

The Jail Chief Deputy should also establish a weekly schedule for the delivery of requested indigent services, excluding medical and mental health services, which may be requested at any time. A list of eligible indigent materials, such as hygiene products and other approved items for indigent inmates, along with the debit policies from inmate accounts, shall be communicated in the inmate orientation materials.

### 613.3 INDIGENT INMATE HYGIENE PRODUCTS

Inmates who are indigent should be provided with basic hygiene products during scheduled indigent commissary delivery. The products should include the following:

- One bar of soap or equivalent
- One unbreakable comb
- Toothpaste or powder
- Toothbrush
- Deodorant

### 613.4 INMATE REQUESTS FOR HYGIENE PRODUCTS

Inmates who have been classified as indigent may request additional hygiene products by filling out an inmate request form once a week.

### 613.5 INDIGENT INMATE REQUESTS FOR NON-EMERGENCY MEDICAL AND MENTALHEALTH SERVICES

Indigent inmates shall be permitted to request non-emergency medical and mental health services without regard to their ability to pay. Such requests should be made by the inmate by completing

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an inmate medical request form. Qualified co-payments will be recorded in the inmate's personal funds account and debited from any future funds credited to that account.

#### **613.6 INDIGENT INMATE REQUESTS FOR WRITING MATERIALS**

Indigent inmates may request writing materials on a weekly basis, as provided by an approved schedule established by the Jail Chief Deputy. Writing materials should include the following:

- At least two pre-stamped envelopes for correspondence with family and friends
- Six sheets of writing paper
- One pencil

Indigent inmates shall receive an amount of pre-stamped envelopes and writing paper sufficient to maintain communication with an elected official, officials of the Department of Corrections, attorneys and other officers of the court. Requests shall be screened and granted based on need by the Shift Supervisor. Inmates should not be permitted to maintain an excess supply of writing materials without the approval of a supervisor.

#### **613.7 INDIGENT INMATE ACCESS TO PROGRAMS**

Inmates should not be denied access to educational and vocational programs based solely on their indigent status.

## Grooming

### 615.1 PURPOSE AND SCOPE

The purpose of this policy is to allow inmates to have freedom in personal grooming, except when a legitimate government interest justifies the development of grooming standards that are based upon orders of the court, inmate classification, work status, safety and security, or health and hygiene.

### 615.2 POLICY

It is the policy of this facility to allow inmates freedom in personal grooming, except when a valid government interest justifies that grooming standards be established. The Jail Chief Deputy or the authorized designee shall establish inmate grooming standards specific to inmate classification, work status, facility safety and security, or inmate health and hygiene. Any established standards should not unreasonably interfere with religious observances. Grooming standards should be identified in the inmate handbook.

### 615.3 HAIRCUTS

Inmates will be provided haircuts and hair-cutting tools subject to established facility rules. If hair length, style or condition presents a security or sanitation concern, haircuts may be mandatory. Inmates who significantly alter their appearance may be required to submit to additional booking photos.

Inmates shall not cut names, numbers or other designs into their hair. Inmates shall not manipulate their hair into any style, including, but not limited to, braids, ponytails, cornrows or twists, that could facilitate the concealment and movement of contraband and weapons.

#### 615.3.1 HAIR CARE SERVICES

The Jail Chief Deputy or the authorized designee shall establish written procedures for inmate hair care services. The procedures will include schedules for hair care services and allow rescheduling for conflicts, such as court appearances.

Inmates shall generally be permitted to receive hair care services once per month after being in custody for at least 30 days. Staff may suspend access to hair care services if an inmate appears to be a danger to him/herself or others or to the safety and security of the facility.

### 615.4 SHAVING

Inmates may have access to shaving supplies on a weekly basis, dependent on their classification and security threat level. Facial hair shall be clean and well groomed. Long beards may allow inmates to conceal weapons or contraband. Inmates may be required to trim facial hair if it poses a security or safety risk. Inmates may be required to submit to new booking photographs if their appearance is significantly altered due to facial hair. Inmates with facial hair who work around food shall wear appropriate facial coverings.

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An inmate may be denied access to razors if he/she appears to be a danger to him/herself or others, or if such access may jeopardize the safety and security of the facility.

Inmates may be restricted from significantly altering their appearance for reasons of identification in court.

#### **615.5 NAILS**

Nail clippers will be kept at the control station and will be issued to inmates upon request. Inmate workers are required to keep their nails clean and trimmed. Inmates with long nails may be required to trim their nails if there is a security concern and the inmate is admitted to general population.

#### **615.6 GROOMING EQUIPMENT**

Grooming equipment is to be inventoried and inspected by the staff prior to being issued to inmates. The staff shall ensure 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 Washington State Cosmetology, Barbering, Esthetics, and Manicuring Advisory Board, in accordance with WAC 308-20-110. 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.

#### **615.7 SHOWERING**

Inmates shall be permitted to shower upon assignment to a housing unit, at least every other day thereafter and more often if practicable.

#### **615.8 PERSONAL CARE ITEMS**

Inmates are expected to maintain their hygiene using approved personal care items. Personal care items, including toothbrushes, combs and soap, are available through the inmate commissary and will be charged to the inmate's account.

Indigent inmates shall receive hygiene items necessary to maintain an appropriate level of personal hygiene.

No inmate will be denied the necessary personal care items. For sanitation and security reasons, personal care items shall not be shared.

# Inmate Nondiscrimination

## 617.1 PURPOSE AND SCOPE

The constitutional rights of inmates regarding discrimination are protected during incarceration. These protections extend to administrative decisions (e.g., classification, access to programs, availability of services). This policy is intended to guide the staff toward nondiscriminatory administrative decisions and to detail an inmate complaint and discrimination investigation process.

## 617.2 POLICY

All decisions concerning inmates housed at this facility shall be based on reasonable criteria that support the health, safety, security, and good order of the facility.

## 617.3 INMATES REPORTING DISCRIMINATION

Inmates who wish to report an allegation of discrimination may communicate with facility management in any way, including:

- (a) Confidential correspondence addressed to the Jail Chief Deputy or the Sheriff or other government official, including the courts or legal representatives.
- (b) Verbally to any supervisor or other staff member of this facility.

### 617.3.1 HANDLING COMPLAINTS OF DISCRIMINATION

Staff shall promptly forward all written allegations of discrimination by inmates to the Shift Supervisor. If the allegation is presented verbally, the receiving staff member shall prepare an incident report identifying the circumstances prompting the allegation, the individuals involved, and any other pertinent information that would be useful to investigating the allegation.

Unless the complaint submitted by the inmate is clearly identified as confidential and addressed to the Jail Chief Deputy, Sheriff, or other official, the Shift Supervisor shall review the complaint and attempt to resolve the issue. In any case, the Shift Supervisor shall document the circumstances of the allegation and what actions, if any, were taken to investigate or resolve the complaint. All reports of alleged discrimination shall be forwarded to the Jail Chief Deputy for review and further investigation or administrative action as needed.

Administrative evaluations and response to allegations of discrimination shall be based upon objective criteria:

- (a) The inmate's classification
- (b) The inmate's criminal history
- (c) Current and past behavior and disciplinary history
- (d) Housing availability
- (e) The availability of programs
- (f) The ability to safely provide the requested services



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##### **617.4 DISCRIMINATION COMPLAINT AUDITS**

The Jail Chief Deputy should perform an annual audit of all inmate discrimination complaints to evaluate whether any policy or procedure changes or training are indicated. The Jail Chief Deputy should record these findings in a confidential memorandum to the Sheriff. Specific details of complaints and identifying information, such as names of the involved persons, dates, or times, are not part of this process and should not be included in the memorandum. If the audit identifies any recommended changes or content that may warrant a critical revision to this Custody Manual, the Jail Chief Deputy should promptly notify the Sheriff.

Any training issues identified as a result of this audit should be forwarded to the Training Supervisor, who shall be responsible for ensuring all necessary and required training is scheduled and completed.

##### **617.5 DISCRIMINATION PROHIBITED**

Discriminating against an inmate based upon actual or perceived race, ethnicity, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, pregnancy, genetic information, veteran status, marital status, and any other classification or status protected by law is prohibited.

Reasonable and comparable opportunities for participation in services and programs including vocational, educational, and religious programs shall be made available to inmates in a nondiscriminatory manner.

The Jail Chief Deputy should periodically conduct interviews with inmates and staff members to identify and resolve potential problem areas related to discrimination before they occur.

# Inmate Grievances

## 619.1 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.

## 619.2 POLICY

It is the policy of this office any inmate may file a grievance relating to conditions of confinement, which includes release date, housing, medical care, food services, hygiene and sanitation needs, recreation opportunities, classification actions, disciplinary actions, program participation, telephone and mail use procedures, visiting procedures and allegations of sexual abuse.

Grievances will not be accepted if they are challenging the rules and policies themselves, state or local laws, court decisions and probation/parole actions.

Retaliation for use of the grievance system is prohibited.

### 619.2.1 ACCESS TO THE GRIEVANCE SYSTEM

All inmates shall be provided with a grievance process for resolving complaints arising from facility matters with at least one level of appeal.

Inmates will receive information concerning the grievance procedure during the booking process. Information will also be contained in the inmate handbook. Information regarding the grievance process will be provided to inmates in the language they understand.

The information will include:

- A grievance form or 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 of required timeframes for responses to both emergency and non-emergency grievances.
- A provision for resolving questions of jurisdiction within the facility.
- Consequences for abusing the grievance system.

## 619.3 INMATE GRIEVANCE PROCEDURES

Staff shall attempt to informally resolve all grievances at the lowest level. All attempts to resolve a grievance shall be documented in the inmate's file (log). If there is no resolution at this level, the inmate may request a grievance form.

The inmate should be advised to complete the form (electronically) and return it to any staff member. A grievance should be filed by an inmate within 24 hours of the complaint or issue.

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Inmates cannot file a grievance on behalf of another inmate but an inmate may assist another inmate in the preparation of a grievance. Custody staff may take reasonable steps to assist the inmate in the preparation of a grievance if requested.

Upon receiving a completed inmate grievance form, the staff member shall acknowledge receipt of the grievance by signing the form and giving a copy to the inmate (either electronically or hard copy). The staff member receiving the form shall gather all associated paperwork and reports and immediately forward it to a supervisor.

##### 619.3.1 EXCEPTION TO INITIAL GRIEVANCE FILING

Inmates may request to submit the grievance directly to a supervisor or directly to the Jail Chief Deputy if they reasonably believe the issues to be grieved are sensitive or that their safety would be in jeopardy if the contents of the grievance were to become known to other inmates.

##### 619.3.2 TIMELY RESOLUTION OF GRIEVANCES

Upon receiving an inmate grievance, the supervisor shall ensure the grievance is investigated and resolved or denied in a timely manner, as established by the Jail Chief Deputy. The supervisor shall assign the investigation of the grievance to the manager in charge of the department the inmate is grieving.

Grievances related to medical care should be investigated by the Responsible Physician or the authorized designee. The findings of the investigation, along with any recommendations, shall be forwarded to the Shift Supervisor. Any appeals of the findings of the medical staff shall be forwarded to the Jail Chief Deputy as the final level of appeal.

Grievances about food-related matters should be investigated by the food services manager. The findings of the investigation, along with any recommendations, shall be forwarded to the Shift Supervisor. Any appeals shall be forwarded to the Jail Chief Deputy as the final level of appeal.

Other grievances relating to programs or other services provided by the Department shall be investigated by the custody staff with the assistance of the supervising employee in charge of those services. Findings relating to the investigation will be forwarded to the Shift Supervisor. Any appeals shall be forwarded to the Jail Chief Deputy as the final level of appeal.

##### 619.3.3 APPEALS TO GRIEVANCE FINDINGS

Inmates may appeal the finding of a grievance to the Jail Chief Deputy as the final level of appeal within 72 hours of receiving the findings of the original grievance. The Jail Chief Deputy will review the grievance and either confirm or deny it. If the Jail Chief Deputy confirms the grievance, he/she will initiate corrective actions. In either case, the inmate shall receive a written response to the appeal.

Appeals related to sexual abuse allegations shall be confirmed or denied by the Jail Chief Deputy within 10 calendar days.

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##### **619.3.4 RECORDING GRIEVANCES**

The Jail Chief Deputy should maintain an electronic grievance log in a central location accessible to all supervisors. Periodic reviews of the log should be made by the Jail Chief Deputy or the authorized designee to ensure grievances are being handled properly and in a timely manner. A copy of each grievance shall be saved electronically and associated with the inmate's electronic files.

The original grievance should be retained in a file maintained by the Jail Chief Deputy or the authorized designee, and shall be retained in accordance with established records retention schedules.

##### **619.3.5 FRIVOLOUS GRIEVANCES**

Inmates shall use the grievance process only for legitimate problems or complaints. If there is concern an inmate is abusing the grievance process, he/she shall be informed continued behavior may result in disciplinary action.

##### **619.4 GRIEVANCE AUDITS**

The Jail Chief Deputy should perform an annual audit of all inmate grievances and complaints filed the previous calendar year. The Jail Chief Deputy should forward a memorandum to the Sheriff detailing the findings, including recommendations regarding any changes to policy or procedures or any additional training might be warranted to reduce future complaints. Specific identifying information regarding dates, times or individuals named in the complaints is not part of this process and should not be included in the memorandum.

The Sheriff should evaluate the recommendations and ensure appropriate action is taken.

Any training issues identified as a result of this audit should be forwarded to the Training Supervisor, who will be responsible for ensuring all necessary and required training is scheduled and completed.

##### **619.5 TRAINING**

The Training Supervisor shall ensure that all custody staff members receive initial and periodic training regarding all aspects of the Inmate Grievances Policy. All training delivered should include testing to document that the employee understands the subject matter.

##### **619.6 ADDITIONAL PROVISIONS FOR GRIEVANCES RELATED TO SEXUAL ABUSE**

The following apply to grievances that relate to sexual abuse allegations (28 CFR 115.52):

- (a) Inmates may submit a grievance regarding an allegation of sexual abuse at any time.
- (b) Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, are permitted to assist inmates in filing such grievances and to file such grievances on behalf of inmates if the inmate agrees to have the grievance filed on his/her behalf. Staff members who receive a grievance filed by a third party on behalf of an inmate shall inquire whether the inmate wishes to have the grievance processed and shall document the inmate's decision.

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- (c) Grievances may be submitted to any staff member and need not be submitted to the member who is the subject of the complaint.
- (d) Staff receiving a grievance shall forward the grievance to a supervisor. Grievances shall not be forwarded to any supervisor who is the subject of the complaint. The supervisor receiving the grievance shall refer the grievance to the Shift Supervisor for investigation. Inmates and staff are not required to attempt to informally resolve grievances related to sexual abuse.
- (e) The Shift Supervisor shall ensure that grievances related to sexual abuse are investigated and resolved within 90 days of the initial filing. The Shift Supervisor may grant an extension of up to 70 days if reasonable to make an appropriate decision. If an extension is granted, the inmate shall be notified and provided a date by which a decision will be made.
- (f) At any level of the process, including the appeal, if the inmate does not receive a response within the allotted time, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level.
- (g) Inmates may be disciplined for filing a false grievance related to alleged sexual abuse only when it is determined that the inmate filed the grievance in bad faith.

#### 619.6.1 EMERGENCY GRIEVANCES RELATED TO SEXUAL ABUSE

Any inmate who believes he/she or any other inmate is in substantial risk of imminent sexual abuse may file an emergency grievance with any supervisor. The supervisor shall determine whether immediate action is reasonably necessary to protect the inmate and shall provide an initial response within 48 hours.

The Shift Supervisor will investigate and issue a final decision within five calendar days.

The initial response and final decision shall be documented and shall include a determination whether the inmate is in substantial risk of imminent sexual abuse and identify actions taken in response to the emergency grievance (28 CFR 115.52).

## Inmate Voting

### **621.1 PURPOSE AND SCOPE**

This policy establishes the requirement for providing eligible inmates the opportunity to vote during elections, pursuant to election statutes.

### **621.2 POLICY**

The Office will assist inmates who wish to vote in an election.

### **621.3 PROCEDURES**

Prior to each election, the Jail Chief Deputy will designate a corrections deputy to be a liaison between the Office and the local registrar of voters. The designated corrections deputy will be responsible for assisting inmates who have requested to vote. Postage shall be provided to inmates who cannot afford to mail an absentee ballot.

Inmates should be advised of voting methods during the inmate orientation.

## **Chapter 7 - Medical-Mental Health**

# Health Care Administrative Meetings and Reports

## 700.1 PURPOSE AND SCOPE

The Department recognizes that the delivery of effective health care requires open and frequent communication between the Responsible Physician and the Jail Chief Deputy. This policy provides guidelines for the continuous monitoring, planning and problem resolution in providing health care that addresses the medical needs of the inmate population and prevents potential outbreaks of communicable and contagious illness.

### 700.1.1 DEFINITIONS

The following terms and meanings shall apply to all policies in this chapter:

**Access to care** - An inmate should be seen in a timely manner by a qualified health care professional. The inmate should be given a professional clinical diagnosis and receive treatment that is ordered.

**Clinical practice guidelines** - A systematically developed sciencebased statement designed to assist practitioners and inmates with decisions about appropriate health care for specific clinical circumstances. Clinical practice guidelines are used to assist clinical decision-making, assess and assure the quality of care, educate individuals and groups about clinical disease, guide the allocation of health care resources and reduce the risk of legal liability for negligent care.

**Clinical setting** - An examination or treatment room, either on or offsite, which is appropriately supplied and equipped to address a patient's health care needs.

**Daily** - Seven days a week, including holidays.

**Direct order** - A written order issued by a qualified health care professional specifically for the treatment of an inmate's particular condition.

**Health authority** - The Responsible Physician, health services administrator or health agency responsible for providing all health care services or coordinating the delivery of all health care services.

**Health appraisal** - A comprehensive health evaluation completed within 14 days of an inmate's arrival at the facility.

**Health care** - The sum of all actions, preventive and therapeutic, taken for the physical and mental wellbeing of the inmate population. The term health care includes medical, both physical and psychological, dental, nutrition and other ancillary services, as well as maintaining safe and sanitary environmental conditions.

**Health-trained custody staff** - A corrections deputy or other facility employee who has received training from the Responsible Physician or the authorized licensed designee in limited aspects of health care coordination.



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**HIPAA** - Health Insurance Portability and Accountability Act

**Mental health staff** - Qualified health care professionals who have received instruction and supervision in identifying and interacting with individuals in need of mental health services.

**Physical examination** - An objective, hands-on evaluation of an individual. It involves the inspection, palpation, auscultation and percussion of a body to determine the presence or absence of physical signs of disease.

**Responsible Physician** - An individual licensed to practice medicine and provide health services to the inmate population of the facility, or the physician at an institution with final responsibility for decisions related to medical judgment.

**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 offsite, by a qualified health care professional.

**Special needs** - Health conditions that require regular care.

**Standing order** - Written orders issued by a physician that specify the same course of treatment for each patient suspected of having a given condition and the specific use and amount of prescription drugs (e.g., immunizations, insulin, seizure medications).

**Suicidal ideation** - Having thoughts of suicide or of taking action to end one's own life. Suicidal ideation includes all thoughts of suicide when the thoughts include a plan to commit suicide and when they do not.

**Treatment plan** - A series of written statements specifying a patient's particular course of therapy and the roles of qualified health care professionals in delivering the care.

**Triage** - The sorting and classifying of health care requests to determine priority of need and the proper place for health care to be rendered.

#### **700.2 POLICY**

The Sheriff shall select the Responsible Physician in accordance with the Health Authority Policy. It is the policy of this facility that the Responsible Physician should meet with the Jail Chief Deputy at least quarterly. The Responsible Physician should be required to submit a report addressing the effectiveness of the health care system, a description of any environmental or access issues that require improvement, and detail any progress that has been made in previously reported areas.

The data for the quarterly report should be gathered by the Responsible Physician via monthly meetings (Usually done during the weekly Classification meeting) with all facility Shift Supervisors and qualified health care professionals. The monthly meetings should cover the following topics:

- Health care services

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- Quality improvement findings
- Infection control efforts
- Inmate grievances
- Environmental inspections report

##### 700.2.1 STATISTICAL REPORTS

In addition to the quarterly report described above, a statistical report will be provided annually to the Jail Chief Deputy. The statistical report will be prepared by the Responsible Physician and shall include, but not be limited to, the following:

- (a) The number of inmates receiving health services by category of care
- (b) The number of referrals to specialists
- (c) Prescriptions written and medications dispensed
- (d) Laboratory and X-ray tests completed
- (e) Infirmary admissions, if applicable
- (f) On-site and off-site hospital admissions
- (g) Serious injuries or illnesses
- (h) Deaths
- (i) Off-site transports
- (j) Infectious disease monitoring
- (k) Emergency services provided to inmates
- (l) Dental visits provided
- (m) Number of health care grievances by category (e.g., medication error, missed appointment, health staff complaint) and whether the grievance was founded or unfounded

It is the responsibility of the Jail Chief Deputy to ensure that copies of the statistical reports and documentation of any remedies implemented are retained in accordance with established records retention schedules.

## Access to Health Care

### 702.1 PURPOSE AND SCOPE

The provision of adequate health services in a custody setting is a constitutional right afforded to all inmates. The purpose of this policy is to provide custody personnel and qualified health care professionals with a process to inform newly booked inmates of the procedure to access health care services and how to use the grievance system, if necessary.

### 702.2 POLICY

It is the policy of this office that all inmates, regardless of custody status or housing location, will have timely access to a qualified health care professional and receive a timely professional clinical judgment and appropriate treatment.

The Mason County Sheriff's Office facility will provide appropriate and cost-effective emergency and necessary medical, dental and mental health care as necessary to maintain the health and well-being of inmates to a reasonable and socially acceptable standard (RCW 70.48.130).

### 702.3 ACCESS TO CARE

Inmate medical requests will be evaluated by qualified health care professionals or health-trained custody staff. Health care services will be made available to inmates from the time of admission until they are released. Information regarding how to contact the medical staff will be posted in all inmate housing areas. 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 imprisonment shall be provided regardless of an inmate's ability to pay, the size of the facility or the duration of the inmate's incarceration (RCW 70.48.130). Such unreasonable barriers include:

- Punishing inmates for seeking care for their health needs.
- Assessing excessive co-payments that prevent or deter inmates from seeking care for their health needs.
- Deterring inmates from seeking care for their health needs by scheduling sick call at unreasonable times.

All routine requests for medical attention shall be promptly routed to a qualified health care professional.

Any incident of an inmate refusing medical treatment or causing a disruption in the delivery of health care services shall be documented in an incident report. The original incident report shall be forwarded to the Responsible Physician and a copy sent to the Jail Chief Deputy.

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##### **702.4 HEALTH CARE GRIEVANCES**

Custody personnel should authorize and encourage resolution of inmate complaints and requests on an informal basis whenever possible. To the extent practicable, custody personnel should provide inmates with opportunities to make suggestions to improve programs and conditions.

Inmates will be informed of the grievance process during inmate orientation. The grievance process is also explained in the inmate handbook, which all inmates receive and which they should have additional access to in their housing units. Grievances will be handled in accordance with the Inmate Grievances Policy.

Custody personnel should minimize technical requirements for grievances and allow inmates to initiate the grievance process by briefly describing the nature of the complaint and the remedy sought. For simple questions and answers regarding clinical issues, inmates may meet with a qualified health care professional or may submit a written correspondence.

Inmate grievances regarding health care issues will be investigated by an uninvolved member of the medical staff. If no such person is available or does not exist, an outside peer should be sought to investigate the grievance. The inmate should be provided with a written response in accordance with the schedule set forth in the Inmate Grievances Policy. Responses to inmate grievances should be based on the community standard of health care.

Copies of grievances and the facility's response shall be sent to the Jail Chief Deputy, who, in consultation with the Responsible Physician, shall serve as the final authority in response to all inmate grievances.

If an inmate is not satisfied with the response, the inmate may appeal the grievance as outlined in the Inmate Grievances Policy.

##### **702.5 POSTING AVAILABLE RESOURCES**

A listing of telephone numbers for medical, dental, mental health and ambulance services shall be posted at the facility's medical area and in the primary staff control station, along with a schedule of availability.

## Non-Emergency Health Care

### 704.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a daily triage system of inmate requests for health care services. This is to ensure that the health needs of the population are addressed properly and in a timely manner.

### 704.2 POLICY

It is the policy of this Department to provide daily access to the qualified health care professionals or health-trained custody staff in order for inmates to request medical services. 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.

The Responsible Physician, in coordination with the Jail Chief Deputy or the authorized designee, is responsible for developing a process that includes:

- (a) A process for inmates to request health services on a daily basis.
- (b) A priority system for health care services to acquire and address requests for routine health care, and for urgent or emergent injuries, illnesses and conditions.
- (c) Making health care request forms available in each housing unit and to all inmates upon request.
- (d) A system, in which health care requests are documented, triaged and referred appropriately.
- (e) Restrictions that prohibit non-health services personnel from diagnosing or treating illnesses or injuries.

### 704.3 HEALTH CARE REQUESTS

During the collection of health care requests from inmates, care should be taken to protect the confidentiality of the inmate and the nature of the health issue. The collector shall date and initial the request when the collection takes place. The requests shall be triaged to determine the priority of need and the proper place for health care to be delivered.

Inmates will be instructed on how to obtain medical services during the inmate orientation process and in the inmate handbook. Inmates shall submit a medical request form to the housing unit deputy or the health-trained custody staff delivering medications, or a nurse, if appropriate.

Medical request forms should be available in languages representative of the population. Inmates who communicate in a language not available in printed form shall have access to interpreter services.

Inmates with disabilities should be provided with appropriate assistance or accommodation to ensure they are able to request health care services.

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The collecting corrections deputy shall ensure the reason for seeking medical attention is on the medical request form. If no reason is given, the corrections deputy shall encourage the inmate to indicate whether the matter is urgent or confidential. The corrections deputy shall forward all requests to the jail nurse.

#### **704.4 TRIAGE OF HEALTH CARE REQUESTS**

Qualified health care professionals shall perform a daily triage. Sick call shall be available to inmates at least five days a week and shall be performed by a qualified health care professional.

Other qualified health care professionals should schedule inmates in need of specialized treatment for the next available providers' clinic. The wait for the next available providers' clinic should not exceed two days. The qualified health care professional shall document the referral in the providers' scheduling book and on the inmate's medical record.

The frequency and duration of sick call should be sufficient to meet the needs of the inmate population, but should be conducted at least weekly by a qualified health care professional. If an inmate's custody status precludes attendance at sick call, arrangements shall be made to provide sick call services in the place of the inmate's detention.

#### **704.5 GUIDELINES FOR ELECTIVE PROCEDURES OR SURGERY**

The Responsible Physician and the Jail Chief Deputy shall work cooperatively to develop guidelines that govern elective procedures or surgery for inmates. The guidelines must include decision-making processes for elective procedures or surgery that is needed to correct a substantial functional deficit or an existing pathological process that threatens the well-being of the inmate over a period of time. Any discussion of this nature with the inmate should be conducted in a language easily understood by the inmate and should be carefully documented in the inmate's medical record. This record should be maintained in accordance with established records retention schedules.

#### **704.6 REQUESTS FOR OUTSIDE MEDICAL CARE**

Inmates who request access to health care services outside the facility may do so with advance authorization from the Jail Chief Deputy or the authorized designee. The inmate shall be required to provide proof of sufficient private funds available to pay for all costs associated with transportation to the off-site facility and all costs associated with the medical services, diagnostics, treatment plans, medications or any other costs associated with off-site medical care.

## Referrals and Coordination of Specialty Care

### 706.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process for referring inmates who need health care or specialty care that is beyond the resources available in the facility. The policy includes guidelines regarding transportation under appropriate security provisions, and the formulation of advance written agreements for around the clock or on-call availability of alternate services. Specialty care includes specialist-provided health care, such as nephrology, surgery, dermatology and orthopedics.

### 706.2 POLICY

It is the policy of this Department that inmates have access to necessary hospitalization and specialty services for serious medical needs. This facility will provide, either directly or through contracted sources, specialty care and emergency medical services to inmates when the need is determined by the Responsible Physician.

### 706.3 JAIL ADMINISTRATOR RESPONSIBILITY

The Jail Chief Deputy or the authorized designee, in coordination with the Responsible Physician is responsible for establishing written agreements with outside specialty health care services for emergency and urgent care that is not available within the facility. In addition, a plan shall be developed for the secure transportation of inmates to a facility where such care is available.

### 706.4 REFERRAL TO OFF-SITE MEDICAL CARE

A qualified health care professional shall evaluate the inmate, and if indicated, shall recommend specialty appointments in writing on the order sheet in the inmate's medical record. A referral form should be completed and any supporting documentation attached. The written referral shall be reviewed and authorized, if appropriate, by the Responsible Physician.

### 706.5 OFF-SITE COORDINATION

A qualified health care professional is responsible for recommending off-site medical and psychiatric care for inmates, coordinating outside appointments and notifying supervisory custody staff of off-site transportation needs. The Jail Chief Deputy should establish a written transportation procedure that ensures inmates are transported securely and in a timely manner for medical, mental health, dental clinic or other specialty appointments. The procedure shall include the secure transfer of medical information to the receiving health care service.

Any conflicts that arise regarding off-site consultation trips will be communicated by the corrections deputy responsible for transportation to the Responsible Physician and Jail Chief Deputy or the authorized designee so that modifications may be made.

The jail supervisor shall keep a log of missed appointments to determine if transportation issues are impeding the ability of inmates to access appropriate medical care. Any issues identified shall be discussed and resolved between the Responsible Physician and the Jail Chief Deputy.

## 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 exceed the licensure or certification of staff who are on-duty and to define staff training requirements.

### 708.2 POLICY

It is the policy of this office that emergency medical, mental health and dental services are available 24 hours a day. These services may include off-site health care services.

### 708.3 PROCEDURES

The Jail Chief Deputy or the authorized designee shall work cooperatively with the Responsible Physician to develop plans and procedures for responding to emergency medical incidents that occur when the level of medical or mental health services needed exceeds the licensure or certification of staff who are on-duty. The plans should include: on-site emergency first aid, basic life support and crisis intervention; emergency evacuation of an inmate from the facility, including security procedures, to ensure an immediate transfer when appropriate; on-call physicians, dentists and mental health professionals; predetermined back-up health care services when the emergency health facility is not located in a nearby community; and the identification of primary, secondary and tertiary acute care facilities.

The plan may additionally include, but is not limited to, these components:

- (a) Health-trained custody staff shall respond to all emergencies immediately upon notification.
- (b) Contact information for emergency on-call health care services, both on- and off-site, is available and accessible for facility supervisors.
- (c) Qualified health care professionals shall respond by reporting to the area of the emergency with the necessary emergency equipment and supplies.
- (d) Emergency equipment and supplies are regularly maintained and accessible to the qualified health care professionals and health-trained custody staff.
- (e) Most inmates will be stabilized on-site and then transferred to an appropriate health care unit, if necessary.
- (f) Notification of on-call physicians and mental health staff will be done as soon as the situation reasonably allows.
- (g) The qualified health care professionals will determine if the inmate needs to be transported to a local emergency room for treatment.
- (h) When necessary, facility staff shall activate 9-1-1 and notify a supervisor as soon as reasonably practicable.



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- (i) The Jail Chief Deputy and the Responsible Physician will coordinate on the notification of the inmate's next of kin in cases of serious illness and injury. Death notifications will be made in accordance with the Inmate Death - Clinical Care Review Policy.

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 Jail Chief Deputy or the authorized designee is responsible for ensuring the following information, equipment and personnel are available in the event an inmate requires emergency treatment:

- (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. This includes:
  - 1. Opioid overdose medication as provided by RCW 69.41.095.
  - 2. Epinephrine as provided by Washington law (RCW 70.54.440).
- (c) A physician, dentist and mental health professional should be available on-call 24 hours a day, seven days a week (this can include off-site health care services) and there should be a back-up health care services plan.
- (d) Ambulances should be accessed through the facility staff or by calling the appropriate emergency number. There should be a clear security plan in place for the transportation of inmates.
- (e) The Shift Supervisor will be contacted and informed of any emergency as soon as practicable.
- (f) All decisions regarding medical treatment and the need for emergency transportation are to be made by the qualified health care professionals or health-trained custody staff.
- (g) Whenever reasonably possible, the on-call health care service should be notified prior to transporting the inmate to the hospital or other emergency care. However, in the event of a life- or limb-threatening emergency, the inmate shall be sent to the hospital in the most expedient way possible, which may require notifying the specific health care service after the inmate has been transported.

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##### **708.5 FIRST-AID KITS**

The Responsible Physician or the authorized designee is responsible for determining the contents, number, location and procedures for monthly inspections of all first-aid kits in the facility. The Responsible Physician shall also ensure that:

- (a) The contents of each first-aid kit are:
  - 1. Appropriate for its location and approved by the Responsible Physician.
  - 2. Arranged for quick use.
  - 3. Documented on the outside cover.
  - 4. Inventoried every month.
  - 5. 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 Jail Chief Deputy shall ensure that all qualified health care professionals are trained in the delivery of emergency medical services in the custody environment during new employee orientation.

The Jail Chief Deputy 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 automated external defibrillators (AED).
- (b) How to properly summon internal and external emergency services.
- (c) Recognition of basic life support signs and symptoms, and the actions required in emergency situations.
- (d) Administration of basic first aid.
- (e) Certification in CPR in accordance with the recommendations of the certifying health organization.
- (f) Recognition of the signs and symptoms of mental illness, violent behavior and acute chemical intoxication and withdrawal.
- (g) Procedures for inmate transfers to appropriate medical facilities or health care service.

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- (h) Suicide recognition, prevention and intervention techniques.

All records of the training provided, testing procedures and the results, and certificates achieved shall be maintained in each qualified health care professional's training file in accordance with established records retention schedules. The Responsible Physician should be bound by similar requirements in the contractual language between the Office and the vendor.

#### **708.7 AUTOMATED EXTERNAL DEFIBRILLATORS**

The Responsible Physician or the authorized designee is responsible for ensuring that an AED is available in the facility and that all staff members are trained in its use. The AEDs shall be inspected and tested at a frequency consistent with the manufacturer's recommendations to ensure functionality.

## Health Care for Pregnant Inmates

### 710.1 PURPOSE AND SCOPE

The purpose of this policy is to establish prenatal and postpartum health care services for inmates who are pregnant. Services may include assistance recovering from the effects of potentially unhealthy lifestyles, which could include tobacco use, alcohol and drug abuse or addiction, and a lack of previous adequate medical care. Because of unhealthy lifestyle choices prior to incarceration, many inmate pregnancies are classified as high risk. This policy is intended to protect the health of the pregnant inmate and her fetus.

### 710.2 POLICY

It is the policy of this office that a qualified health care professional should provide comprehensive prenatal and postpartum care for all pregnant inmates during their incarceration, which includes but is not limited to the following:

- Pregnancy testing
- Prenatal care, both routine and high-risk if needed
- Management of drug- or alcohol-addicted pregnant inmates
- Comprehensive counseling and assistance services
- Nutrition modification for term of pregnancy and lactation
- Birthing in an appropriate setting
- Postpartum care
- Family planning education and services
- Access to privately funded pregnancy alternative options

A qualified health care professional shall provide counseling and information to pregnant inmates regarding planning for their unborn child.

### 710.3 BOOKING - PREGNANCY SCREENING

When booking a female inmate, the following steps shall be taken:

- (a) All females shall be asked if they are pregnant. If the inmate states she is pregnant, a confirming urine test should be performed within 48 hours and documented in the medical record.
- (b) Pregnant inmates who are under the influence of or withdrawing from alcohol or other substances should be referred to a nurse, if available, or other available resource.
- (c) The Responsible Physician, in collaboration with facility staff, shall ensure the appropriate clinic visits are scheduled.
- (d) A medical record should be opened with a notation indicating pregnancy.

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- (e) The inmate should be interviewed by a qualified health care professional for the following information, which should be written in the medical record:
  - 1. Last menstrual period (LMP)
  - 2. Estimated date of conception (EDC)
  - 3. Estimated due date (40 weeks from EDC)
  - 4. Number of pregnancies (Gravidity)
  - 5. Number of live births (Parity)
  - 6. Therapeutic abortions (TAB)
  - 7. Spontaneous abortions (SAB), aka miscarriages
  - 8. Prenatal care history
  - 9. Current medications
  - 10. Any current adverse symptoms: vaginal bleeding or discharge, abdominal cramping or pain (if yes, notify on-site or on-call physician)
  - 11. High-risk factors if known: drug or alcohol use/abuse, smoking, previous pregnancy problems, other medical problems (cardiac, seizures, diabetes/DM, hypertension/HTN)
  - 12. If recent heroin or methadone use is identified, notify the on-site or on-call physician for orders.
- (f) Each pregnant inmate should have:
  - 1. A completed medical recommendation form for a low bunk assignment, in a lower tier, with no waist chains, as appropriate.
  - 2. A completed special diet form ordering a pregnant diet.
  - 3. Prenatal vitamins prescribed at one per day for the duration of the pregnancy.
  - 4. An appointment at the next available obstetric clinic if the inmate is 10 or more weeks gestation.

#### **710.4 HOUSING**

Inmates who are known to be pregnant may be housed in any unit appropriate for their classification, with the following exceptions:

- (a) All pregnant inmates identified at intake or the obstetric clinic to be high-risk or who are in their last trimester of pregnancy shall be housed in the medical unit.
- (b) Housing in the medical unit shall be by order of an obstetric specialist or the Responsible Physician.

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##### **710.5 COUNSELING AND TREATMENT**

The Office will provide all necessary counseling and treatment to pregnant inmates to ensure they are receiving the proper care. To accomplish this, the following shall occur:

- (a) The directions of the obstetric specialist shall be followed throughout the pregnancy and postnatal period. No non-medical staff has the unilateral authority to change or overrule an order or care recommendation made by the Responsible Physician. The Jail Chief Deputy and Responsible Physician shall develop a process by which perceived conflicts between medical orders/recommendations and safety and security interests of the jail can be discussed and resolved. Ultimately, the jail must provide adequate treatment for an inmate's medical needs.
- (b) The Responsible Physician shall be consulted immediately if a patient is under 10 weeks gestation and has medical concerns.
- (c) Any pregnant inmate with medical problems that occur between scheduled obstetric appointments shall be seen by a qualified health care professional. If the qualified health care professional assesses the problem as urgent and a physician is not available on-site, the inmate shall be sent to the hospital for evaluation.
- (d) The inmate shall be advised to notify health-trained 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) Upon request of the inmate, reasonable efforts should be made to provide midwifery or doula services to inmates who are pregnant or who have given birth within the last six weeks (RCW 70.48.135).

##### **710.6 RESTRAINTS**

Inmates who are known to be pregnant or who are in labor shall not be placed in restraints except as provided in the Use of Restraints Policy.

###### **710.6.1 NOTICE REGARDING RESTRAINTS**

The Jail Chief Deputy or the authorized designee should ensure notices are posted regarding the use of restraints on inmates who are pregnant, in labor, or in postpartum recovery in locations where medical care is provided within the facility and provide notice of the requirements

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to appropriate staff. Appropriate staff includes all medical staff, staff who are involved in the transportation of pregnant inmates, and other staff designated by the Jail Chief Deputy (RCW 70.48.501).

#### **710.7 ABORTIONS**

Inmates who wish to terminate their pregnancy shall be referred to outside counseling services for further information regarding available options. The Office shall not impede the woman's access to abortion counseling or services and shall provide necessary transportation and supervision to such services. Any financial obligations will be the responsibility of the inmate.

##### **710.7.1 STAFF INVOLVEMENT**

Staff members who object to facilitating an inmate's elective abortion (including arranging, transporting, security) should not be required to perform such duties.

#### **710.8 PRESENCE DURING LABOR AND DELIVERY**

Members are not permitted in the room during labor or childbirth unless requested by medical personnel. Should medical personnel request the presence of a member of the facility, a female member should respond, if practicable (RCW 70.48.500(4)).

## Inmate Medical Fees

### 712.1 PURPOSE AND SCOPE

The purpose of this policy is to provide facility staff and qualified health care professionals with the information necessary to educate newly processed inmates on the procedures and their responsibilities for inmate medical fees at the time of intake.

### 712.2 POLICY

It is the policy of this Department individuals booked into and held at the facility shall be informed of the guidelines associated with inmate medical fees. Inmates will be advised of the guidelines in writing during the orientation. This information will be conveyed in a language easily understood by the inmate.

The inmate medical fee shall be waived for service initiated by medical staff, including follow-up appointments, mandated health screening, work clearance, chronic care and mental health care.

It is the policy of this Department necessary medical services will not be denied or delayed because of disputes over the cost of medical care or a determination of financial responsibility (RCW 70.48.130).

### 712.3 INMATE MEDICAL FEE GUIDELINES

- (a) Inmate initiated medical visits will result in a fee to the inmate of ten dollars per visit.
- (b) Medical staff will complete a log of medical fee charges and forward the log daily to the custodial administration. The inmate's account will then be debited ten dollars for the inmate medical fee. The inmate shall be provided treatment regardless of his/her ability to pay the fee. After release, unpaid medical debt will be sent to collections if no attempt to pay is made within 90 days.
- (c) The following inmate health services shall be exempt from medical fees:
  - 1. Intake medical screening
  - 2. Health appraisals (14-day physicals)
  - 3. Public health evaluations
  - 4. Follow-up monitoring of chronic health conditions (e.g. hypertension services, seizure monitoring, medication monitoring)
  - 5. Educational information on the inmate's condition
  - 6. When an assault requires medical attention
  - 7. When an inmate is involved in a no-fault injury while incarcerated.

Any incident of an inmate refusing medical treatment or causing a disruption in the delivery of health care services shall be documented in an incident report. The original incident report shall be forwarded to the Responsible Physician and a copy sent to the Jail Chief Deputy.



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#### **712.4 FEE APPEAL PROCESS**

Inmates charged for health services shall be permitted to challenge the fee in accordance with the Inmate Grievances Policy.

## Health Authority

### 714.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the responsibility of the health authority as arranging for all levels of health services, assuring the quality of all health services, identifying lines of medical authority for the inmate health program and assuring that inmates have access to all health services.

The policy also establishes properly monitored processes, policies, procedures and mechanisms to ensure that the contracted scope of services is adequately and efficiently delivered.

The health authority is defined as the Responsible Physician, health services administrator or health agency responsible for providing all health care services or coordinating the delivery of all health care services (see the Health Care Administrative Meetings and Reports Policy).

### 714.2 POLICY

The health authority is responsible and accountable for all levels of health care, and has the final authority regarding clinical issues within this jail. The health authority is responsible for establishing, implementing and annually reviewing/revising policies for all clinical aspects of the health care program and for monitoring the appropriateness, timeliness and responsiveness of care and treatment. The health authority also approves all medical decisions and protocols.

### 714.3 SELECTION PROCESS

The Sheriff or the authorized designee shall select a health authority using an existing office procurement or selection process. The individual or organization selected shall be designated as the health authority for inmate health care on behalf of the facility.

Aside from any monetary or term considerations, the contract between the Office and the selected individual or organization shall minimally include:

- (a) Language establishing the scope of services being contracted and the type of health care service needed.
- (b) Job descriptions, minimum qualifications, and performance expectations for contract personnel.
- (c) Language requiring the contractor to develop appropriate measures and review processes for assessing the quality, effectiveness, and timeliness of the services provided, and periodically reporting those findings to the facility.
- (d) Identification of a Responsible Physician, who shall serve as the medical authority on treatment matters requiring medical expertise and judgment.
- (e) Language regarding the minimum frequency that the health authority shall be present at the facility.
- (f) The roles and responsibilities of staff in ensuring that the contractor may adequately deliver services in a safe and secure environment.
- (g) A written plan for coordinating medical care from multiple health care services.

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1. The plan should include procedures for making inmate medical records available to a managed health care system as permitted by RCW 70.48.100.
- (h) A written plan for the collection and maintenance of inmate health records that is compliant with the Health Insurance Portability and Accountability Act (HIPAA).
- (i) Identification of a dispute resolution process for the contracted parties and for inmates who may be questioning treatment plans.
- (j) Language and a plan addressing issues of liability and indemnification for issues related to inmate health care.

The health authority shall be authorized and responsible for making decisions about the deployment of health resources and the day-to-day operation of the health services program. If the health authority is other than a physician, any final clinical judgments shall rest with a single, designated, Responsible Physician.

The health authority or the authorized designee will meet at least monthly with custody representatives to discuss the health care program and any issues that require correction or adjustment.

Security regulations are applicable to facility staff and health care personnel.

#### **714.4 PROVISION OF HEALTH CARE**

The health authority is responsible for arranging the availability of health care services. The qualified health care professionals should determine what medical services are needed on a case-by-case basis. The Jail Chief Deputy shall provide the administrative support for making the health care services available to inmates. Clinical decisions are the sole province of the qualified health care professionals and should not be countermanded by non-health care professionals.

If routine health services are provided by medical personnel outside this facility, all office policies regarding treatment, transfer, transportation or referral of emergencies shall be followed.

The health authority is responsible for ensuring that the health services manual complies with all applicable state and federal law and that a review is conducted annually. An annual audit of the quality and adequacy of health care services should be done, with corrective action taken when deficiencies are identified.

# 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. Administration of a skin test for tuberculosis (TB).
  - 3. Recording of height and weight.
  - 4. Recording of vital signs (blood pressure, pulse, respiration rate and temperature).
  - 5. Ordering other tests or examinations as appropriate.
  - 6. 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 (physician, mid-level practitioner or registered nurse) 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 and TB skin test results.
  - 4. A medical examination, including a review of mental and dental status.
  - 5. Initiation of treatment or therapy, as appropriate.

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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.

#### **716.3.1 PRISON RAPE ELIMINATION ACT (PREA) SCREENING FOLLOW-UP**

Inmates who have an identified history of sexual victimization shall be offered a follow-up meeting with a qualified health care professional or mental health provider within 14 days of intake screening (28 CFR 115.81).

#### **716.3.2 OPIOID USE DISORDER**

Individuals who are experiencing an opioid use disorder will be provided with opioid treatment medications pursuant to the procedures developed by the health authority and in compliance with the requirements of RCW 71.24.599.

Prior to the release of the inmate receiving opioid treatment medication, the health authority will connect the inmate to an appropriate provider or treatment site in the geographic region where the inmate will reside. If a connection is not possible, the health authority should document the efforts made in the inmate's file (RCW 71.24.599).

#### **716.4 ANNUAL HEALTH EXAMINATIONS**

The Responsible Physician will determine the criteria for periodic health examinations for inmates. Inmates should be scheduled for an annual health examination within 14 days of the inmate's annual incarceration anniversary. The examination should include:

- A review of current vital signs and weight.
- A TB skin test and review of the results.
- An evaluation of any health-related issues arising since the last health evaluation.
- Initiation of treatment, as appropriate.
- Any updates to the inmate treatment plan.

All inmates should also be examined prior to release to protect both the inmate and the public.

## Transfer Screening

### 719.1 PURPOSE AND SCOPE

This policy recognizes that inmates are frequently transferred within the correctional authority's system and to facilities outside the system. This policy establishes a process for medical screening of transferred inmates to ensure continuation of care and to avoid unnecessary diagnostics.

### 719.2 POLICY

It is the policy of this office that inmates who are transferred to another jail, correctional system or health care facility will be screened prior to transfer to ensure that the receiving facility can assume and continue proper care. Medical needs of the inmate will be clearly communicated to the receiving facility, including the ongoing treatment plan, scheduled surgeries and outside appointments.

Inmates who are transferred to other facilities shall be sent with a discharge summary that includes information about the inmate's medical and mental health condition, the current treatment plan and any medications, if needed.

### 719.3 TRANSFERS

Any inmate being transferred to another correctional or health care facility should be medically screened prior to transfer as described below.

The medical screening should include:

- (a) A determination of whether the inmate is being treated for a medical, mental health or dental problem.
- (b) A determination of whether the inmate has any apparent, current medical, mental health or dental needs or complaints (RCW 70.48.245).
- (c) What medication, if any, the inmate is presently prescribed.
- (d) Whether the inmate has any evidence of abuse or trauma.
- (e) Whether the inmate has any physical deformities or special daily living assistance needs.
- (f) The inmate's classification and clearance status (i.e., general population, segregation).
- (g) Whether the inmate has any pending follow-up appointments or requirements.

Completed discharge summaries, including the medical screening results, shall accompany inmates being transferred to another office's jurisdiction to ensure that the receiving health care service can assume and continue necessary care. A release of information authorization is not required.

If the receiving facility requests a copy of the medical record, it will be supplied within five working days.

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The discharge summary and any related medical records being transferred shall be placed in a file or envelope that maintains the confidentiality of the inmate's medical information. The transporting personnel shall be provided separate written instructions regarding medication or health interventions, including necessary precautions that are required en route.

##### **719.3.1 EXTENDED TRANSPORTATION OF INMATES**

When an inmate will be in transfer status for several days and housed temporarily at various custody facilities along the way, a medical transfer packet shall be prepared by the qualified health care professional in a form that will advise the temporary housing facilities of any medical needs of the inmate. When medically appropriate, a small supply of medication should be provided with the medical transfer packet so it will be available to the temporary housing facility as needed.

##### **719.4 RECEIVING TRANSFERRED INMATES**

Where an inmate being transferred to this facility arrives without a full and comprehensive medical transfer packet from another facility, the inmate shall be medically screened and receive a comprehensive health appraisal, in accordance with the Medical Screening Policy and Health Appraisals Policy. The medical department of the sending facility should be promptly contacted to determine if the transferred inmate has any medical needs that require immediate attention or any scheduled surgeries or appointments with community health care services. Arrangements should then be made with the sending facility for the delivery of a more detailed review of the inmate's medical needs.

# Medical Screening

## 721.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a medical screening process for newly booked inmates so medical, mental health and dental issues are properly identified and addressed, and to obtain a medical clearance when necessary.

## 721.2 POLICY

It is the policy of this office a medical screening be performed on inmates upon arrival at the intake area to ensure existing, emergent and urgent health care, dental or mental health needs are identified, risks are assessed and inmates with contagious and communicable diseases are properly classified and housed for their health and the health of the general population.

## 721.3 ELEMENTS OF MEDICAL SCREENING

The medical screening shall be performed by a health-trained correctional staff. The Responsible Physician, in cooperation with the Jail Chief Deputy, shall establish protocols for use by health-trained correctional staff during the medical screening. All completed medical screenings should be forwarded to the Responsible Physician. A review of any positive finding shall be performed by a qualified health care professional.

Regardless of training, no inmate should be allowed to conduct health care evaluations or provide treatment to any other inmate.

All inmates shall complete a medical screening as part of the intake process. If an arrestee refuses to cooperate with the medical screening, the screener will complete as much of the health assessment as reasonably possible and the arrestee will be closely observed until he/she cooperates with the remainder of the screening process.

The Responsible Physician should work cooperatively with the Jail Chief Deputy to develop the medical screening forms, which should be applicable for general health, mental health and suicide screening purposes. The form contains indicators, which trigger either a supervisor or medical review before acceptance of the prisoner from the arresting officer. If an indicator is triggered the screener shall contact the shift supervisor for direction. All medical screening forms shall be forwarded to the medical unit, and the qualified health care professionals shall be alerted to those that need priority attention.

### 721.3.1 MEDICAL SCREENING INQUIRY

The medical screening inquiry should include a review of the inmate's prior jail medical record, if any, and document the following:

- History of any infectious or communicable diseases considered serious in nature; current symptoms, treatment or medications; chronic illness or health issues, including communicable diseases or and any special health requirements and/or dietary needs
- Acute dental problems



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- 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)
- 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
- Other health issues as identified by the Responsible Physician

The medical screening shall also seek general information about the inmate's ability to pay for medical care, including insurance or other medical benefits or resources to which an inmate is entitled (RCW 70.48.130).

Qualified health care professionals should assist in developing specific mental health medical screening questions and should provide training in analyzing inmate responses. The Responsible Physician should establish the role of the qualified health care professional in the medical screening process.

Should the medical screening identify a need for a more comprehensive medical assessment of the inmate, a qualified health care professional should initiate appropriate follow-up action, which may include transporting the inmate to an off-site medical facility.

#### 721.3.2 MEDICAL SCREENING OBSERVATION

The staff member completing the medical screening shall document the following observations:

- (a) Appearance (e.g., sweating, tremors, anxious, disheveled)
- (b) Behavior (e.g., disorderly, appropriate, insensible)
- (c) State of consciousness (AVPU):
  - 1. Alert - spontaneously responsive
  - 2. Verbal - requires verbal stimulation to respond
  - 3. Pain - requires painful stimulation to respond
  - 4. Unresponsive - does not respond
- (d) Ease of movement (e.g., body deformities, gait)

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- (e) Breathing (e.g., persistent cough, hyperventilation)
- (f) Skin (e.g., lesions, jaundice, rashes, infestations, bruises, scars, recent tattoos, needle marks or other indications of drug abuse)
- (g) Any other observable health symptoms

The Jail Chief Deputy and the Responsible Physician should develop a procedure through which it can be reliably determined what prescription medications the inmate is taking and the medical urgency for continuing those medications without interruption.

#### **721.3.3 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
- Guidance regarding activity limitations and work assignment
- The inmate's responses to questions asked by the interviewer
- Other individualized observations and recommendations

The initial medical screening should become part of the inmate's medical record and should be retained in accordance with established records retention schedules.

#### **721.4 MEDICAL SCREENING DISPOSITIONS**

Persons who are brought to the facility who are obviously in need of immediate medical or mental health attention shall be referred to a medical facility or a Mental Health Professional (MHP) for Mental Health Evaluation (MHE) Conditions that require an evaluation include, but are not limited to, the following:

- Unconsciousness
- Uncontrolled bleeding
- Dog bites from non law enforcement dogs which have broken the skin.
- Open, oozing sores or signs of significant infection.
- Broken bones.
- Intoxication to a degree the individual cannot speak coherently or stand or walk unaided
- Recent drug overdose
- Suspected or known complications of pregnancy
- Active seizures
- Use of opiats while pregnant.

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- Active tuberculosis or other serious contagious diseases.
- Actively suicidal
- Showing acute mental health symptoms, which lead the evaluator to suspect the inmate to be an imminent threat to self or others or be gravely disabled. Gravely disabled means not being in control of one's behaviors due to mental health problems.
- Any other medical condition, which, in the opinion of the booking personnel, should be urgently referred for evaluation by medically trained personnel.

Individuals arrested for Class A and B crimes against persons or crimes meeting mandatory arrest criteria shall not be turned away for Mental Health evaluations. If an arrestee is booked on one of these crimes and appears to meet the mental health criteria above, jail staff shall initiate internal protocols for Designated Mental Health Professional (DMHP) response.

Inmates with these conditions are not suitable for admission to the facility until evaluated by a qualified health care professional or for mental illness, a MHP. This office requires evaluation from an outside entity when such inmates are identified.

Medical and mental health evaluation documentation shall include the diagnosis, treatment received, any medications prescribed, any ongoing requirements and any follow-up, care which may be indicated before the arrestee is accepted for booking.

The Jail Chief Deputy is responsible for notifying local police agencies, mental health, and medical facilities of the jail admission refusal policy and the required clearance documentation.

Based upon the information obtained during the screening process, the classification disposition of the inmate shall be one of the following:

- General population, or other appropriate cell assignment
- General population, or other appropriate cell assignment and timely referral to appropriate health care services
- Immediate referral to health care services prior to housing

#### **721.5 HEALTH APPRAISAL**

Generally, a comprehensive health appraisal should occur within 14 days of booking (see the Health Appraisal Policy). However, when it is appropriate and based on an inmate's health condition, an early health appraisal should be recommended. An inmate may also be cleared for housing in general population with a prompt referral to the appropriate health care services when it is in accordance with the inmate's overall classification. Upon the identification of a mentally disordered inmate, a physician's opinion will be secured within 24 hours, or next sick call, whichever is earliest.

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## Mental Health Services

### 723.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure inmates have access to mental health services and inmates identified as needing these services are referred appropriately.

#### 723.1.1 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.

### 723.2 POLICY

It is the policy of this office to provide a range of mental health services available for any inmate who requires them.

### 723.3 MENTAL HEALTH SERVICES

The Jail Chief Deputy should collaborate with the local public and private organizations that offer mental health services, treatment and care to those inmates in need of such services.

Such services may include:

- Assistance with mental health screening, diagnosis and care, including intake screening.
- Referral to services for the detection, diagnosis and treatment of mental illness and follow-up care after release from custody.
- Crisis intervention and the management of psychiatric episodes.
- Stabilization of the mentally ill and the prevention of psychiatric deterioration in the correctional setting.
- Psychotropic medication management and psychotherapy.
- Suicide prevention.
- Segregation rounds by qualified health care professionals.
- Treatment of severe adjustment disorders.
- Referral, transportation and admission to licensed mental health facilities for inmates whose psychiatric needs exceed the treatment or housing capability of the facility.
- Obtaining and documenting informed consent.
- Release planning services.

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##### **723.4 BASIC MENTAL HEALTH SERVICES**

Inmates may be referred to qualified health care professionals through a variety of methods, which include the medical screening process, the mental health appraisal process and self-referral or staff referral. Qualified health care professionals should respond to all referrals in a timely manner and initiate the appropriate treatment services.

- (a) If the inmate has received previous mental health treatment, the inmate should be asked to complete a release of information form so his/her treatment records can be obtained.
- (b) Inmates who have been determined to be in need of ongoing mental health services after their release from this facility should be provided with information about community mental health treatment resources. Arrangements for more comprehensive mental health care may be made, if appropriate.
- (c) Inmates who are identified as being developmentally disabled should be evaluated for special housing needs. The qualified health care professional should work in cooperation with classification personnel to establish the best reasonably available housing option.
- (d) Inmates who are suspected or known to be developmentally disabled should receive a mental health appraisal by the qualified health care professional or health-trained corrections deputies as soon as reasonably practicable but no later than 24 hours after booking. Inmates who are developmentally disabled should be referred, where appropriate and available, for placement in non-correctional facilities or in units specifically designated for housing the developmentally disabled.
- (e) Inmates enrolled in mental health treatment, including psychiatric medication management, should be provided information regarding the risks and benefits to treatment. Informed consent documents should be signed by the inmate to establish his/her consent to treatment. The signed forms should be placed in the inmate's health record and retained in accordance with established records retention schedules.
- (f) A treatment plan should be established for all inmates enrolled in mental health services.
  - 1. Psychiatric and special needs treatment plans shall be reviewed every 180 days, at a minimum. Inmates taking psychotropic medication should be seen by a psychiatrist at least every 90 days. Inmates classified as requiring mental health special needs should be seen at least monthly by a qualified health care professional.
  - 2. Inmates enrolled in other ongoing forms of mental health treatment should have treatment plan updates completed every six months, at a minimum.
  - 3. Inmates who present to the qualified health care professional as having notable difficulty adjusting to the correctional environment, but who are not diagnosed

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with a serious mental illness, should be evaluated for the appropriateness of mental health treatment. Consideration should be given to the qualified health care professional and the facility staff working together to address the issues that may be affecting the inmate's ability to adjust to incarceration.

- (g) The qualified health care professional should utilize a site-specific suicide prevention program to ensure the safety of inmates who present with a risk of self-harm.
  - 1. Qualified health care professionals should be assigned to daily rounds in the segregation unit to determine the mental health status of inmates housed there.
  - 2. Segregated inmates may be referred by the jail staff to qualified health care professionals for follow-up if concerns arise regarding their ability to function in disciplinary detention.
- (h) If the qualified health care professional has concerns about the level of mental health services that are required to manage an inmate housed in the facility, the health authority shall be notified and the Responsible Physician shall be the decision-maker regarding the health care needs of the inmate.
  - 1. The Responsible Physician may consult with a psychiatrist, specialist or other health care service in determining whether the inmate should be transferred to a facility that is better equipped to handle the inmate's psychiatric needs.
  - 2. The Responsible Physician should notify the Jail Chief Deputy of the request to transfer the inmate for medical treatment.
  - 3. The case review and disposition of the patient should be documented in the inmate's health record and retained in accordance with established records retention schedules.

Inmates determined to be in need of substance abuse treatment services should be informed of the facility programs available and shall be provided information about community substance abuse treatment resources.

#### **723.5 COMPETENCY EVALUATIONS AND RESTORATION SERVICES**

The Jail Chief Deputy shall ensure competency evaluators have reasonable, timely, and appropriate access to inmates for the purpose of performing their evaluations (RCW 10.77.078).

If an offer of admission for competency evaluation or restoration services is received for an inmate, the Jail Chief Deputy shall ensure the inmate is transported to a facility designated by the Washington Department of Social and Health Services within one day of receipt (RCW 10.77.078).

#### **723.6 FORENSIC NAVIGATOR FOR COMPETENCY EVALUATIONS**

When a court-appointed forensic navigator requests access to an inmate referred for a competency evaluation, the Jail Chief Deputy shall provide access within 24 hours of the request. The Jail Chief Deputy shall also provide relevant information relating to the inmate within 72 hours of a request for records (RCW 10.77.074; WAC 388-875-0200; WAC 388-875-0210).

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##### **723.7 CLINICAL INTERVENTION SPECIALISTS**

The Jail Chief Deputy or the authorized designee shall allow clinical intervention specialists access to inmates, and those inmates' health and conduct records, who have been referred for competency evaluation or restoration services by the Department of Social and Health Services (Chap. 453, § 17, 2023 Laws).

# Mental Health Screening and Evaluation

## 725.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the process by which all inmates receive an initial mental health screening by qualified mental health staff or health-trained custody staff using an instrument developed by qualified health care professionals. The initial mental health screening takes place at the time of booking, and is for the safety of the inmate and the general population. It helps the custody staff to make appropriate classification and housing decisions and to ensure that the treatment and intervention needs of the inmate are met.

## 725.2 POLICY

It is the policy of this office that all individuals booked into the facility shall receive an initial mental health screening by a qualified mental health professional, qualified mental health staff or health-trained custody staff. A more comprehensive medical appraisal shall be conducted within the first 14 days of incarceration to confirm the initial findings and to ensure that, if needed, an appropriate treatment plan that meets the individual needs of the inmate is in place.

## 725.3 MENTAL HEALTH SCREENING

The initial screening is designed to identify whether mental health conditions exist that require immediate or ongoing intervention. The screening shall be performed prior to the inmate being placed in general housing and should include:

- (a) Inquiry into whether the inmate is or has:
  - 1. Thoughts or history of suicidal behavior.
  - 2. Been prescribed or is taking any psychotropic medication or antidepressants.
  - 3. Being treated for mental health issues.
  - 4. A history of psychiatric treatment.
  - 5. A history of substance abuse or been treated for substance abuse.
- (b) Any observation of:
  - 1. Appearance and behavior.
  - 2. Abuse, injury or trauma.
  - 3. Symptoms of aggression, depression or 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 medical screening form. It will become part of the inmate's health record and be retained in accordance with established records retention schedules.

#### **725.4 MENTAL HEALTH APPRAISAL**

All new inmates shall receive a mental health appraisal by a qualified mental health professional within 14 days, unless documentation exists that an appraisal has been completed within the previous 90 days. Mental health appraisals should include, but not necessarily be limited to the following assessments:

- Mental health status
- Suicide potentia
- 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)

Following the appraisal, the qualified mental health professional shall develop a treatment plan for the inmate and make recommendations regarding the inmate's housing, job assignment and program participation.

#### **725.5 MENTAL HEALTH REFERRALS**

Qualified mental health staff should administer a complete and thorough evaluation of inmates referred for treatment as soon as practicable, but no later than 14 days from the referral. The evaluation should include:

- Review of the inmate's screening and appraisal information.
- Observations of the inmate's behavior.
- Information gathered from interviews and testing to determine the inmate's mental health condition, intellect, personality, problems and ability to deal with a custody environment.
- Collection of the inmate's mental health history.

Following the evaluation, a plan of treatment and maintenance, which may include a complete psychological evaluation, should be developed to meet the inmate's needs.

## Special Needs Medical Treatment

### 727.1 PURPOSE AND SCOPE

This purpose of this policy is the proper treatment and management of inmates with chronic diseases and special needs. This is accomplished by utilizing nationally recognized, generally accepted clinical guidelines and establishing communication between qualified health care professionals and custody personnel.

#### 727.1.1 DEFINITIONS

Definitions related to this policy include:

**Chronic disease** - An illness or condition that affects an individual's well-being for an extended interval, usually at least six months, and generally is not curable but can be managed for optimum functioning within any limitations the condition creates in the individual.

**Chronic disease program** - The inmate has regular clinic visits during which a qualified health care professional monitors the medical condition and adjusts treatment as necessary. The program also includes patient education for symptom management.

### 727.2 POLICY

It is the policy of this office that all individuals identified as having chronic diseases or special needs are enrolled in a chronic disease program to decrease the frequency and severity of the symptoms, prevent disease progression and complication, and foster improved function.

When a qualified health care professional recognizes that an inmate requires accommodation due to a special need, custody personnel should be notified in writing. Consultation between the qualified health care professional and custody personnel should occur regarding the condition and capabilities of inmates with known special needs prior to a housing, work or program assignment, transfer to another facility or the imposition of disciplinary action.

Qualified health care professionals shall furnish special needs information regarding inmates to custody personnel in order for them to accurately classify and house inmates in the facility. It is the responsibility of the Jail Chief Deputy or the authorized designee to ensure that inmates with special needs are receiving the proper care and that their needs are effectively communicated to custody staff for appropriate accommodation.

### 727.3 CLINICAL PRACTICE GUIDELINES

The Responsible Physician or the authorized designee is responsible for establishing and annually reviewing clinical protocols to ensure consistency with the National Clinical Practice Guidelines.

The clinical protocols for the management of chronic disease and special needs include, but are not limited to:

- Asthma
- Communicable diseases

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- Developmentally disabled inmates
- Diabetes
- Dialysis
- Frail or elderly inmates
- High blood cholesterol
- HIV
- Hypertension
- Mental illness
- Mobility impairments
- Pregnancy
- Seizure disorder
- Suicidal ideation
- Terminally ill
- Tuberculosis

#### **727.4 DOCUMENTATION**

Documentation in an inmate's medical record should include information regarding the chronic disease protocols deployed, who is 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 custody environment and medication.
- Clinical justification of any deviation from the established protocol.

A master list of all chronic disease and special needs patients should be maintained by the Responsible Physician or the authorized designee.

#### **727.5 CHRONIC CARE PROGRAM**

- (a) Newly incarcerated inmates shall receive a medical screening. This screening includes the documentation of any acute or chronic health problems or injuries, special needs, and any medications or treatments the inmate is currently receiving.
  1. If the inmate has been incarcerated previously, his/her health records should be reviewed.

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2. A special needs communication form should be completed and sent to the classification unit, the Shift Supervisor and the housing officer to ensure the inmate is properly housed.
  3. Current medications being taken by the inmate should be verified and continued as deemed appropriate by the Responsible Physician.
  4. A health assessment shall be completed within 14 days of incarceration and a physical examination conducted within six months of incarceration.
  5. The status of a special needs inmate should be evaluated, at minimum, every 90 days to determine the need for the continued designation.
- (b) The Jail Chief Deputy or the authorized designee and the Responsible Physician or the authorized designee should consult with one another prior to taking action regarding any special needs inmate with regard to housing, program or work assignments, disciplinary measures or transfers to other facilities.
1. When immediate action is required and prior consultation is not reasonably practicable, that consultation should occur as soon as practicable but no later than 72 hours post-action.
- (c) Individual treatment plans are used to guide treatment for episodes of illness. The format for treatment planning may vary, but should include, at a minimum:
1. The frequency of follow-up for medical evaluation and adjustment of treatment modality.
  2. The type and frequency of diagnostic testing and therapeutic regimens.
  3. When appropriate, instructions about diet, exercise, adaptation to the correctional environment and medication.
- (d) Reasonable effort should be made to obtain health information and records from previous health care services, with the consent of the inmate, when the inmate has a medical problem that was being treated prior to incarceration.
- (e) Upon transfer to another correctional facility, a summary of the inmate's current condition, medications and treatment plan will be forwarded to the receiving facility in a sealed envelope to maintain inmate privacy.
- (f) Requests for health information from community health care services must be submitted with the inmate's written consent. If the inmate does not consent, the community health care service may be advised that the person is an inmate and the health information may not be provided without the inmate's written consent.
- (g) When inmates are sent out of this facility for emergency or specialty treatment, written information regarding the inmate's current medical status and treatment should accompany the inmate. Upon return to the facility, treatment recommendations from

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outside health care services should be reviewed by the Responsible Physician or the authorized designee for any changes in the custodial environment or in-house treatment plan.

- (h) Inmates identified as developmentally disabled shall be considered for discharge planning services.
  - 1. The local center for the developmentally disabled will be contacted within 24 hours of incarceration of an inmate suspected to be developmentally disabled.
  - 2. Referrals will be made to the jail's discharge planning specialist. If no such position exists, the need for transition planning should be noted on the treatment plan.
- (i) With the inmate's written consent, the health services staff should:
  - 1. Share necessary information with outside health care services.
  - 2. Arrange for follow-up appointments.
  - 3. Arrange for transfer of health summaries and relevant parts of the health record to health care services or others assisting in planning or providing for services upon release.
- (j) Contacts with community providers should be documented via an administrative note in the patient's health record.
- (k) Patients with serious mental health issues, including those receiving psychotropic medication, will be informed about community options for continuing treatment and provided with follow-up appointments when possible.
- (l) Medications should be provided as appropriate.
- (m) The Responsible Physician is responsible for ensuring that local site-specific procedures facilitate discharge planning.

# Communicable Diseases

## 729.1 PURPOSE AND SCOPE

This policy is intended to provide guidelines for facility staff to assist in minimizing the risk of contracting and/or spreading communicable diseases. The policy offers direction in achieving the following goals:

- (a) Managing the risks associated with bloodborne pathogens (BBP), aerosol transmissible diseases (ATD) and other potentially infectious substances.
- (b) Providing appropriate treatment for ill inmates while minimizing the risk of the spread of disease.
- (c) Making decisions concerning the selection, use, maintenance, limitations, storage and disposal of personal protective equipment (PPE).
- (d) Ensuring proper reporting to local, state and federal agencies.
- (e) Establishing procedures for the identification, education, immunization, prevention, surveillance, diagnosis, medical isolation (when indicated), treatment and follow-up care for new inmates, and for inmates or employees who have contracted a communicable disease from an ill inmate.
- (f) Providing appropriate treatment, counseling and confidentiality should an employee become exposed to a communicable disease.
- (g) Protecting the privacy rights of all personnel who may be exposed to or contract a communicable disease during the course of their duties.

### 729.1.1 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 have 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** - These include the use of an Airborne Infection Isolation Room (AIIR) that meets the American Institute of Architects/Facility Guidelines Institute (AIA/FGI) standards for

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AIIRs, for infectious agents such as measles, chickenpox, and 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 eyes, mouth, other mucous membranes, non-intact skin, needle sticks, human bites, cuts, abrasions, or any contact with blood or bodily fluids that is synonymous with BBP 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 inmates receiving care, regardless of diagnosis or presumed infection status.

**Universal precautions** - A set of precautions designed to prevent transmission of HIV, HBV, and other BBP when providing first aid or health care.

### **729.2 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.

##### 729.2.1 EXPOSURE CONTROL OFFICER

The Jail Chief Deputy shall designate an Exposure Control Officer (ECO) who shall be responsible for:

- (a) Establishing written procedures and a training program related to BBPs.
- (b) Establishing written procedures and a training program related to ATDs.
- (c) Working with the Jail Chief Deputy to develop and administer any additional related policies and practices necessary to support the effective implementation of an Exposure Control Plan.
- (d) Acting as a liaison during OSHA inspections and conducting program audits to maintain a current Exposure Control Plan.
- (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 Exposure Control Plan annually, on or before January 1 of each year.

Supervisors are responsible for exposure control in their respective areas. They shall work directly with the ECO and the affected employees to ensure that the proper procedures are followed.

#### 729.3 COMMUNICABLE DISEASE PROGRAM COMPONENTS

##### 729.3.1 SURVEILLANCE

Surveillance takes place throughout the period of the inmate's incarceration and is done in a variety of encounters and inspections. These should include, but are not limited to, the following:

- (a) **Medical screening** - Each newly booked inmate should be evaluated for health care needs and signs and symptoms of infectious disease. The receiving screening includes questions regarding known symptoms of TB, HIV, sexually transmitted diseases (STDs) and HBV. The individual completing the medical screening should observe the inmate for obvious signs of infection.
- (b) **Health assessment** - Inmates should have a health assessment within the first 14 days of incarceration. The health assessment process includes screening for symptoms of communicable disease. Inmates will have a Purified Protein Derivative (PPD) test or a chest X-ray for TB and a blood test for STDs. Voluntary HIV testing is provided based on identified risk.
- (c) **Periodic health assessments** - Annual testing for TB should be performed on all inmates who are in the facility for one year or more.



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- (d) **Sick call and referrals** - At any time during incarceration an inmate may request to be evaluated for an infectious disease through the sick call process. Health and correctional staff can request that an inmate be evaluated if they notice any signs of potentially infectious disease.
- (e) **Contact investigation** - When an inmate housed in the general population develops symptoms of an infectious disease, the Responsible Physician should work cooperatively with the Jail Chief Deputy 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 should be inspected by the local public health entity and reported to the Jail Chief Deputy at least quarterly in a written report. Conditions identified as adversely affecting the health and safety of the inmates and/or employees or visitors should be promptly addressed and corrected.

#### 729.3.2 IDENTIFICATION

Any inmate suspected of having a communicable disease will be evaluated by a qualified health care professional as soon as reasonably practicable. Inmates suspected of having communicable diseases will be appropriately isolated until disease confirmation and the period of communicability is determined. Long-term housing consideration will be based on the classification status as well as the behavior, medical needs and safety of inmates and staff. These inmates should 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.

#### 729.3.3 TREATMENT

Qualified health care professionals shall provide care as directed by the Responsible Physician.

- (a) The Responsible Physician and the Jail Chief Deputy should collaborate on treatment planning with the public health department, as appropriate.
- (b) Complete documentation of the signs, symptoms, diagnostic results, treatment and outcome of care provided to inmates who are suspected or confirmed as having a communicable disease should be entered into the inmate's health record.

#### 729.3.4 COMMUNICATION

The Responsible Physician should ensure the following notifications are made whenever a communicable disease is identified:

- (a) Notification to the public health authority of all reportable diseases and conditions should 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.

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- (b) The Responsible Physician and the Jail Chief Deputy should be kept informed of any incidence of communicable disease.
- (c) The Jail Chief Deputy should be apprised of any medical situation that raises the risk of disease level for inmates, correctional officers or any other staff members.

#### 729.3.5 EMPLOYEE TRAINING

The Responsible Physician or the authorized designee shall provide education to all correctional staff who have contact with infected inmates during the initial employee orientation and annually thereafter. The Training Supervisor shall schedule this training and shall retain all associated records in accordance with established records retention schedules.

#### 729.3.6 DATA COLLECTION AND REPORTING

The health authority should 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 should be reported as required.

#### 729.3.7 STANDARD PRECAUTIONS

Standard precautions should be used by health care professionals to minimize the risk of exposure to blood and bodily fluids of infected patients. The Responsible Physician shall be responsible for establishing basic guidelines including, but not limited to:

- Washing hands or using hand sanitizer before and after all patient or specimen contact.
- Handling all blood and bodily fluids such as saliva, urine, semen and vaginal secretions as if they are known to be infectious. Where it is not possible to distinguish between fluid types, all bodily 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 bodily 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.

#### 729.3.8 TRANSMISSION-BASED PRECAUTIONS

Transmission-based precautions may be needed in addition to universal precautions for selected patients who are known or suspected to harbor certain infections. These precautions are divided into three categories that reflect the differences in the way infections are transmitted. Some diseases may require more than one category (RCW 70.48.480).

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- (a) Airborne precautions are designed to prevent the spread of ATDs, which are transmitted by minute particles called droplet nuclei or contaminated dust particles. These particles, because of their size, can remain suspended in the air for long periods of time, even after the infected person has left the room. Some examples of diseases requiring airborne precautions are TB, measles and chicken pox.
1. An inmate requiring airborne precautions should be assigned to a designated respiratory isolation room with special ventilation requirements. The door to this room must be closed at all possible times. If an inmate must move from the isolation room to another area of the facility, the inmate should wear a mask during transport. Anyone entering the isolation room to provide care to the inmate must wear a respirator.
- (b) Droplet precautions are designed to prevent the spread of organisms that travel on particles much larger than the droplet nuclei. These particles do not spend much time suspended in the air, and usually do not travel beyond a few feet of the inmate. These particles are produced when an inmate coughs, talks or sneezes. Examples of disease requiring droplet precautions are meningococcal meningitis, influenza, mumps and German measles (rubella).
1. All staff should wear masks within 3 feet of the inmate. Inmate movement should be restricted to the minimum necessary for effective facility operations. The inmate should wear a mask during transport.
- (c) Contact precautions are designed to prevent the spread of organisms from an infected inmate through direct (touching the inmate) or indirect (touching surfaces or objects the inmate touched) contact. Examples of inmates who might be placed in contact precautions are those infected with the following:
1. Antibiotic-resistant bacteria
  2. Hepatitis A
  3. Scabies
  4. Impetigo
  5. Lice

The following guide shall be used to determine the appropriate precautions that are necessary to reduce the risk of infection transmission while inmates are being transported. Inmates shall receive training on the disease transmission process and will be provided with appropriate barrier devices.

#### Precautions for inmate contact and transportation

	GLOVES	SURGICAL MASKS	N95 MASKS	ISOLATION GOWNS
Contact				
Inmate	No	No	No	No

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Personnel	Yes	No	No	Yes
<b>Droplet</b>				
Inmate	No	Yes	No	No
Personnel	No	Yes	No	Yes
<b>Airborne</b>				
Inmate	No	Yes	No	No
Personnel	No	No	Yes	No

#### 729.3.9 ENVIRONMENTAL HEALTH AND SAFETY

The Responsible Physician or the authorized designee shall conduct a monthly inspection of areas where health services are provided to verify the following:

- The equipment is inspected and maintained to the manufacturer's recommendations.
- The area is clean and sanitary.
- The appropriate measures are being taken to ensure the unit is occupationally and environmentally safe.

#### 729.3.10 REGULATED WASTE

The Jail Chief Deputy or the authorized designee, in coordination with the Responsible Physician, will provide for the management of biohazardous materials and waste and the establishment of a protocol for the decontamination of equipment used in medical and dental treatment. Medical and dental equipment decontamination shall comply with all applicable local, state and federal regulations. Precautions may include, but are not limited to:

- (a) Discarding biohazardous waste in red plastic bags marked with the word BIOHAZARD and displaying the international symbol for biohazardous material. Contaminated disposable PPE shall be discarded in these receptacles.
- (b) Whenever a large amount of fluid blood is present, an absorbent powder should be used to gelatinize the fluid, which should assist in clean up. Standard precautions shall be used when removing the product that should then be placed in a red biohazard bag.
- (c) Used biohazard bags shall be stored in covered, rigid waste receptacles in designated locations pending weekly removal by a biohazard waste removal contractor.
- (d) Records documenting biohazardous waste removal, spore count logs and cleaning logs shall be retained in accordance with established records retention schedules.

#### 729.4 ECTOPARASITE CONTROL

Ectoparasite control will be initiated, where clinically indicated, immediately following the medical screening or when the inmate manifests signs and symptoms of lice or scabies.

- (a) Any inmate who indicates parasitical infection upon entering the facility shall be treated by a qualified health care professional.

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- (b) Any inmate suspected of having lice/scabies may be referred to sick call by a corrections deputy.
- (c) An inmate may access sick call if he/she believes there is a problem with lice/scabies.
- (d) A qualified health care professional shall evaluate any inmate with a lice/scabies complaint. If there are positive findings, the inmate shall be treated for the infestation accordingly.
  - 1. The lice and scabies treatment guidelines will be followed by the qualified health care professional if a physician's order for administering medication is obtained.
    - (a) The prescribing physician shall be notified if the inmate is pregnant, as certain medications are contraindicated for pregnant women. An alternative topical application must be prescribed in these situations.
    - (b) Documentation in the medical record should include the patient's symptoms, observations regarding the condition, patient education and prescribed treatment.
  - 2. The inmate's clothing and linen shall be removed from his/her cell, placed in a plastic bag and sent to the laundry. These items are considered contaminated and must be disinfected by:
    - (a) Machine washing (hot cycle), machine drying (hot cycle), dry cleaning or ironing, or
    - (b) Storage in a plastic bag for non-washable items for 10-14 days (head lice), seven days (pubic lice). This method is not recommended for body lice.
    - (c) Isolation is not necessary as long as clothing and bedding are properly disinfected and inmates do not share items.
      - 1. An inmate having poor hygiene should be housed in a single cell until 24 hours after beginning treatment.
      - 2. Gloves are to be used for direct contact until the inmate has been treated and the clothing/bedding have been removed for disinfecting.
  - 3. Cellmates, sexual partners and any personnel having direct hands-on contact with an infected inmate should be evaluated for prophylactic treatment because of the long incubation period of the scabies parasite.

#### **729.5 EMPLOYEE EXPOSURE CONTROL**

All facility staff that may come in contact with another person's blood or bodily fluids shall follow these procedures and guidelines. For the purposes of this policy, contact with blood or bodily fluids is synonymous with BBP exposure.

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All employees shall use the appropriate barrier precautions to prevent skin and mucous membrane exposure whenever contact with blood or bodily fluid is anticipated. Disposable gloves shall be worn, if reasonably possible, before making physical contact with any inmate and when handling the personal belongings of an inmate.

Should gloves come in contact with blood or other bodily fluids, the gloves shall be disposed of as contaminated waste. Care should be taken to avoid touching other items (e.g., pens, books or other personal items) 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.

#### 729.5.1 IMMUNIZATIONS

All facility staff members who may be exposed to, or have contact with, a communicable disease shall be offered appropriate treatment immunization. The ability of staff to provide health care services is predicated on a safe and secure working environment where employees feel safe to do their work, and assures public safety.

Staff shall also receive a TB test prior to job assignment and voluntary annual testing thereafter, at no cost to the employee.

The HBV immunization shall be available to all employees who have direct inmate contact and who test negative for HBV antibodies. The immunization is voluntary and provided at no cost to the employee. Employees who decline the offer of immunization and/or test shall be required to sign a waiver. Employees receiving immunization and testing shall be required to sign a consent form. Employees may reverse their decision to decline at any time by signing a consent form.

#### 729.5.2 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.

#### 729.5.3 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.

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If an employee's intact skin contacts someone else's blood or bodily fluids or other potentially infectious materials, the employee shall immediately wash the exposed part of his/her body with soap and warm water and/or an approved disinfectant as soon as possible. If the skin becomes grossly contaminated, body washing shall be followed by an approved hospital strength disinfectant. If large areas of the employee's skin are contaminated, the employee shall shower as soon as reasonably possible, using warm water and soap and/or an approved disinfectant. Medical treatment should be obtained.

Contaminated non-intact skin (e.g., injured skin, open wound) shall be cleaned using an approved disinfectant and then dressed or bandaged as required. Medical treatment is required. All hand, skin and mucous-membrane washing that takes place shall be done in the designated cleaning or decontamination area. Cleaning shall not be done in the kitchen, bathrooms or other locations not designated as a cleaning or decontamination area.

#### **729.5.4 DECONTAMINATION OF CLOTHING**

Contaminated clothing such as uniforms and undergarments shall be removed as soon as reasonably feasible and rinsed in cold water to prevent the setting of bloodstains. If the clothing may be washed in soap and hot water, do so as soon as reasonably possible.

If the clothing must be dry-cleaned, place it into a biohazard waste bag and give it to the ECO. The ECO will secure a dry cleaner that is capable of cleaning contaminated clothing, and shall inform the dry cleaner of the potential contamination. The cost of dry cleaning shall be paid according to labor contract agreements.

Contaminated leather boots shall be brushed and scrubbed with detergent and hot water. If the contaminant soaked through the boot, the boot shall be discarded and replaced. The cost of replacement shall be paid according to labor contract agreements.

#### **729.5.5 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.

#### **729.6 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 bodily 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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##### **729.7 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.

###### **729.7.1 EMPLOYEE RESPONSIBILITY TO REPORT EXPOSURE**

To provide appropriate and timely treatment should exposure occur, all employees should 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 should 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.

###### **729.7.2 SUPERVISOR REPORTING REQUIREMENTS**

The supervisor on-duty shall investigate every exposure that occurs as soon as reasonably 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.

###### **729.7.3 MEDICAL CONSULTATION, EVALUATION AND TREATMENT**

Any employee who was exposed or who suspects he/she was exposed to HIV or to hepatitis B or C should be seen by a physician or qualified health care professional as soon as reasonably possible.



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The doctor or qualified health care professional should be given the supervisor's report and the employee's medical records relevant to the visit and examination. The blood of the exposed employee shall be tested.

The qualified health care professional will provide the ECO and/or the Office's risk manager with a written opinion/evaluation of the exposed employee's medical condition. This opinion should only contain the following information:

- If a post-exposure treatment is indicated for the employee
- If the employee received a post-exposure treatment
- Confirmation that the employee received the evaluation results
- Confirmation that the employee was informed of any medical condition that could result from the exposure incident and whether further treatment or evaluation will be required
- Whether communicable disease testing from the source is warranted, and if so, which diseases the testing should include

All other findings or diagnosis shall remain confidential and are not to be included in the written report.

#### 729.7.4 COUNSELING

The Office shall provide the exposed employee (and his/her family if necessary) the opportunity for counseling and consultation.

#### 729.7.5 CONFIDENTIALITY OF REPORTS

Most of the information involved in this process must remain confidential. The ECO shall ensure that all records and reports are kept in the strictest confidence. The ECO shall be responsible for maintaining records containing the employee's treatment status and the results of examinations, medical testing and follow-up procedures.

The Office's risk manager shall be responsible for keeping the name and Social Security number of the employee and copies of any information provided to the consulting health care professional on file.

This information is confidential and should 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 should be kept confidential as well.

#### 729.7.6 SOURCE TESTING

Testing a person for communicable diseases when that person was the source of an exposure should be done when it is desired by the exposed member, or when it is otherwise appropriate. Source testing is the responsibility of the ECO. If the ECO is unavailable to seek timely testing of the source, it is the responsibility of the Jail Chief Deputy to ensure testing is sought.

Source testing may be achieved by:

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- (a) Obtaining consent from the individual.
- (b) Filing a request with a state or local health officer to order bloodborne pathogen testing when an employee is exposed to the bodily fluids of an arrestee (RCW 70.24.340; WAC 246-100-206).
- (c) Receiving an order from the Jail Chief Deputy for bloodborne pathogen testing for a detainee at the jail (RCW 70.24.360; WAC 246-100-206).

Since there is the potential for overlap between the different manners in which source testing may occur, the ECO is responsible for coordinating the testing to prevent unnecessary or duplicate testing.

The ECO should seek the consent of the individual for testing and consult the Prosecutor to discuss other options when no statute exists for compelling the source of an exposure to undergo testing if the individual refuses.

## Aids to Impairment

### 731.1 PURPOSE AND SCOPE

This policy acknowledges the high priority of inmate health and recognizes that some inmates will require adaptive devices to assist them with daily living activities on a temporary or permanent basis.

The Mason County Sheriff's Office has established this policy for physicians and dentists to review and evaluate the need for adaptive devices, while considering facility security concerns regarding the use of such items.

When a physician or dentist determines that the medical condition of an inmate indicates that an adaptive device is clinically appropriate, the parameters of this policy will determine if authorization for the use of such items during incarceration should be granted, and if any equipment modifications are indicated for safety or security purposes.

#### 731.1.1 DEFINITIONS

Definitions related to this policy include:

**Adaptive device** - Any orthotic, prosthetic or aid to impairment that is designed to assist an inmate with the activities of daily living or that is clinically appropriate for health, as determined by the Responsible Physician or dentist.

**Aids to impairment** - Includes, but is not limited to, eyeglasses, hearing aids, pacemakers, canes, crutches, walkers and wheelchairs.

**Orthoses** - Specialized mechanical devices, such as braces, shoe inserts or hand splints that are used to support or supplement weakened or abnormal joints, limbs and/or soft tissue.

**Prostheses** - Artificial devices designed and used to replace missing body parts, such as limbs, teeth or eyes.

### 731.2 POLICY

It is the policy of the Office that, in accordance with security and safety concerns, medical and dental orthoses or prostheses and other adaptive devices should be permitted or supplied in a timely manner when the health of the inmate would otherwise be adversely affected or when such devices are necessary to reasonably accommodate a disability recognized under the Americans with Disabilities Act (ADA) (42 USC § 12101 et seq.), as determined by the Responsible Physician or dentist.

### 731.3 FACILITY-OWNED MEDICAL EQUIPMENT

All adaptive devices belonging to the Office shall be marked and numbered, identifying them as office property.

- (a) A medical equipment inventory shall be completed by the intake corrections deputy for all medical equipment issued to the inmate, regardless of who owns the property.

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- (b) Upon the release of an inmate, the releasing corrections deputy shall review the medical equipment issued to the inmate and contact the medical clinic for instructions regarding any office-owned adaptive device.

#### **731.4 MEDICAL OR DENTAL ORTHOSES, PROSTHESES OR ADAPTIVE DEVICES**

Subject to safety and security concerns, inmates should be permitted to retain an orthopedic, orthodontic or prosthetic appliance if it is prescribed by or recommended and fitted by a physician or dentist. However, if the appliance presents a risk of bodily harm to any person, is a risk to the security of the facility or if it is not used for its intended purpose, it may be removed and stored with the inmate's property.

The appliance shall be returned to the inmate when the risk abates. The inmate may be counseled by the qualified health care professional regarding the necessity for the appliance. The removal of the appliance shall be reported to the supervisor and documented in the inmate's medical chart and behavior log. A jail incident report may be written at the direction of the supervisor.

Within 24 hours of any removal of a prosthetic, orthodontic or orthopedic appliance, the inmate shall be examined by a physician or dentist to determine whether the removal of the adaptive device may be injurious to the health or safety of the inmate. If it is determined that the adaptive device cannot be returned because of safety or security concerns, and as a result, the health or safety of the inmate is a concern, options include:

- (a) Reclassifying the inmate to another housing unit or administratively segregating the inmate from the general population.
- (b) With physician or dentist approval, modifying the adaptive device to meet the medical needs of the inmate and the safety and security needs of the facility.

Once an adaptive device has been approved for use, the qualified health care professional shall enter the authorization into the inmate's health file. If the inmate requires special housing, the qualified health care professional shall document this in writing and notify custody or classification personnel appropriately. The qualified health care professional shall document the general condition of the prostheses and have the inmate sign in the medical record that he/she received the prosthesis.

Any prostheses that are brought to the facility by family members or others after the inmate has been incarcerated shall be subject to a security check. The facility shall accept no responsibility for loss or damage to any adaptive device.

Inmates may be required to provide co-payments for adaptive devices supplied by the facility (RCW 70.48.130). Any repair or replacement of any adaptive device may be the responsibility of the inmate. If the adaptive device supplied or repaired is medically necessary and the inmate is indigent, funds for the repair should be sought through the Inmate Welfare Fund.

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##### **731.5 REQUESTS FOR MEDICAL AND DENTAL PROSTHESES**

All requests for new or replacement medical or dental prostheses shall be individually evaluated by the Responsible Physician or dentist and reviewed for approval by the Jail Chief Deputy. Considerations for approval shall be based upon the following:

- Medical needs of the inmate
- Anticipated length of incarceration
- Safety and security of the facility

# Detoxification and Withdrawal

## 733.1 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.

### 733.1.1 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.

## 733.2 POLICY

Withdrawal from alcohol or drugs can be a life-threatening medical condition requiring professional medical intervention. It is the policy of this office to provide proper medical care to inmates who suffer from drug or alcohol overdose or withdrawal.

To lessen the risk of a life-threatening medical emergency and to promote the safety and security of all persons in the facility, staff shall respond promptly to medical symptoms presented by inmates.

The Responsible Physician shall develop written medical protocols on detoxification symptoms necessitating immediate transfer of the inmate to a hospital or other medical facility, and procedures to follow if care within the facility should be undertaken.

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.

## 733.3 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 Supervisor, who shall ensure that a qualified health care professional is promptly notified.

#### **733.4 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.

#### **733.5 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.

#### **733.6 WITHDRAWAL AND DETOXIFICATION PROTOCOLS**

Protocols are available to the qualified health care professionals to guide the care and treatment of individuals who are intoxicated or experiencing drug and/or alcohol withdrawal. These protocols, which have been developed and approved by the Responsible Physician, fall within nationally accepted guidelines and are reviewed annually.

When dealing with inmates who are in a custody situation, qualified health care professionals shall utilize detoxification protocols in accordance with local, state and federal laws.

No direct supervision is required at the time of identifying and initiating care. Overall supervision is provided by the Responsible Physician. Qualified health care professionals shall evaluate and provide care to patients utilizing written procedures and/or physician orders.

#### **733.7 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 restlessness motor	Extreme restlessness and agitation with appearance of intense fear is common

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<b>APPETITE</b>	Impaired appetite	Marked anorexia	Often rejects all food and fluid except alcohol
<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>	Restless sleep or insomnia	Marked insomnia and nightmares	Total wakefulness
<b>SWEATING</b>	None or slight	Obvious	Extreme



# Administration of Psychotropic Medication

## 735.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines under which an inmate may be involuntarily administered psychotropic medications during a mental health emergency, to protect the safety of the inmate and others.

### 735.1.1 DEFINITIONS

Definitions related to this policy include:

**Mental health emergency** - Any emergency situation that requires an immediate response to an individual in psychiatric crisis, for the preservation of life or the prevention of serious bodily harm to the inmate, staff or others. It is not necessary for harm to take place or to become unavoidable prior to involuntary treatment being imposed.

**Psychotropic medication** - Any medication prescribed for the treatment of symptoms of psychoses and other mental and emotional disorders.

## 735.2 POLICY

It is the policy of this office that an inmate may be involuntarily given psychotropic medication on an emergency basis only when the inmate is found by a physician to be a danger to him/herself or others by reason of mental disorders.

## 735.3 MEDICATION IN AN EMERGENCY

Psychotropic medication shall not be administered to an inmate absent an emergency unless the inmate has given his/her informed consent or administration has been authorized under a court order (RCW 10.77.065).

Involuntary emergency administration of psychotropic medication shall occur only under the following conditions:

- The inmate has been afforded interventions, beginning with the least restrictive options, as approved by the Responsible Physician or psychiatrist.
- The administration and duration are authorized by a physician.
- A physician specifies the conditions under which the medication is to be administered.

The details of each condition must be documented in the inmate's medical record.

This policy limits the number of times that involuntary psychotropic medication may be administered to one dose only during the mental health emergency, as defined by a qualified health care professional. If the emergency is not resolved, the inmate shall be transferred from the jail to an appropriate facility that is designed to treat mental health emergencies.

Psychotropic medication shall not be administered for disciplinary reasons.

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##### 735.3.1 PROCEDURES

When it has been determined that an inmate's behavior might lead to death or injury to the inmate or others, and that a mental health emergency is imminent, the following procedures shall be followed:

- The inmate shall be subdued by custody personnel using tactics that provide the safest resolution for the inmate and the involved staff given the circumstances.
- The qualified health care professional shall evaluate the inmate for any injuries and mental status. If there are no qualified health care professional available, the inmate shall be transported to an appropriate facility that is designed to treat mental health emergencies as soon as reasonably practicable.
- The Responsible Physician shall be contacted for direction.
- If psychotropic medication is authorized by the Responsible Physician, the qualified health care professional will first attempt to gain inmate consent.
- If consent is not obtained, the medication shall be involuntarily administered in the safest manner possible.
- The inmate will be monitored for any adverse reactions and side effects twice every hour by custody personnel.
- A qualified health care professional shall check the inmate at 30-minute intervals for the first two hours.
- The inmate shall be evaluated by the Responsible Physician within 24 hours to determine continued treatment planning.
- If the emergency is not resolved with a single dose of medication, or if the inmate does not continue treatment on a voluntary basis, consideration should be given to the prompt transfer of the inmate to an appropriate facility that is designed to treat mental health emergencies.
- All clinical interaction with the inmate shall be fully documented in the inmate's medical record and shall include the date and time of treatment and the signature of the qualified health care professional.

##### 735.3.2 POST ADMINISTRATION CARE

Less restrictive treatment alternatives should be developed as soon as reasonably practicable.

## Clinical Decisions

### 738.1 PURPOSE AND SCOPE

This policy recognizes that a coordinated effort between the Responsible Physician and the Jail Chief Deputy 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.

#### 738.1.1 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.

### 738.2 POLICY

Clinical decisions and actions regarding inmate health care are the sole responsibility of qualified health care professionals and should not be countermanded by others. The Responsible Physician shall be responsible for arranging for appropriate health resources and for determining what services are needed. The Jail Chief Deputy or the authorized designee shall be responsible for providing the custodial support to ensure a safe and secure environment for delivery of services and accessibility to the inmates.

### 738.3 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.

### 738.4 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

### **740.1 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.

### **740.2 POLICY**

It is the policy of this office that a health-trained staff member shall be responsible for the delivery of health care services in the facility any time that qualified health care professionals are not available on-site.

### **740.3 TRAINING**

The Jail Chief Deputy, Training Supervisor and the Responsible Physician shall be jointly responsible for developing a training curriculum for the health-trained staff positions and for the delivery of that training, which shall include the following:

- 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.

### **740.4 UNREASONABLE BARRIERS**

No member of the Mason County Sheriff's Office correctional facility shall create unreasonable barriers that affect 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) Assessing excessive inmate medical fees that prevent or deter inmates from seeking care for their serious health needs.
- (c) Deterring inmates from seeking care for their serious health needs by scheduling sick call at unreasonable times.

# Licensure, Certification and Registration Requirements

## 742.1 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.

## 742.2 POLICY

It is the policy of this office that all qualified health care professionals who provide health care services to inmates possess the required licensure, certification or registration appropriate to their field of expertise. Job descriptions shall include minimum qualifications and specific duties and responsibilities, and shall be approved by the Responsible Physician.

The current credentials and job descriptions for all qualified health care professionals will be on file at the facility and retained in accordance with established records retention schedules.

Any health care provided to inmates at the facility that is not provided by a qualified health care professional is provided in accordance with a standing order or direct order issued by personnel who are qualified under governing laws to give such orders.

## 742.3 CREDENTIALING AND FILE MAINTENANCE

A completed file of current licenses, certifications, registration, reference checks and applications shall be maintained by the Office Administrative Department and by the Responsible Physician or the authorized designee at this facility.

- (a) The Responsible Physician or the authorized designee shall obtain confirmation of current licensure, certification and registration prior to making any offer of employment.
- (b) Inquiries into any sanctions or disciplinary actions of state boards, employers and the U.S. Department of Health and Human Services' National Practitioner Data Bank should be conducted prior to making any offer of employment.
- (c) Individuals should be required to pass a job related pre-employment background investigation. Employment references may be obtained via mail or over the phone with documentation.
- (d) Each employee should be held responsible for providing renewal verification of licenses, certificates and registration prior to the expiration date.
- (e) Any group or individual providing health care services must complete the credentialing process that is appropriate for their profession and must provide the facility a copy of current licensure and, when appropriate, a Drug Enforcement Administration (DEA) certificate to prescribe controlled substances.

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- (f) To be eligible for hire, all qualified health care professionals must possess and maintain a current CPR certification and provide documentation to the Responsible Physician or the authorized designee.

#### **742.4 STUDENTS AND/OR INTERNS**

If the health care services provided to an inmate are performed by an intern, resident or student who is authorized to provide specific health care services as part of a formal medical training program, the individual 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 that are considered contraband and inmate culture.

All interns, residents or students shall be required to agree in writing to abide by all facility policies, including those relating to hostages, facility security and the confidentiality of information.

All training provided, written agreements and/or contracts shall be maintained in the intern, resident or student's file by the Responsible Physician or the authorized designee in accordance with established records retention schedules.

# Suicide Prevention and Intervention

## 745.1 PURPOSE AND SCOPE

This policy establishes the suicide prevention and intervention to identify, monitor and, when necessary, provide for emergency response and treatment of inmates who present a suicide risk while incarcerated at the office detention facilities.

This policy is intended to reduce the risk of self-inflicted injury or death by providing tools to the staff allowing a timely and organized emergency response to suicide, suicide attempts or an inmate's unspoken indication suicide is being considered. The three key components of this plan are evaluation, training and screening with intervention.

## 745.2 POLICY

It is the policy of this office to minimize the incidence of suicide by establishing and maintaining a comprehensive suicide prevention and intervention program designed to identify inmates who are at risk of suicide and to intervene appropriately whenever possible. The program shall be developed and approved by the local Mental Health provider and reviewed annually by the Jail Chief Deputy. A copy of this policy shall be maintained in each unit of the facility where it can be easily accessed by all staff members.

## 745.3 SUICIDE PREVENTION TEAM

The Jail Chief Deputy, in cooperation with the MHP provided this to the facility, will evaluate and approve the suicide prevention and intervention program annually. The suicide prevention team should consist of qualified health care professionals (Behavioral Health Organization/Medical provider) and the Jail Chief Deputy or the authorized designee. The yearly evaluation will include a review of all current policies to ensure they are relevant, realistic and consistent with the mission of the program. The program and policies will be updated as needed.

The suicide prevention team shall also ensure the facility is evaluated annually to identify any physical plant characteristics or operational procedures that might be modified to reduce the risk of inmate suicide. This should be accomplished by conducting a review of suicides and suicide attempts, physical inspection, review of various facility inspection reports and by participating in inmate/management team meetings. If physical modifications are recommended, the team shall ensure the Jail Chief Deputy is promptly notified.

It shall also be the responsibility of the suicide prevention team to coordinate with the Training Supervisor to ensure suicide prevention training is provided in compliance with applicable statutes and standards.

## 745.4 STAFF TRAINING

All facility staff members who are responsible for supervising inmates shall receive initial and annual training on suicide risk identification, prevention and intervention, to include, at minimum:

- The provisions of this policy.

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- Identification of the warning signs and indicators of potential suicide, including training on suicide risk factors.
- Identification of the demographic and cultural parameters of suicidal behavior, including incidence and variations in precipitating factors.
- Responding to suicidal and depressed inmates.
- Communication between corrections and health care personnel.
- Using referral procedures.
- Housing observation and suicide watch-level procedures.
- Follow-up monitoring of inmates who attempt suicide.

Recommendations for modification to suicide training should be directed to the Jail Chief Deputy, who shall review the recommendations and approve, if appropriate.

#### **745.5 SCREENING AND INTERVENTION**

All inmates shall undergo medical and mental health screening during the intake process. A portion of the intake medical screening is devoted to assessing inmates at risk for suicide. Upon an inmate entering the facility, he/she should be assessed by custody staff for the ability to answer medical and mental health screening questions.

Any inmate who appears to be unable to answer the initial medical screening questions shall be examined by a qualified health care professional at a designated hospital and receive medical clearance before acceptance into the jail. Inmates who refuse to answer these questions shall be placed under observation until the screening can be completed or until sufficient information is obtained to allow the staff to make appropriate decisions concerning housing and care.

Staff members shall promptly refer any inmate who is at risk for suicide to classification, health services, and mental health services ( DCR-Designated Crisis Responder). The inmate shall remain under direct and constant observation in a safe setting until designated staff makes appropriate health care and housing decisions.

#### **745.6 SUICIDE WATCH**

Inmates should only be housed on suicide watch with the approval of a qualified health care professional (MHP or Nursing Staff) and the Shift Supervisor. If a qualified health care professional is not present in the jail, the Shift Supervisor may make the decision to place an inmate on suicide watch but shall notify a qualified health care professional (If after business hours DCR) as soon as practicable. Inmates placed on suicide watch shall be closely monitored and housed in a cell that has been designed to be suicide resistant. Prior to housing the inmate, the staff should carefully inspect the cell for objects that may pose a threat to the inmate's safety.

Qualified health care professionals (MHP/ DCR) are primarily responsible for the treatment of inmates on suicide watch. Corrections Deputies and general employees are responsible for the



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physical safety of the inmates. All staff members should coordinate their efforts to ensure inmates do not have the means or the opportunity to injure themselves.

An observation log shall be maintained for each inmate on suicide watch. A staff member shall be designated to make a direct visual observation of the inmate twice every 30 minutes at approximately 15-minute intervals. A Shift Supervisor and a qualified health care professional, if available, must observe the inmate at least once every five hours. Each staff member who is required to observe the inmate shall make notations in the observation log documenting the time of observation and a brief description of the inmate's behavior.

An inmate classified as actively suicidal must be continuously monitored by direct visual observation of a corrections deputy. While monitoring may be supplemented by video monitoring, it may never be a substitute for direct visual monitoring.

The status of suicidal inmates should be readily identifiable in a manner discernible by staff. When standard-issue clothing presents a security or medical risk to the inmate or others, the inmate shall be supplied with a security garment designed to promote inmate safety and not cause unnecessary humiliation and degradation. Use of the security garment shall be documented in the inmate's health record. Suicidal inmates shall not be permitted to retain undergarments or any other item that can be fashioned into an implement for hanging (e.g., plastic bags, shoelaces or sheets). Inmates shall not be permitted to keep personal property while housed on suicide watch and shall not be permitted to possess razors or other sharp objects, such as pencils, items with staples or any other item used to cause a self-inflicted injury. Physical restraints should only be used as a last resort measure. The decision to use or discontinue use of restraints should be made in consultation with qualified health care professionals.

Inmates who are not actively suicidal but who have expressed suicidal thoughts or have a recent history of self-injurious behavior should be observed by staff at irregular intervals, not to exceed every 15 minutes.

#### 745.6.1 INTERVENTION

Any suicide attempt is a medical emergency. Staff should take action to facilitate emergency medical care and preserve and collect evidence as necessary. A qualified health care professional should be summoned immediately any time the staff suspects a suicide attempt is imminent. Staff should take reasonable and appropriate precautions to mitigate the ability of the inmate to injure him/herself, and should consider establishing and maintaining a non-threatening conversation with the inmate while awaiting assistance. If a qualified health care professional is not immediately available, the inmate should be placed in an appropriate and safe location until such time as qualified health care professionals or the Responsible Physician is available.

Following a suicide attempt, staff should initiate a medical emergency response and initiate and continue appropriate life-saving measures until relieved by qualified health care professionals. The arriving medical staff should perform the appropriate medical evaluation and intervention. The Responsible Physician or the authorized designee should be notified in situations when referral and transportation to the emergency room of a local hospital is required.

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#### *Suicide Prevention and Intervention*

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##### **745.6.2 NOTIFICATION**

In the event of an attempted or completed suicide, the Jail Chief Deputy should be promptly notified. The Jail Chief Deputy should notify the Sheriff.

The location where a suicide or attempted suicide has occurred should be treated as a crime scene after the inmate has been removed from the cell or after emergency medical care is rendered. The area should be secured and access-controlled to preserve evidence until the appropriate investigation can be completed.

All suicides or attempted suicides shall be documented in an incident report. Any injury must be documented in an inmate injury report.

All in-custody deaths, including those resulting from suicide, should be investigated and documented in accordance with the Reporting Inmate Deaths Policy.

##### **745.7 FOLLOW-UP**

Qualified health care professionals (MHP/ DCR) should evaluate any inmate placed on suicide watch within 12 hours of placement. After evaluation, qualified health care professionals should make a recommendation whether to keep the inmate on suicide watch. Only a qualified health care professional may remove an inmate from suicide watch.

All changes in inmate status should be reported to the qualified health care professional to ensure the inmate receives appropriate care. The inmate's health record should be updated to reflect all contacts, treatment and any other relevant information, and the records maintained in accordance with established records retention schedules.

Although the goal of this program is to significantly reduce the risk of in-custody deaths, the ongoing care of suicidal inmates after release must also be considered. Inmates who are at risk for suicide should work with local or area mental health resources and inmate families after release.

##### **745.7.1 DEBRIEFING**

Any suicide attempt or death of an inmate or on-site staff member requires a staff debriefing. Information will be communicated to the oncoming Shift Supervisor and staff to apprise them of the incident and actions taken with regard to the incident. Such debriefing will be appropriately documented and shall be reviewed by administration, security and the Responsible Physician.

##### **745.8 TRANSPORTATION**

Inmates at risk for suicide pose additional challenges during transport and while being held in court holding facilities. The transportation staff should take reasonable steps to closely monitor at-risk inmates whenever they are transported or held in any cell that is not designated as a suicide-watch cell. All additional security and monitoring measures implemented by the staff should be documented in the inmate's record. The transporting corrections deputy should ensure that the suicide threat or other danger is communicated to personnel at the receiving facility.

# Inmate Death - Clinical Care Review

## 747.1 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.

### 747.1.1 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.

## 747.2 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.

## 747.3 NOTIFICATIONS

In the event of an in-custody death, all authorities with jurisdiction, including the Coroner or the authorized designee shall immediately be notified by the Jail Chief Deputy or the authorized designee at the time of death.

The Responsible Physician should also be notified and should coordinate with the Jail Chief Deputy, 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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#### *Inmate Death - Clinical Care Review*

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##### **747.4 DOCUMENTATION**

The qualified health care professional on-duty at the time of the in-custody death shall ensure that all witnessed facts concerning the death are documented on the inmate's health record. Written documentation should include, but is not limited to, the time of death, the preceding circumstances surrounding the death, nature of the death, treatment rendered and who was notified of the death and by whom.

The Responsible Physician should initiate a death report and document it in accordance with the Continuous Quality Improvement Policy.

##### **747.5 CLOSING THE MEDICAL RECORD**

The Responsible Physician should review the inmate's health record to ensure appropriate entries have been made, and within 24 hours of the death have the original and a complete copy of the medical record made and delivered as follows (see the Reporting Inmate Deaths Policy):

- (a) Seal the original in an envelope and retain in the custody of the Responsible Physician.
- (b) Send the copy to the facility for inclusion into the inmate file and retain in accordance with established records retention schedules.

##### **747.6 DEATH BY SUICIDE**

In the event of a suspected inmate suicide, the qualified health care professional shall make a report within 24 hours to the Responsible Physician containing:

- (a) The inmate's known mental health history.
- (b) The most recent known mental health treatment.
- (c) All known circumstances surrounding the suicide.

A psychological autopsy should be conducted by a qualified mental health care professional if the cause of death is determined to be a suicide.

The initial CMR should be conducted by the Responsible Physician and, if available, a mental health care professional. The CMR should be finalized within 30 days by the Responsible Physician. The findings should be shared with the treating staff.

##### **747.7 DEATH REVIEW**

All deaths should be reviewed within 30 days. The review shall consist of an administrative review, a CMR and a psychological autopsy if the death was by suicide.

Treating staff shall be informed of the CMR and the administrative review findings at the quarterly continuous quality improvement meeting.

Corrective actions identified through the CMR should be implemented and monitored in accordance with the Continuous Quality Improvement Policy for systemic issues and the Inmate Safety Program Policy for staff-related issues.

# Nursing Assessment Protocols

## 749.1 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.

### 749.1.1 DEFINITIONS

Definitions related to this policy include:

**Nursing assessment protocols** - Written instructions or guidelines that specify the steps to be taken in evaluating an inmate's health status and providing medical treatment. Protocols may include first-aid procedures for the identification and care of ailments that ordinarily would be treated with over-the-counter (OTC) medication or through self-care. These protocols also may address more serious symptoms, such as chest pain, shortness of breath or intoxication. The protocols provide a sequence of steps to evaluate and stabilize an inmate until a qualified health care professional is contacted and orders for further care are received.

## 749.2 POLICY

It is the policy of this office that medical care performed by personnel other than a physician shall be performed pursuant to a written protocol or order of the Responsible Physician.

## 749.3 PROTOCOL DEVELOPMENT AND AUTHORIZATION

The facility's Responsible Physician or the authorized designee shall develop, review and authorize all nursing protocols used for the treatment of inmates, and shall develop, deliver or procure appropriate training for the nurses on their use. Each nursing assessment protocol will have a signed declaration indicating it has been reviewed and approved by the nursing administrator and the Responsible Physician.

The protocols developed shall be appropriate for the training and experience of the health care services staff members who will deliver the services. Each protocol shall comply with the standards of practice for the level of care the health care services staff members are authorized to provide. The protocols shall only include the use of OTC medications.

The Responsible Physician shall review the nursing assessment protocols annually, revising as necessary and dating and signing approved protocols.

## 749.4 TRAINING

Nurses will be trained and approved in the nursing assessment protocols prior to their use. The training shall be documented and should include:

- (a) Evidence that new nurses have been trained.
- (b) Demonstration of knowledge and skills.
- (c) Evidence of annual review of skills.

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#### *Nursing Assessment Protocols*

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- (d) Evidence of retraining when protocols are introduced or revised.

#### **749.5 AUTHORIZED USE OF PROTOCOLS**

Nursing staff may use a nursing assessment protocol only after they have been trained and authorized by the Responsible Physician. Nursing assessment protocols shall only be used after a nurse fully evaluates the inmate's complaint and the inmate's condition meets the appropriate criteria.

Inmates may only be treated using a nursing protocol for the same condition on two consecutive visits. If the inmate requests service for the same condition a third time, the inmate should be referred to a physician's assistant, nurse practitioner, registered nurse or physician.

The assessment protocols only include the use of OTC medication. When OTCs are administered per the protocol, they do not require the signature of a physician. However, the order and the administration of the medication shall be documented on the medication administration record.

A registered nurse (RN) is considered the minimum certification level required to independently initiate medical treatment. The RN must be present to physically assess the inmate; an assessment cannot be done via telephone or electronically.

A licensed vocational nurse (LVN) is generally prohibited from independently initiating any standardized protocol. Under very specific circumstances (e.g., early detoxification, history of a seizure disorder), it may be acceptable for an LVN to initiate a standing order following a telephone consultation with a physician, physician's assistant, psychiatrist, dentist or other person who meets the minimum certification level to initiate such orders. Under these circumstances, it is essential that the inmate be personally evaluated within 24 hours by a physician's assistant, nurse practitioner, registered nurse or physician.

Nursing assessment protocols shall not include the administration of any prescription medication, with the exception of protocols addressing an emergency or a life-threatening situation. Treatment with prescription medication may only be initiated upon a written or verbal order from a physician, psychiatrist, dentist or other person who is licensed to dispense medication in the state, either independently or under the supervision of a physician.

## Infirmary Care

### 751.1 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.

#### 751.1.1 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 inmates 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** - While nursing services are on duty, the patient can gain the professional's attention through visual or auditory signals.

### 751.2 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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#### *Infirmary Care*

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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.

#### **751.3 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.

#### **751.4 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.

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

### 753.1 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.

### 753.2 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.

### 753.3 STAFF RESPONSIBILITIES

It is the responsibility of the Jail Chief Deputy to ensure that the inmate handbook clearly defines the unauthorized possession and/or use of medical equipment and supplies as a rule violation that may result in discipline.

The Responsible Physician or the authorized designee shall create and maintain an inventory log for medical equipment. This log will be utilized by medical personnel who work within the facility to track and control medical equipment. When not in use, all medical equipment and sharps shall be stored in a secure manner to prevent unauthorized access.

## Continuation of Care

### 755.1 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 inmate. The sole objective is to maintain or improve the health of the inmates. This policy is intended to ensure that inmates receive health services in keeping with current community standards as ordered by qualified health care professionals.

### 755.2 POLICY

It is the policy of this office that all inmates shall have access to the continuation of care for a health issue, provided the treatment plan meets community standards. The inmate's health care needs will be assessed by qualified health care professionals and continued as determined or referred after release.

### 755.3 CONTINUITY OF CARE

The Jail Chief Deputy is responsible for coordinating with the Responsible Physician to ensure that all inmates receive appropriate health care, including, but not limited to:

- (a) Newly booked inmates shall have a medical screening as part of the booking and classification process. This screening includes documentation of acute or chronic health issues or conditions, existing injuries, and medications or treatments the inmate is currently receiving.
  - 1. Any prior jail health records, including those from other facilities, should be reviewed.
  - 2. Current medications will be verified and continued as deemed appropriate by the Responsible Physician or the authorized designee except that medication prescribed to treat a serious mental illness shall be continued if the inmate is medically stable on the medication. Such medication shall not be substituted unless it is discontinued or the generic form is clinically identical (Chap. 453, § 12, 2023 Laws).
- (b) A health assessment is completed on or before the 14th day of continuous incarceration.
- (c) Individual treatment plans that are used to guide treatment. The format for planning may vary but should include, at a minimum:
  - 1. The frequency of follow-up for medical evaluation and adjustment of treatment modality.
  - 2. The type and frequency of diagnostic testing and therapeutic regimens.
  - 3. When appropriate, instructions about diet, exercise, medication, and adaptation to the correctional environment.
  - 4. Custody staff is informed of the treatment plan when necessary, to ensure coordination and cooperation in the ongoing care of the inmate.

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#### *Continuation of Care*

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- (d) Reasonable effort should be made to obtain information and records relating to previous health care professionals with the consent of the inmate, if the inmate is currently under medical care.
- (e) Upon transfer to another facility, a medical discharge summary of the inmate's current condition, medications, and treatment plan will be forwarded in a sealed envelope (to maintain confidentiality) to the receiving facility.
- (f) Response to requests for health information from medical facilities and health care professionals, with the inmate's written consent.
- (g) When inmates are sent out of the facility for emergency or specialty medical treatment, written information regarding the inmate's reason for transfer, pertinent medical problems and list of current medications should be sent with the inmate and may be given to those providing care upon request. The name and phone number of a contact person who the medical facility can call should be included with the patient health information. Upon the inmate's return to the facility, treatment recommendations should be reviewed by the Responsible Physician or the authorized designee and appropriate plans should be made for continuing care in the facility based on the treating facility's diagnosis, recommended medication,s and other treatment.
- (h) Upon release from the facility, inmates should be given written instructions for the continuation of care including, but not limited to:
  - 1. The name and contact information of health care facilities for follow-up appointments.
  - 2. Prescriptions and/or an adequate supply of medication for those with chronic medical or psychiatric conditions.

## Continuous Quality Improvement

### 757.1 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.

### 757.2 POLICY

It is the policy of this office that an internal review and CQI process for inmate health care delivery and outcomes is developed and maintained, measurable goals and objectives are established and reviewed annually, and that the process itself is periodically reviewed and updated as needed. The process should be supervised by the Responsible Physician. The data evaluated should result in more effective access to services, an improved quality of care and a better utilization of resources.

### 757.3 CQI TECHNIQUES AND MONITORING

The CQI process may be applied to any aspect of health care delivery and health service outcomes, including, but not limited to, monitoring and reviewing the following:

- Quality of the medical charts, by the Responsible Physician or the authorized designee
- Investigations of complaints and grievances
- Corrective action plans and plan outcomes
- Deaths in custody, suicide attempts, sentinel events, and incident and management of serious communicable disease outbreaks
- Plans for employee education and training, using investigation findings
- Records of internal review activities
- Quarterly reports to the Responsible Physician and Jail Chief Deputy
- 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
- Risk minimization tactics

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#### *Continuous Quality Improvement*

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- Data describing the types, quality and quantity of care provided
- Accreditation compliance

#### **757.4 CQI COMMITTEE MEETINGS**

The jail CQI committee should meet quarterly under the direction of both the Jail Chief and the Responsible Physician. The CQI meetings may be conducted at the same time as quarterly administrative meetings, but CQI minutes must be produced and maintained separately from any other minutes.

The CQI minutes are not subject to disclosure outside of the CQI program, including requests from local, regional and national entities. Other interested parties with a need to know are only entitled to the disclosure of information that includes:

- (a) Problems that may have been identified.
- (b) Solutions that have been agreed upon.
- (c) Persons responsible for implementing the corrective action.
- (d) The time frame for implementing the corrective actions.

# Informed Consent and Right to Refuse Medical Care

## 759.1 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.

### 759.1.1 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.

## 759.2 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 may include emergencies, life-threatening conditions and public health matters.

## 759.3 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.

## 759.4 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 Physician.

Any time there is a concern about the decision-making capacity of the inmate, an evaluation shall be conducted, particularly if the refusal is for critical or acute care.

All refusals of psychotropic medication shall be referred to the Responsible Physician or the authorized designee.

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.

#### **759.5 RECORDS**

The Jail Chief Deputy or the authorized designee shall work with the Responsible Physician to develop medical care consent and refusal forms and a system for retaining records in the inmate's health file in accordance with established records retention schedules.

# Management of Health Records

## 761.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a uniform manner of maintaining the active inmate health records for easy accessibility during clinical treatment, and the storage methods for inactive health records. This policy also recommends practices that will ensure the confidentiality of health record information by separating it from custody records.

### 761.1.1 DEFINITIONS

Definitions related to this policy include:

**Protected health information** - Information that relates to the inmate's past, present or future physical or mental health or condition, the provision of medical care to the inmate, or the past, present or future payment for the provision of health care to the inmate (45 CFR 160.103).

## 761.2 POLICY

It is the policy of this office to maintain the confidentiality of inmates' protected health information. Inmate health records will be maintained separately from custody records and under secure conditions, in compliance with all local, state and federal requirements.

The Responsible Physician or the authorized designee will establish standardized facility procedures for recording information in the file and for the control and access to inmate health records. Inmate workers shall not have any access to inmate health records.

## 761.3 INITIATING A HEALTH RECORD

Following the initial medical screening process, the qualified health care professional shall initiate a health record for each inmate. The Responsible Physician shall be responsible for developing and implementing procedures for standardized record formatting.

## 761.4 CONFIDENTIALITY OF INMATE HEALTH RECORDS

Information regarding an inmate's health status is confidential. Active health records shall be maintained separately from custody records. Access to an inmate's health record shall be in accordance with state and federal law (Health Insurance Portability and Accountability Act (HIPAA) of 1996 Public Law 104-191 and the implementing regulations).

The inmate's protected health information may be disclosed, with the inmate's written authorization, to any person so designated. A fully completed authorization for release and/or a disclosure of protected health information form shall be required prior to disclosure based upon informed consent.

The inmate's protected health information may be disclosed by the qualified health care professional without the inmate's authorization under certain circumstances and when approved by the Responsible Physician or the authorized designee. Those circumstances include:

- (a) To known qualified health care professionals who are members of the health care team responsible for the inmate's care.



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- (b) To custody staff regarding inmates as reasonably necessary to protect the safety, security and good order of the facility. Examples may include information that the inmate may be:
  - 1. Suicidal.
  - 2. Homicidal.
  - 3. A clear custodial risk.
  - 4. A clear danger of injury to self or others.
  - 5. Gravely disabled.
  - 6. Receiving psychotropic medications.
  - 7. A communicable disease risk.
  - 8. In need of special housing.
- (c) To the local public health officer when an inmate is part of a communicable disease investigation.
- (d) Pursuant to a court order or valid subpoena duces tecum, accompanied by a satisfactory assurance that the inmate has been given notice and an opportunity to file an objection or efforts have been made to secure a protective order as required under HIPAA (45 CFR 164.512).
- (e) To a law enforcement officer for purposes of a criminal investigation, to avert a serious threat to the health or safety of any person or to fulfill mandatory reporting requirements.
- (f) To a law enforcement officer when the inmate has died as a result of criminal conduct.

The inmate's limited protected health information may also be disclosed to a law enforcement officer for purposes of identifying or locating a suspect or when the inmate is a victim of a crime. When reasonably possible, the approval of the Jail Chief Deputy should be obtained prior to disclosure.

Attorneys requesting health record information regarding an inmate should be advised that an authorization for release and/or a disclosure of medical information form or an attorney release form signed by the inmate is required.

Family members may be informed of the inmate's custody status and whether the inmate is receiving medical care. Family members requesting additional information must provide a proper authorization for release and/or disclosure of medical information form.

The Jail Chief Deputy, 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.

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#### **761.5 HEALTH RECORD CONTENTS**

- (a) To standardize record keeping and to identify responsibilities, the following should apply to inmate health records:
  - 1. The qualified health care professional or the authorized designee should be responsible for ensuring that all required information and forms are included in the medical records. There should also be a periodic informal review as described in the Continuous Quality Improvement Policy.
  - 2. The qualified health care professional or the authorized designee should be responsible for ensuring incoming written findings and recommendations are returned with the inmate from any off-site visit and filed in the inmate's medical record.
- (b) Inmate health records shall minimally contain, but are not limited to:
  - 1. Identifying information (e.g., inmate name, identification number, date of birth, sex) on each sheet in the file.
  - 2. A completed inmate medical/mental health screening form.
  - 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. Clinician orders for prescribed and administered medications.
  - 9. X-ray and laboratory reports and diagnostic studies.
  - 10. A record of the date, time and place of each clinical encounter with inmates.
  - 11. Health service reports.
  - 12. Individualized treatment plans when available or required.
  - 13. Consent and refusal forms.
  - 14. Release of information authorization forms (including HIPAA forms).
  - 15. Results of specialty consultations and off-site referrals.
  - 16. Special needs treatment plans, if applicable.

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##### **761.6 ACTIVE INMATE HEALTH RECORDS**

Active inmate health records will be accessible to qualified health care professionals as necessary for the provision of medical treatment and other uses allowed by law or the Jail Chief Deputy or the authorized designee, under exigent circumstances, to protect the safety, security and good order of the facility.

All entries in the inmate health record will have the place, date, time, signature and title of each individual providing care and should be legible.

Documentation in the inmate health record is done in the subjective, objective, assessment and plan (SOAP) format. An inmate health record is initiated at the first health encounter following the initial medical screening.

If an inmate has been previously incarcerated, the previous health record should be reactivated. If a new record has been initiated and a previous record exists, medical records personnel should merge the two records in order to compile a complete history, unless mandated statutory retention schedules have provided for the destruction of one file and there is a need to create a new file.

New information shall be entered on the health record at the completion of each encounter. All inmate health records shall be returned to the file prior to the end of each watch.

##### **761.7 INACTIVE MEDICAL RECORDS**

When an inmate is released from custody, medical records personnel should remove the inmate's health record from the active file.

The health record should be reviewed for completeness. Any loose documents should be filed according to the established health record format.

The health record should be securely stored in the area designated for inactive inmate health records, in accordance with established records retention schedules but no less than 10 years from the date of the last clinical encounter. Adult records and juvenile records may have different jurisdictional retention requirements.

Inactive inmate medical records may be stored off-site. Health record information from inactive files may be transmitted to specific and designated physicians or medical facilities upon the written request or authorization of the inmate.

##### **761.8 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.

##### **761.9 HIPAA COMPLIANCE**

The Jail Chief Deputy, 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.

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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 staff training on HIPAA requirements, depending on the level of access the staff member has to protected health information.
- Administrative, physical and technical safeguards to protect the privacy of protected health information.

# Inmate Health Care Communication

## 763.1 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.

## 763.2 POLICY

It is the policy of this office that effective communication shall occur between the Jail Chief Deputy 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 Jail Chief Deputy shall be responsible for establishing measurable goals relating to processes that enhance good communication between the qualified health care professionals and the custody staff. The Jail Chief Deputy should also establish, in writing, the desired performance objectives relating to practices that support good communication between the qualified health care professionals and the custody staff. The Jail Chief Deputy should review the documents annually for any necessary revisions or updates in support of continuous improvement in the delivery of health care services.

## 763.3 MANAGING SPECIAL NEEDS INMATES

Upon an inmate's arrival at the facility, the qualified health care professional, in consultation with the custody staff, should determine if the inmate has any special needs.

- (a) If staff determines that an inmate has special needs, a communication form or other appropriate documentation relating to special needs should be completed and sent to classification personnel, the Shift Supervisor and the housing 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 Physician or a qualified health care professional at least once every 90 days to evaluate his/her continued designation as a special needs inmate.

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- (d) Inmates who have been determined by qualified health care professionals to require a special needs classification should be seen at least once monthly by a qualified health care professional.
- (e) Prior to transfer to another facility, a medical transfer summary should be completed detailing any special requirements that should be considered while the inmate is in transit and upon his/her arrival at the destination. Discharge planning should be included, as appropriate.
- (f) A treatment plan should be developed for each inmate and should include, at a minimum:
  - 1. The frequency of follow-up for medical evaluation and anticipated adjustments of the treatment modality.
  - 2. The type and frequency of diagnostic testing and therapeutic regimens.
  - 3. When appropriate, instructions about diet, exercise, adaptation to the correctional environment and using prescribed medications.
- (g) When clinically indicated, the qualified health care professionals and the custody personnel should consult regarding the condition and capabilities of inmates with known medical and/or psychiatric illnesses or developmental disabilities prior to any of the following:
  - 1. Housing assignment
  - 2. Program or job assignment
  - 3. Admissions to, and transfers from or between institutions
  - 4. Disciplinary measures for mentally ill patients
- (h) Qualified health care professionals and custody personnel should communicate about inmates who require special accommodation. These include, but are not limited to, inmates who are:
  - 1. Chronically ill
  - 2. Undergoing dialysis
  - 3. In an adult facility, as an adolescent
  - 4. Currently in treatment for a communicable disease
  - 5. Physically disabled
  - 6. Pregnant
  - 7. Frail or elderly
  - 8. Terminally ill
  - 9. Mentally ill or suicidal

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#### 10. Developmentally disabled

#### **763.4 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.

## Forensic Evidence

### 765.1 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.

#### 765.1.1 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.

### 765.2 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

### 767.1 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.

#### 767.1.1 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.

### 767.2 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.

### 767.3 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.

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 transport 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.

#### **767.4 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

## 769.1 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.

### 769.1.1 DEFINITIONS

Definitions related to this policy include:

**Administration** - The act of giving a single dose of a prescribed drug or biological substance to an inmate. Administration is limited to qualified health care professionals and health-trained custody staff members in accordance with state law (RCW 70.48.490 and 69.41.050).

**Controlled substances** - Medications classified by the Drug Enforcement Administration (DEA) as Schedule II-IV (21 USC § 812).

**Delivery** - The act of providing a properly labeled prescription container (e.g., a dated container that includes the name of the individual for whom the drug is prescribed, the name of the medication, dose and instructions for taking the medication, the name of the prescribing physician and expiration dates). Under these circumstances a single dose at a time can be delivered to the inmate, according to the written instructions, by any qualified health care professional or health-trained custody staff member under the provisions of RCW 70.48.490 and RCW 69.41.050.

**Dispensing** - Those acts of processing a drug for delivery or administration to an inmate pursuant to the order of a qualified health care professional. Dispensing consists of:

- Comparing directions on the label with the directions on the prescription or order to determine accuracy.
- Selection of the drug from stock to fill the order.
- Counting, measuring, compounding or preparing the drug.
- Placing the drug in the proper container and affixing the appropriate prescription label to the container.
- Adding any required notations to the written prescription.

Dispensing does not include the acts of distributing, delivery or administration of the drug. The function of dispensing is limited to pharmacists and qualified health care professionals.

**Distributing** - The movement of a drug, in the originally labeled manufacturer's container or in a labeled pre-packaged container, from the pharmacy to a health care services area.

**Dose** - The amount of a drug to be administered at one time.

**Drug** - An article recognized in the United States Pharmacopoeia and National Formulary (USP-NF), the Homeopathic Pharmacopoeia of the United States or any supplement that is intended for

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use in the diagnosis, cure, mitigation, treatment or prevention of disease in humans. A substance, other than food, intended to affect the structure or any function of the human body.

**Pharmaceutical operations** - The functions and activities encompassing the procurement, dispensing, distribution, storage and control of all pharmaceuticals used within the jail, the monitoring of inmate drug therapy and the provision of inmate/patient drug information.

#### **769.2 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.

The Jail Chief Deputy or the Sheriff shall consult with one or more pharmacists and one or more licensed physicians or nurses in the course of developing the procedures related to this policy. A copy of the current policy regarding medication management will be provided to the Washington Association of Sheriffs and Police Chiefs (RCW 70.48.490) and RCW 69.41.050.

#### **769.3 PHARMACEUTICAL OPERATIONS**

- (a) The Responsible Physician, in conjunction with the pharmacist, shall establish a list of all prescription and non-prescription medications available for inmate use.
  - 1. Drugs approved for use in the facility should promote safe, optimum and cost-efficient drug therapy.
  - 2. The list should be periodically updated.
- (b) The Responsible Physician, in conjunction with the pharmacist, shall ensure appropriate medication storage, handling and inventory control.
- (c) The Responsible Physician shall inspect the pharmaceutical operation quarterly and regularly review charts on medication utilization.
- (d) The Responsible Physician shall be responsible for establishing and maintaining a system for the secure storage and accountability of all controlled substances. A count of 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 Supervisor. Medications shall be stored under proper conditions of security, segregation and environmental control at all storage locations.
  - 1. Medication shall be accessible only to legally authorized persons.
  - 2. Medication and device cabinets (stationary or mobile) shall be closed and locked when not in use.
  - 3. Controlled substances shall be stored and handled in accordance with DEA regulations.
  - 4. Medication requiring refrigeration shall be stored separately, either in a refrigerator that is locked or in a refrigerator that is in a locked room and is used exclusively for medication and medication adjuncts. The inside temperature of this refrigerator shall be maintained between 36 and 46 degrees. The inside

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temperature shall be monitored and recorded daily on a refrigerator temperature log.

5. Antiseptics and other medications for external use shall be stored separately from internal and injectable medications.
- (e) Medication shall be kept in pharmacist-packaged or the original manufacturer's labeled containers. Medication shall only be removed from these containers to prepare a dose for administration. Drugs dispensed to inmates who are off grounds or are being discharged from the facility shall be packaged in accordance with the provisions of the 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.
  2. Unused, outdated or discontinued doses or excess inventories of non-controlled drugs that have not been in the possession of the inmate shall be returned to the pharmacy for disposition.
  3. Returned, non-controlled substances that have been in the possession of the inmate, unclaimed personal medication collected at intake or individual doses of medication removed from the original pharmacy packaging shall be destroyed at the facility by health services staff and placed in the medical waste disposal system.
  4. Pharmaceutical waste shall be separated from other types of medical waste for handling and disposal purposes, and will be discarded in designated containers distinctly identified for medical waste.
- (h) All medication preparation, storage and administration areas shall be clean, organized, illuminated, ventilated and maintained at an appropriate temperature range. Any mobile medication cart that is not being used in the administration of medication to inmates shall be stored in a locked room that meets similar requirements.

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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 Jail Chief Deputy.

#### **769.4 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.

- (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 shall be required on all verbal orders within 72 hours of the order.
- (b) Any medication prescription that is not complete or is questionable shall not be prepared until clarification is received from the qualified health care professional. Staff shall make an effort to obtain prescription clarification in a timely manner.
- (c) Medication shall only be ordered upon approval of the Responsible Physician. Medication shall be prescribed and ordered from the facility list of approved medications unless the Responsible Physician approves otherwise.
- (d) Some inmates may be permitted to possess and self-administer some medications when monitored and controlled, in accordance with this policy.
- (e) Apparent adverse drug reactions shall be recorded in the inmate's health record by the qualified health care professional.
- (f) The qualified health care professional shall notify the Shift Supervisor of all known medication errors in a timely manner. Medication error reports shall be completed on all known medication errors.

#### **769.5 PER DOSE MEDICATION ADMINISTRATION**

Psychotropic medication, controlled substances, tuberculosis (TB) medication, seizure medication and those listed as directly observed therapy (DOT) shall be administered to inmates on a per dose basis. Health-trained custody staff members may administer medication on the order of the Responsible Physician or a qualified health care professional.

- (a) Each medication ordered on a per dose basis for individual inmates shall be kept in the medication room of the facility.

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- (b) Medication dispensing envelopes bearing the inmate's name, booking number, housing location and the medication and its dosing schedule shall be generated for each inmate receiving per dose medication. These shall be administered from the individually packaged supply and delivered to the patient at each scheduled medication time.
- (c) The qualified health care professional or health-trained custody staff member will confirm the inmate's identity prior to administering the medication by comparing the name/booking number on the dispensing envelope with the inmate's identification badge/armband.
  - 1. Inmates should have a fluid container and adequate fluid to take the medication being administered.
  - 2. The qualified health care professional or health-trained custody staff member should observe the inmate taking the medication to prevent "cheeking" or "palming".
  - 3. The qualified health care professional or health-trained custody staff member should inspect the inmate's mouth after the inmate swallows the medication to ensure it was completely ingested. If the inmate appears to be "cheeking" the medication, a chart entry will be made and a notation entered on the medication envelope, as well as the back of the Medication Administration Record (MAR).
- (d) The qualified health care professional or health-trained custody staff member shall record each medication administered by initialing the appropriate date and time. The qualified health care professional or health-trained custody staff member shall authenticate the initials by placing his/her initials, signature or name stamp in the designated area on the lower portion of the MAR. Pre-charting is not allowed.
  - 1. In the event that medication cannot be administered (for example, the inmate is in court or the medication is not in stock), a note explaining the situation and planned action shall be made on the back of the MAR or on a progress note.
- (e) The qualified health care professional or health-trained custody staff member shall have inmates who refuse their medication sign a refusal form at the medication round. If the inmate willfully refuses to sign the refusal form, the qualified health care professional or health-trained custody staff member shall advise custody staff, who should attempt to resolve the situation through voluntary compliance by reminding the inmate that a refusal to sign may lead to disciplinary action. The qualified health care professional or health-trained custody staff member shall also:
  - 1. Note the refusal on the medication log including the date and time.
  - 2. Review the medication logs for prior refusals.
  - 3. Document patterns of refused medications on the inmate's medical record.

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4. Make a reasonable effort to convince the inmate to voluntarily continue with the medication as prescribed.
  5. Report continued refusals to the Responsible Physician and have the inmate complete and sign a medication refusal form.
- (f) No inmate should be deprived of prescribed medication as a means of punishment.

#### **769.6 SELF-ADMINISTRATION OF MEDICATION**

Upon approval of the Responsible Physician or qualified health care professional, inmates may be allowed to self-administer prescribed medication other than psychotropic medication, seizure medication, controlled drugs, TB medication or any medication that is required to be DOT or has the recognized potential for abuse.

The qualified health care professional ordering medication should educate the inmate regarding potential side effects and the proper use of the medication.

- (a) Medication may be ordered through a pre-booking examination or medical clearance obtained at a hospital or other clinic, an emergency room visit or evaluation by an on-site qualified health care professional.
- (b) Any questions the inmate may have concerning his/her medication should be addressed at this time.
- (c) The inmate shall be instructed to carry medication at all times or to secure it in designated areas within the housing unit.
- (d) All self-administered medications are to be documented on the MAR.
- (e) Upon receipt of the medication, the qualified health care professional or health-trained custody staff member should issue the inmate his/her medication as follows:
  1. The qualified health care professional or health-trained custody staff member issuing the medication should confirm correct identity by comparing the name/booking number of the self-administer package to the inmate's identification badge/armband.
  2. When issuing self-administered medication, documentation on the MAR should include the number of pills issued and the qualified health care professional or health-trained custody staff member's initials.
- (f) The continuous quality improvement coordinator should monitor inmate compliance by randomly interviewing inmates about the name, purpose, dose, schedule and possible side effects of their prescription medication and will inspect the inmates' 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 inmate is not responsible enough to self-administer the medication



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or has a history of frequent rule violations. Documentation in the medical record should accompany any decision to change the medication to per-dose. Custody and health care staff should continuously monitor and communicate with each other regarding inmates complying with the conditions and rules for self-administered medication.

- (h) Inmates who arrive at the facility with prescribed medication should be administered per-dose for any new medications or refills until the new medication or refill is received from the pharmacy.

#### **769.7 NON-PRESCRIPTION MEDICATION**

Any over-the-counter non-prescription medication available to inmates for purchase in the facility commissary shall be approved jointly by the Jail Chief Deputy and the Responsible Physician and shall be reviewed annually.

The Jail Chief Deputy and the Responsible Physician should establish a limit on the amount of non-prescription medication an inmate may purchase and have in his/her possession at any time. Inmates with medication in an amount above the proscribed limit may be subject to disciplinary sanctions.

#### **769.8 TRAINING**

All health-trained custody staff members authorized to deliver, administer and provide medication assistance shall be trained pursuant to the provisions of RCW 70.48.490 and RCW 69.41.050 prior to engaging in any tasks related to delivery or administration of medication (RCW 70.48.490).

# Release Planning

## 771.1 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.

### 771.1.1 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.

## 771.2 POLICY

The qualified health care professional should work with correctional staff to ensure that inmates who have been in custody for 30 or more days and have pending release dates, as well as serious health, dental or mental health needs, are provided with medication and health care resources sufficient for the inmate to seek health care services once released.

The Jail Chief Deputy 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.

## 771.3 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 providers 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.

#### **771.4 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

### 773.1 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.

#### 773.1.1 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.

### 773.2 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.

### 773.3 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 custody 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.

### 773.4 REPORTING INAPPROPRIATE ACCESS OF MEDICAL INFORMATION

The Jail Chief Deputy and the Responsible Physician shall establish a process for staff, inmates or any other persons to report the improper access or use of medical records.

### 773.5 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 Supervisor 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 Mason County Sheriff's Office has established a plan to promote and inspect 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 POLICY

It is the policy of the Department to maintain a safe and sanitary facility. To accomplish this goal the Department will conduct regular sanitation inspections of the facility. The Jail Chief Deputy, in conjunction with the County Facilities department, will ensure, at minimum, the following:

- (a) Schedules of functions (e.g., daily, weekly, monthly or seasonal cleaning, maintenance, pest control and safety surveys).
- (b) Self-inspection check lists 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. (Facilities or IT work requests)
- (f) Training requirements for custody staff and inmate workers on accident prevention and avoidance of hazards with regard to facility maintenance.

Consideration should be given to general job descriptions and/or limitations relating to personnel or inmates assigned to carrying out the plan. Specialized tasks, such as changing air filters and cleaning ducts or facility pest control, will be handled by Mason County General Services or by contract with private firms.

Inmates engaged in sanitation duties shall do so only under the direct supervision of qualified custody staff. When inmate work crews are used, additional controls should be implemented to account for all equipment and cleaning materials.

All staff shall report any unsanitary or unsafe conditions to a supervisor. Staff shall report repairs needed to the physical plant and equipment by submitting a work order. Shift Supervisors will conduct cleaning inspections on a daily basis. The Jail Chief Deputy or the authorized designee will conduct weekly safety and sanitation inspections of the facility.

### 800.3 WORK ORDERS

All reports of unsafe conditions as well as repairs needed to the physical plant and equipment shall be documented in a work order, sent by email to General Services.

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##### **800.4 MATERIAL SAFETY DATA SHEETS (MSDS)**

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 Material Safety Data Sheet (MSDS) that is provided by the manufacturer or distributor of the material. The MSDS provides vital information on individual hazardous material and substances, including instructions on safe handling, storage, and disposal, prohibited interactions and other details relative to the specific material.

The County 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 a MSDS 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 material.
- (c) A log for identification of new or revised MSDS materials.
- (d) A log for documentation of training by users of the hazardous material.

##### **800.4.1 MSDS USE, SAFETY AND TRAINING**

All supervisors and users of MSDS information must review the latest issuance from the manufacturers of the relevant substances. Staff and detainees shall have ready and continuous access to the MSDS for the substance they are using while working. In addition, the following shall be completed (29 CFR 1910.1200(e)(1)(ii)):

- (a) Supervisors shall conduct training for all staff and inmates on using the MSDS for the safe use, handling and disposal of hazardous material in areas they supervise.
- (b) Staff and detainees using the MSDS 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 in their workplace.

##### **800.4.2 MSDS DOCUMENTATION MAINTENANCE**

Changes in MSDS information occur often and without general notice. Facilities staff accepting a delivery, addition, or replacement hazardous material shall review the accompanying MSDS. If additions or changes have occurred, the revised MSDS shall be incorporated into the file and a notation shall be made in the MSDS revision log.

Supervisors shall review MSDS information in their work areas semi-annually to determine if the information is up-to-date and that appropriate training has been completed. Upon review, a copy of the MSDS file and all logs shall be forwarded to the Maintenance Supervisor or the authorized designee.

##### **800.4.3 MSDS 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 MSDS

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information. He/she will maintain this information in the safety office (or equivalent), with a copy to the local fire department. Documentation of the semi-annual reviews will be maintained in the MSDS master file. The master index should also include a comprehensive, up-to-date list of emergency phone numbers (e.g., fire department, poison control center) (29 CFR 1910.1200(g)(8)).



# 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 Department recognizes that the effectiveness of a disposal system depends not only on the written policies, procedures and precautions, but on adequate supervision and the responsible behavior of the staff and inmates. It is the responsibility of everyone in the facility to follow hazardous waste disposal instructions, utilizing prescribed precautions and using safety equipment properly.

### 802.1.1 DEFINITION

Definitions related to this policy include:

**Hazardous waste** - Material that poses a threat or risk to public health or safety or is harmful to the environment (e.g., batteries, paints, solvents, engine oils and fluids, cleaning products).

## 802.2 POLICY

It is the policy of this department 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 County Facilities and Jail Administrator or the authorized designee shall be responsible for:

- Contracting with a hazardous waste disposal service.
- Developing and implementing a storage and disposal plan that has been reviewed and approved by a regulatory agency.
- Including hazardous waste issues on internal health and sanitation inspection checklists.
- Including hazardous waste issues in the inmate handbook and ensuring that inmates receive instruction on proper handling and disposal during inmate orientation.
- Developing and implementing procedures for the safe handling and storage of hazardous materials until such time as the contractor removes the items from the facility.
- Ensuring the staff is trained in the proper identification of hazardous waste and the appropriate handling, storage and disposal of such items.

## 802.3 DISPOSAL PROCEDURE

### 802.3.1 SEWAGE DISPOSAL

All sewage and liquid waste matter must be disposed of into a public system of sewerage or, if public sewerage is not available, into a private system of sewage disposal in accordance with the requirements of the local public health entity.

The institution's use of the private system must be discontinued and the private system must be properly abandoned when public sewerage becomes available.

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##### **802.3.2 HAZARDOUS WASTE**

Hazardous waste generated in the facility shall be properly disposed in designated containers and stored until removed by the contractor. Staff shall use universal standard precautions when in contact with hazardous materials, at a minimum, unless directed otherwise.

##### **802.4 SAFETY EQUIPMENT**

The Jail Chief Deputy and the county emergency manager shall ensure that appropriate safety equipment is available. All supervisors shall be knowledgeable in how to access the safety equipment at all times. The county may coordinate with local fire departments or contracted vendors to obtain the necessary safety equipment.

##### **802.5 TRAINING**

The Training Supervisor shall be responsible for ensuring that all facility personnel receive appropriate training in the use of appropriate safety equipment and the identification, handling and disposal of hazardous waste. Training records shall be maintained, including the course roster, curriculum, instructor name and credentials, and testing instruments.

##### **802.6 SUPERVISOR RESPONSIBILITY**

Supervisors are responsible for monitoring any hazardous waste containment issue, ensuring that employees have the appropriate safety equipment, that any exposed persons receive immediate medical treatment, and that the appropriate measures are taken to lessen the exposure of others. Supervisors shall ensure that incident reports are completed and forwarded to the Jail Chief Deputy in the event of an exposure to staff, inmates or visitors.

# Housekeeping and Maintenance

## 804.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines to ensure that the facility is kept clean and in good repair in accordance with accepted federal, state and county standards.

## 804.2 POLICY

The Jail Chief Deputy shall establish housekeeping and maintenance plans that address all areas of the facility. The plan should include, but is not limited to:

- Schedules that determine the frequency of cleaning activities on a daily, weekly or monthly timetable, by area of the facility.
- Supervision of the staff and inmates to ensure proper implementation of the procedures and to ensure that no inmate supervises or assigns work to another inmate.
- Development and implementation of an overall sanitation plan (e.g., cleaning, maintenance, inspection, staff training, inmate supervision).
- All inmate responsibilities, which should be included in the inmate handbook.
- A process to ensure that deficiencies identified during inspections are satisfactorily corrected and documented.
- Detailed processes for the procurement, storage and inventory of cleaning supplies and equipment.
- A process for the preventive maintenance of equipment and systems throughout the facility.
- Staff supervision of the provision and use of cleaning tools and supplies.

To the extent possible, cleaning and janitorial supplies shall be nontoxic to humans. Any poisonous, caustic or otherwise harmful substances used for cleaning shall be clearly labeled and kept in a locked storage area.

## 804.3 SANITATION SCHEDULE

A daily, weekly and monthly cleaning schedule will be established by the housing unit supervisor. The facility staff should implement a site specific plan for cleaning and maintenance of each area of the jail (e.g., housing, food preparation, laundry, loading dock/trash storage, common areas). The following recommendations include, but are not limited to, specific areas and items:

- (a) Daily cleaning:
  1. Sweep and then wet mop the entire jail floor
  2. Clean all cell block areas
  3. Empty all trash receptacles
  4. Clean all toilets and sinks

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5. Clean all showers
- (b) Weekly cleaning:
  1. Dust window ledges
  2. Clean air conditioning/heating grates
  3. Clean mattresses (mattresses are also to be cleaned prior to being issued to a new inmate)
  4. Pour water down floor drains to test for flow
- (c) Monthly cleaning:
  1. Walls
  2. Ceilings
  3. Bunk pans

#### **804.4 TRAINING**

All custodial staff and inmate workers assigned cleaning duties shall receive instruction commensurate with their tasks, including proper cleaning techniques, the safe use of cleaning chemicals and areas of responsibility.

#### **804.5 INSPECTION CHECKLIST**

The Jail Chief Deputy or the authorized designee should develop an inspection checklist that includes the cleaning and maintenance items that will be checked by supervisors on a daily, weekly and monthly basis throughout the facility.

The inspection checklist will closely correspond to the established cleaning and maintenance schedule.

Inspection checklists shall be forwarded to the Jail Chief Deputy or the authorized designee for annual review, filing and retention as required by the established records retention schedule.

## Physical Plant Compliance with Codes

### 806.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the timeline, process and responsibilities for facility maintenance, inspections and equipment testing in compliance with all applicable federal, state and local building codes.

### 806.2 POLICY

It is the policy of this department 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 Jail Chief Deputy shall be responsible for establishing and monitoring the facility maintenance schedule, the inspection schedules of the Shift Supervisors and corrections deputies, and ensuring that any deficiencies discovered are corrected in a timely manner.

The County 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/or 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:

- Admissions
- Food services
- Inmate housing
- Laundry

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- 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 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 Mason 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 water standards set by law, this facility will ensure the continued supply of safe potable water for the use of inmates, staff and visitors through annual testing of water supplies.

### **808.3 PROCEDURE**

The Jail Chief Deputy shall ensure that the facility's potable water source is tested by an independent public or private testing service at least once each year. Water quality will be certified to be in compliance with all state and local regulations. Corrective measures shall be promptly taken if the test results fall below acceptable regulatory standards.

In the event that water testing reveals any significant hazards to the inmates or staff at the facility, the Sheriff, Jail Chief Deputy and the Responsible Physician 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 (WAC 44-14-03005).

Where the facility's water supply is obtained from a private source, the source shall be properly located, constructed and operated to protect it from contamination and pollution and the water shall meet all current standards set by the applicable state and/or local authority regarding bacteriological, chemical and physical tests for purity.

For facilities not served by a public or regulated private water supply, the water should be tested daily by the local authority within the facility's jurisdiction.

### **808.4 EMERGENCY PLAN**

The Jail Chief Deputy and the Responsible Physician 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 department that vermin and pests be controlled within the facility. The Jail Chief Deputy or the authorized designee shall be responsible for developing and implementing this policy, in cooperation with the Responsible Physician and the local public health entity, for the sanitation and control of vermin and pests and to establish medical protocols for treating inmate clothing, personal effects and living areas, with specific guidelines for treating an infested inmate.

## 810.3 PREVENTION AND CONTROL

Many infestations and infections are the result of a recently admitted inmate who is vermin infested or whose property is vermin infested. Most infestations are spread by direct contact with an infected person or with infested clothing and bedding. Inmates with lice or mites should be treated with approved pediculicides as soon as the infestation is identified to avoid spreading it. To reduce the chance of further transmission, separate quarters for inmates undergoing treatment for lice should be used as described in the Communicable Diseases Policy.

Because the use of the treatment chemicals can cause allergic reactions and other negative effects, treatment should be done only when an infestation is identified and not as a matter of routine.

Clothing, bedding and other property that is suspected of being infested shall either be removed from the facility or cleaned and treated by the following methods, as appropriate or as directed by the pest control provider or the Responsible Physician:

- Washing in water at 140 degrees for 20 minutes
- Tumbling in a clothes dryer at 140 degrees for 20 minutes
- Dry cleaning
- Storing in sealed plastic bags for 30 days
- Treating with an insecticide specifically labeled for this purpose

Head lice and their eggs are generally found on the head hairs. There may be some uncertainty about the effectiveness of some available pediculicides to kill the eggs of head lice. Therefore some products recommend a second treatment seven to 10 days after the first. During the interim, before the second application, eggs of head lice could hatch and there is a possibility that lice could be transmitted to others.



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Pubic lice and their eggs are generally found on the hairs of the pubic area and adjacent hairy parts of the body, although they can occur on almost any hairy part of the body, including the hair under the arm and on the eyelashes.

Pubic lice and their eggs are generally successfully treated by the available pediculicides. However, when the eyelashes are infested with pubic lice and their eggs, a physician should perform the treatment.

Successful treatment depends on careful inspection of the inmate and proper application of the appropriate product. The area used to delouse inmates needs to be separate from the rest of the facility. All of the surfaces in the treatment area must be sanitized. There must be a shower as part of the delousing area.

The supervisor shall document the date of treatment, the area treated, the pest treated and the treatment used.

# Inmate Safety

## 812.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a safety program to reduce inmate injuries by analyzing causes of injuries and identifying and implementing corrective measures.

## 812.2 POLICY

The Mason County Sheriff's Office will provide a safe environment for individuals confined at this facility, in accordance with all applicable laws, by establishing an effective safety program, investigating inmate injuries and taking corrective actions as necessary to reduce accidents and injury.

The Sheriff shall appoint a staff member who will be responsible for the development, implementation and oversight of the safety program. This program will include, but not be limited to:

- A system to identify and evaluate hazards, including scheduled inspections to identify unsafe conditions.
- Analysis of inmate injury reports to identify causes and to recommend corrective actions.
- Establishment of methods and procedures to correct unsafe and/or unhealthful conditions and work practices in a timely manner.

## 812.3 INVESTIGATION OF REPORTED INMATE INJURY

Whenever there is a report of an injury to an inmate that is the result of accidental or intentional acts, other than an authorized use of force by custody staff, the Sheriff or the authorized designee will initiate an investigation to determine the cause of the injury and develop a plan of action whenever a deficiency is identified. Injuries resulting from use of force incidents will be investigated and reported in accordance with the Use of Force Policy.

## 812.4 INVESTIGATION REPORTS

The Shift Supervisor shall ensure that reports relating to an inmate's injury are completed and should include the following:

- Incident reports
- Investigative reports
- Health record entries
- Any other relevant documents

## 812.5 ANNUAL REVIEWS

The Sheriff or the authorized designee shall conduct an annual review of all injuries involving inmates for the purpose of identifying problem areas and documenting a plan of action to abate circumstances relating to inmate injuries.

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The plan of action should include, but not be limited to:

- The area where the deficiencies have been identified.
- Strategies to abate the deficiency.
- Resources needed to correct a deficiency.
- The person or persons responsible for taking corrective action and the target completion date.

The Sheriff shall consult with the County risk manager to coordinate corrective action or to seek managerial/administrative guidance for implementing corrective action.

# Inmate Hygiene

## 814.1 PURPOSE AND SCOPE

This policy outlines the procedures that will be taken to ensure the personal hygiene of every inmate in the Mason County Sheriff's Office jail is maintained. The Mason County Sheriff's Office recognizes the importance of each inmate maintaining acceptable personal hygiene practices by providing adequate bathing facilities, hair care services, and the issuance and exchange of clothing, bedding, linens, towels, and other necessary personal hygiene items.

## 814.2 POLICY

It is the policy of the Mason County Sheriff's Office to maintain a high standard of hygiene in compliance with the requirements established by all state laws, ordinances, and regulations. Compliance with laws and regulations relating to good inmate hygiene practice is closely linked with good sanitation practices. Therefore, the need to maintain a high level of hygiene is not only for the protection of all inmates, but for the safety of the correctional staff, volunteers, contractors, and visitors.

## 814.3 STORAGE SPACE

There should be adequate and appropriate storage space for inmates' bedding, linen, or clothing. The inventory of clothing, bedding, linen, and towels should exceed the maximum inmate population so that a reserve is always available.

The facility should have clothing, bedding, personal hygiene items, cleaning supplies, and any other items required for the daily operation of the facility, including the exchange or disposal of soiled or depleted items. The assigned staff shall ensure that the storage areas are properly maintained and stocked. The Jail Chief Deputy should be notified if additional storage space is needed.

### 814.3.1 BEDDING ISSUE

Upon entering a living area of the Mason County Jail, every inmate who is expected to remain in the facility for over eight hours shall be issued bedding and linens including, but not limited to:

- (a) Two (2) Sufficient freshly laundered blankets to provide comfort under existing temperature conditions. Blankets shall be exchanged and laundered two times a month.
- (b) One clean, firm, fire-retardant mattress.
  - 1. Mattresses will be serviceable, fire-retardant and enclosed in an easily cleanable, non-absorbable material. Mattresses will be cleaned and disinfected when an inmate is released.
- (c) One clean bath towel.

Linen exchange, including towels, shall occur at least weekly and shall be documented in the daily activity log. The Shift Supervisor shall review the daily activity log at least once per shift.

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The Jail Chief Deputy or the authorized designee shall conduct both scheduled and unannounced inspections of the facility to ensure bedding issuance policies and procedures are carried out in accordance with the applicable laws and regulations.

#### **814.3.2 CLOTHING ISSUE**

An inmate admitted to a facility and assigned to a living unit shall be issued a set of facility clothing. The issue of clothing appropriate to the climate for inmates shall include, but not be limited to:

- 1 clean uniform shirt
- 1 clean pair of uniform pants
- 1 pair of shower sandals

An inmate who is issued a change of clothing upon admission to the facility may keep his/her socks, underwear, and braiers while in custody. Underpants and Bras (without underwires) may be any color. Personal undergarments and pairs of socks are limited to 3 of each. Personal undergarments shall be laundered twice each week. Uniforms shall be laundered once per week. All exchanges shall be documented on the daily activity log. The Shift Supervisor or unit supervisor shall review the daily activity log at least once per shift.

Additional clothing may be issued as necessary for changing weather conditions or as seasonally appropriate. An inmate's personal undergarments and footwear may be substituted for the institutional undergarments and footwear, provided there is a legitimate medical necessity for the items and they are approved by the medical staff.

Each inmate assigned to a special work area, such as food service, 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 and shall be exchanged as frequently as the work assignment requires.

The Jail Chief Deputy or the authorized designee shall conduct both scheduled and unannounced inspections of the facility to ensure clothing issuance policies and procedures are carried out in accordance with the applicable laws and regulations.

The Jail Chief Deputy or the authorized designee shall ensure the facility maintains a sufficient inventory of extra clothing to ensure each inmate shall have neat and clean clothing appropriate to the season.

All inmate personal property shall be properly identified, inventoried and secured. Inmates shall sign and receive a copy of the inventory record upon release.

#### **814.4 LAUNDRY SERVICES**

Laundry services shall be managed so that daily clothing, linen, and bedding needs are met.

#### **814.5 INMATE ACCOUNTABILITY**

To ensure inmate accountability, inmates are required to exchange item for item when clean clothing, bedding, and linen exchange occurs.

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Prior to being placed in a housing unit, inmates shall be provided with an inmate handbook listing this requirement.

#### **814.6 PERSONAL HYGIENE OF INMATES**

Personal hygiene items, bedding, clothing, hair care services and facilities for showers will be provided in accordance with applicable laws and regulations. This is to maintain a standard of hygiene among inmates in compliance with the requirements established by state laws as part of a healthy living environment.

Each inmate held more than 24 hours shall be offered from the indigent commissary, at a minimum, the following items:

- One bar of bath soap or equivalent
- One unbreakable comb or brush
- Toothpaste or powder
- Toothbrush
- Deodorant
- Materials as appropriate to the special hygiene needs of women

The Jail Chief Deputy or the authorized designee may modify this list to accommodate the use of liquid soap and shampoo dispensers. Personal hygiene items should be appropriate for the inmate's sex. The facility shall replenish supplies as requested. Indigent inmates shall receive personal hygiene supplies once a week.

Inmates shall not be required to share personal care items or disposable razors. 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 state governing body overseeing such practices.

Inmates, except those who may not shave for reasons of identification in court, shall be allowed to shave twice a week. The Jail Chief Deputy or the authorized designee may suspend this requirement for any inmate who is considered a danger to him/herself or others.

#### **814.7 BARBER AND COSMETOLOGY SERVICES**

The Jail Chief Deputy or the authorized designee shall be responsible for developing and maintaining a schedule for hair care services provided to the inmate population and will have written policies and procedures for accessing these services (see the Grooming Policy). The Jail Chief Deputy shall ensure that the rules are included in the inmate handbook.

##### **814.7.1 SCHEDULE FOR HAIR CARE SERVICES**

Inmates shall have the ability to receive hair care services once per month. Records of hair care services shall be documented.

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Prior to being placed in a housing unit, inmates will be given an inmate 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 where the floors, walls, cabinets, countertops, and ceilings should be smooth, nonabsorbent, and easily cleanable. The room should be supplied with a hand washing sink with hot and cold water under pressure. The minimum hot water temperature must comply with local building and health department standards.

After each haircut, all tools that came into contact with the inmate shall be thoroughly cleaned and sanitized according to established guidelines and regulations.

Single-use items, such as cotton pads and neck strips, shall be properly disposed of immediately after a single use.

Barbers or beauticians shall not provide hair care service to any inmate when the skin of the face, neck, or scalp is inflamed, or when there is scaling, pus, or other evidence of skin eruptions, unless it is performed in accordance with the specific written authorization of the Responsible Physician. 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**

Inmates confined to cells or sleeping areas shall have access to toilets and washbasins with hot and cold running water that is temperature controlled. Access shall be available at all hours of the day and night without staff assistance.

The minimum number of plumbing fixtures provided for inmates in housing units is:

- One sink/washbasin for every 12 inmates.
- One toilet to every 12 male inmates (urinals may be provided for up to half the toilets).
- One toilet to every eight female inmates.

##### **814.9 INMATE SHOWERS**

Inmates will be allowed to shower upon assignment to a housing unit and every other day thereafter or more often if possible. There should be one shower for every 20 inmates unless federal, state, or local building or health codes differ. Showering facilities for inmates housed at this facility shall be clean and properly maintained. Water temperature shall be periodically measured to ensure a range of 100 to 120 degrees for the safety of inmates and staff, and shall be recorded and maintained.

Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates (28 CFR 115.42).

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##### **814.10 DELOUSING MATERIALS**

Delousing materials and procedures shall be approved through consultation with the Responsible Physician or qualified health care professionals.

##### **814.11 RESPONSIBILITIES**

The Jail Chief Deputy shall ensure the basic necessities related to personal care are provided to each inmate upon entry into the general population. Appropriate additional personal care items may be available for purchase from the inmate commissary.

##### **814.12 ADDITIONAL PRIVACY REQUIREMENTS**

Inmates shall be permitted to shower, perform bodily functions, and change clothing without non-medical staff of the opposite sex viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Staff of the opposite sex shall announce their presence when entering an inmate housing unit (28 CFR 115.15).



## **Chapter 9 - Food Services**

## Food Services

### 900.1 PURPOSE AND SCOPE

The Department recognizes the importance of providing nutritious food and services to inmates to promote good health, to reduce tension in the jail and ultimately support the safety and security of the jail. This policy provides guidelines on the preparation of food services items and dietary considerations for inmates housed in the facility.

### 900.2 POLICY

It is the policy of this department food services shall provide inmates with a nutritionally balanced diet in accordance with federal, state and local laws, and with regulations for daily nutritional requirements.

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.

### 900.3 FOOD SERVICES MANAGER

The food services manager shall be responsible for oversight of the day-to-day management and operation of the food services area, including:

- Developing, implementing and managing a budget for food services.
- Ensuring sufficient staff is assigned and scheduled to efficiently and safely carry out all functions of food services operations.
- Establishing, developing and coordinating appropriate training for staff and inmate workers.
- Developing a menu plan that meets all nutrition and portion requirements and can be produced within the available budget.
- Other duties and activities as determined by the Jail Chief Deputy.

### 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.

Any changes to the meal schedule, menu or practices should be carefully evaluated by the food services manager in consultation with the Jail Chief Deputy, dietician, medical staff and other professionals, and shall be recorded. All substitutions will be of equal or better nutritional value. If

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any meal served varies from the planned menu, the change shall be noted in writing on the menu and/or production sheet.

Menus as planned, including changes, shall be evaluated by a registered dietitian at least annually. 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 (WAC 44-14-03005).

#### **900.5 FOOD SAFETY**

Temperatures in food storage areas should be checked and recorded at the beginning of each shift, but shall be checked and recorded at least once daily. Holding temperatures for cold and hot foods shall be checked and recorded every two hours. Hot food shall be reheated to 165 degrees if it falls below 135 degrees at any time.

All reach-in or walk-in refrigerators and cold storage must maintain food temperature below 41 degrees. All freezers, other than during the defrosting cycle, must maintain a temperature of 0 degrees or lower.

One sample for each meal served shall be dated and maintained under refrigeration for testing in the event of a food-borne illness outbreak. Sample meals shall be discarded at the end of three days if no food-borne illness is reported.

Food production shall be stopped immediately if there is any sewage backup in the preparation area or if there is no warm water available for washing hands. Food production shall not resume until these conditions have been corrected.

#### **900.6 THERAPEUTIC DIETS**

The food services manager shall be responsible for ensuring inmates who have been prescribed therapeutic diets by qualified health care professionals are provided with compliant meals. A therapeutic diet manual, which includes samples of medical diets, shall be maintained in the health services and food services areas for reference and information.

More complete information may be found in the Prescribed Therapeutic Diets Policy.

Women who are known to be pregnant or lactating shall be provided a balanced, nutritious diet approved by a physician.

#### **900.7 RELIGIOUS DIETS**

The Food Services Manager, to the extent reasonably practicable, will provide special diets for inmates in compliance with the parameters of the Religious Programs Policy and the Religious Land Use and Institutionalized Persons Act (RLUIPA).

When religious diets are provided, they shall conform to the nutritional and caloric requirements for non-religious diets.

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##### **900.8 FOOD SERVICES REQUIREMENTS**

All reasonable efforts shall be made to protect inmates from food-borne illness. Food services staff shall adhere to sanitation and food storage practices and there shall be proper medical screening and clearance of all food handlers in accordance with the Food Services Workers' Health, Safety and Supervision Policy.

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.

##### **900.9 MEAL SERVICE PROCEDURE**

Inmate meals that are served in a dining room or day room should be provided in space allowing groups of inmates to dine together, with a minimum of 15 square feet of space per inmate. A dining area shall not contain toilets or showers in the same room without appropriate visual barriers.

Meals shall be served at least three times during each 24-hour period. At least one meal must include hot food. Any deviation from this requirement shall be subject to the review and approval of a registered dietitian to ensure that inmates receive meals that meet nutritional guidelines.

Inmates must be provided a minimum of 15 minutes dining time for each meal. There must be no more than 14 hours between a substantial evening meal and breakfast. A substantial evening meal is classified as a serving of three or more menu items at one time to include a high quality protein, such as meat, fish, eggs or cheese. The meal shall represent no less than 20 percent of the day's total nutrition requirements. If more than 14 hours pass between meals, approved snacks will be provided. If a nourishing snack is provided at bedtime, up to 16 hours may elapse between the substantial evening meal and breakfast. A nourishing snack is classified as a combination of two or more food items from two of the four food groups, such as cheese and crackers or fresh fruit and cottage cheese.

Inmates who miss, or may miss, a regularly scheduled meal must be provided with a beverage and a sandwich or substitute meal. Approved snacks should be served to inmates on medical diets in less than the 14-hour period if prescribed by the Responsible Physician or registered dietitian. Inmates on medical or therapeutic meals who miss their regularly scheduled meal will be provided with their prescribed meal.

As the mealtime approaches, facility staff should direct the inmates to get dressed and be ready for meals. Inmates should be assembled and a head count taken, to verify all inmates in the housing location are present. Staff should be alert to signs of injury or indications of altercations, and should investigate any such signs accordingly. Staff should remain alert to the potential for altercation during inmate movement and meals. Meals shall be served under the direct supervision of staff.

Staff should direct an orderly filing of inmates to the dining room or assigned seating in the day room. Staff should identify inmates who have prescribed therapeutic or authorized religious diets so those inmates receive their meals accordingly.

It shall be the responsibility of the corrections deputies to maintain order and enforce rules prohibiting excessive noise and intimidation of other inmates to relinquish food during mealtime.

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The dining room shall have an area designated for inmates who have been prescribed a longer time to eat by a qualified health care professional, a dietitian or as deemed appropriate by a supervisor.

To the extent reasonably practical, an adequate number of food services staff and correctional personnel should supervise feeding in central dining areas. If reasonably possible, the supervisor should be present.

The Shift Supervisor should make every attempt to be present during meal services in central dining areas to assess the meal services process, the quality of food and any health or security issues.

In the interest of security, sanitation and vermin control, inmates shall not be allowed to take food from the dining area to their housing areas.

#### **900.10 EMERGENCY MEAL SERVICE PLAN**

The food services manager shall establish and maintain an emergency meal service plan for the facility.

Such a plan should ensure there is at least a seven-day supply of food maintained in storage for inmates. In the event of an emergency which precludes the preparation of at least one hot meal per day, the Jail Chief Deputy may declare an "Emergency Suspension of Standards" for the period of time the emergency exists.

During an emergency suspension, the food services manager shall assign a registered dietitian to ensure minimum nutritional and caloric requirements are met.

In the event the inmate food supply drops below which is needed to provide meals for two days, the Jail Chief Deputy 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 inmate workers in the food services areas by developing and implementing a comprehensive training program in the use of equipment and safety procedures.

### 902.2 POLICY

The Mason County Sheriff's Office ensures a safe and sanitary environment is maintained for the storage and preparation of meals through the appropriate training of food services staff and inmate workers.

### 902.3 TRAINING

The food services manager, under the direction of the Jail Chief Deputy, is responsible for ensuring a training curriculum is developed and implemented in the use of equipment and safety procedures for all food services personnel, including staff, contractors and inmate workers.

The training shall include, at minimum:

- (a) Work safety practices and use of safety equipment.
- (b) Sanitation in the facility's food services areas.
- (c) Reducing risks associated with operating machinery.
- (d) Proper use of chemicals in food services areas.
- (e) Employing safe practices.
- (f) Facility emergency procedures.

A statement describing the duties and proper time schedule should be developed for each job function in the facility's kitchen and food services operation. The food services manager, at the direction of the Jail Chief Deputy, should establish an employee/kitchen worker training course, and all staff or inmate workers shall be trained on how to assemble, operate, clean and sanitize kitchen equipment.

Information about the operation, cleaning and care of equipment, including manufacturer's literature, that is suitable for use as reference material shall be kept in the food services operation area. The reference material should be used in developing training on the use of the equipment and the maintenance and cleaning procedures.

Safety and sanitation shall be the primary consideration in equipment purchase and replacement. Placement and installation of equipment must be carefully planned to facilitate cleaning, sanitizing, service and repairs. The equipment must also meet any applicable government codes.

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##### **902.4 TESTING**

The contractor should develop a test to determine and document the food services worker understands the proper procedures demonstrated during training. Food services workers are required to pass the test in order to work in the food services area. Upon achievement of a passing score, the food services worker shall acknowledge receipt of the training in writing. The signed document shall be forwarded to the Training Supervisor 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 the nutritional needs of the inmates are met and 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 publication of 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 menus served by food services comply with the DGA guidelines. Any deviation from the DGA guidelines shall be reviewed by the Sheriff and/or Jail Chief Deputy and the Responsible Physician.

The food services manager or the authorized designee shall ensure the facility's menus and dietary allowances are evaluated annually by a registered dietitian, and changes meet the DGA guidelines. A registered dietitian must approve menus before they are used.

Menus should be evaluated at least quarterly by food services supervisory staff to verify adherence to the established daily serving requirements.

### 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. Any menu substitutions must use better or similar items. The planning and preparation of all meals should consider the overall palatability of the planned meal including the appearance and temperature of the food, and the flavor and texture of food combinations.

Menus should include the following minimum food group allowances:

- (a) Dairy Group: Three servings of fatfree or lowfat milk or food providing at least 250 mg. of calcium and equivalent to 8 ounces of fluid milk. Four servings for juveniles 15-17 years of age or women who are pregnant or lactating.
- (b) Vegetable-Fruit Group: Five servings of fruits and vegetables. At least one serving shall be from each of the following three categories:
  - 1. One serving of a fresh fruit or vegetable.
  - 2. One serving of a Vitamin A source, fruit or vegetable, containing at least 200 micrograms retinol equivalents or more.
  - 3. One serving of a Vitamin C source containing at least 30 mg. or more.



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- (c) Grain Group: A minimum of six servings of grains, three of which must be made with some 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. In addition, a fourth serving from the legumes category shall be served three days a week.
- (e) Total dietary fat should not exceed 30 percent of the total calories on a weekly basis. Fat shall be added only in minimum amounts necessary to make the diet palatable.

Providing only the minimum servings outlined in the requirements above is not sufficient to meet the caloric requirements of an inmate. Additional servings of dairy, vegetable-fruit and grain groups must be provided in amounts to meet caloric requirements.

# Food Services Workers' 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 food services workers and to ensure the proper supervision of food services staff and inmate workers.

## 906.2 POLICY

The Mason County Sheriff's Office will assure meals are nutritionally balanced, safe and prepared and served in accordance with applicable health and safety laws. All inmate food services workers will be properly supervised by custody staff to assure safety and security at all times.

## 906.3 FOOD SERVICES MANAGER RESPONSIBILITIES

The food services manager is responsible for developing and implementing procedures to ensure that all meals are prepared, delivered and served only under direct supervision by staff.

Work assignments shall be developed to ensure that sufficient food services staff is available to supervise inmate food services workers. The food services manager should coordinate with the corrections supervisor to ensure that sufficient correctional staff is available to supervise inmate meal service.

The food preparation area must remain clean and sanitary at all times. The food services manager or the authorized designee shall post daily, weekly and monthly cleaning schedules for the equipment and food preparation area.

## 906.4 MEDICAL SCREENING

The food services manager shall work cooperatively with the Responsible Physician to develop procedures to minimize the potential for spreading contagious disease and food-borne illness. In an effort to prevent the spread of illness, the following shall be strictly observed:

- (a) All food services workers shall have a pre-employment/pre-assignment medical examination, in accordance with local requirements, to ensure freedom from diarrhea, skin infections and other illnesses transmissible by food or utensils.
- (b) Periodic reexaminations of food services workers shall be given to ensure freedom from any disease transmissible by food or utensils.
- (c) Food services workers shall have education and ongoing monitoring in accordance with the standards set forth in the applicable government health and safety codes.
- (d) A supervisor shall inspect and monitor all persons working in any food services area on a daily basis for health and cleanliness, and shall remove anyone exhibiting any signs of food-transmissible disease from any food services area.

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- (e) Any person working in any food services area who is diagnosed by a qualified health care professional with a contagious illness should be excluded from the food services areas until medically cleared to return to work.
- (f) All food handlers shall wash their hands when reporting for duty and after using toilet facilities. Aprons shall be removed and secured in a clean storage area before entering the toilet facility.
- (g) Food services workers shall wear disposable plastic gloves and a protective hair covering, such as a hat or hairnet, when handling or serving food. Gloves shall be changed after each task is completed.
- (h) Any outside vendor must submit evidence of compliance with state and local regulations regarding food safety practices.
- (i) Smoking at any time is prohibited in any food services area (RCW 70.160.030).
- (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 (WAC 44-14-03005).
- (k) All food services workers shall report to a supervisor any information about their health and activities in accordance with health and safety codes as they relate to diseases that are transmittable through food, (e.g., open sores, runny nose, sore throat, cough, vomiting, diarrhea, fever, recent exposure to contagious diseases such as Hepatitis A or tuberculosis).

Any food services worker is prohibited from handling food or working in any food services area if he/she reports symptoms such as vomiting, diarrhea, jaundice, sore throat with fever or has a lesion containing pus, such as a boil or infected wound that is open or draining. Food service workers shall only return to work in food service areas when cleared by a qualified health care professional.

#### **906.5 TRAINING REQUIREMENTS FOR FOOD SERVICES WORKERS**

The food services manager is responsible for developing and implementing a training program for inmate food services including food safety, proper food-handling techniques and personal hygiene. Each inmate food services worker shall satisfactorily complete the initial training prior to being assigned to prepare, deliver or serve food. Food services workers should receive periodic supplemental training as determined by the food services manager.

The training curriculum for inmate food services workers should include, at minimum, the following topics:

- Proper hand-washing techniques and personal hygiene as it applies to food services work
- Proper application and rotation of gloves when handling food

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- Proper use of protective hair coverings, such as hats or hairnets
- Wearing clean aprons and removing aprons prior to entering toilet facilities
- Maintaining proper cooking and holding temperatures for food
- Proper portioning and serving of food
- Covering coughs and sneezes to reduce the risk of food-borne illness transmission
- Reporting illness, cuts or sores to the custody staff in charge

#### **906.6 SUPERVISION OF INMATE WORKERS**

Only personnel authorized to work in the food preparation area will be allowed inside. Inmate food handlers working in the kitchen must be under the supervision of a staff member. The Jail Chief Deputy will appoint at least one qualified staff member, who will be responsible for the oversight of daily activities and ensuring food safety. The appointed staff member must be certified by passing the American National Standards Institute food safety manager certification examination.

Sufficient custody staff shall be assigned to supervise and closely monitor inmate food services workers. Staff shall ensure inmate food services workers do not misuse or misappropriate tools or utensils, and 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 inmate population has confidence in the safety and quality of their food. Custody staff should supervise the transport and delivery of food to the respective serving areas. Custody staff should ensure the food is protected during transportation, delivered to the right location efficiently and under the right temperatures.

Food services staff should report any suspected breach in the safety or security of the food supply. Staff should be alert to inmate behavior when serving food, and cognizant of any comments concerning perceived contamination or portioning issues. Staff should report any suspicion of inmate unrest to a supervisor.

Any change to the published menu or the standard portioning should be documented and reported to the food services manager as soon as practicable.

## Food Preparation Areas

### 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 Jail Chief Deputy is responsible for ensuring food preparation and service areas are in compliance with all applicable laws and regulations and food preparation areas are sanitary, well lit, ventilated and have adequate temperature-controlled storage for food supplies.

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.

The food preparation area must avoid cross contamination and remain free from vermin infestation.

### 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.

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 service.

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.

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.

Lighting throughout the kitchen and storage areas shall be sufficient for staff and inmates to perform necessary tasks.

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.

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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.

Dishwashing machines will operate in accordance with the manufacturer recommendations and hot water temperatures will comply with federal, state and local health requirements.

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. All food must be stored in sealed containers and a minimum of 6 inches off the floor.

#### **908.5 TOILETS AND WASHBASINS**

Adequate toilet and washbasin facilities shall be located in the vicinity of the food preparation area for convenient sanitation and proper hygiene. Toilet facilities shall be completely enclosed and shall have tight-fitting, self-closing, solid doors, which shall be closed except during cleaning and maintenance.

Signs shall be conspicuously posted throughout the food preparation area and in each restroom informing all food services staff and inmate workers to wash their hands after using the restroom. Signs shall be printed in English and in other languages as may be dictated by the demographic of the inmate population.

To reduce the potential for contaminants being brought into the food preparation area, toilet facilities in the vicinity of the food preparation area should be limited to use by the food services staff and inmate workers only. Anyone working in the food services area must store their aprons in a designated clean area before entering the toilet facilities.

The food services manager shall be responsible for procedures to ensure:

- (a) All fixtures in the toilet facilities are clean and in good operating condition.
- (b) A supply of toilet tissue is maintained at each toilet at all times. Toilet facilities used by women shall have at least one covered waste receptacle.
- (c) The hand-washing station located adjacent to the toilet facility has warm water available and is kept clean and in good operating condition. Single-dispensing soap and a method for drying hands shall be provided at all times.

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 which 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 Mason County Sheriff's Office food services facilities shall serve nutritious meals in an efficient and cost-effective manner in accordance with the Washington State Department of Health and with all other applicable laws and standards.

### 910.3 FOOD SERVICES MANAGER RESPONSIBILITIES

The food services manager is responsible for establishing a per meal, per inmate budget for food, equipment and supplies needed for the effective operation of the facility food services. This includes monitoring purchases according to the budgeted weekly and monthly spending plans.

The volume for purchasing should be based upon the food services needs and storage availability. The food services manager is responsible for establishing and maintaining detailed records and proper accounting procedures, and should be prepared to justify all expenditures and establish future budget requirements.

### 910.4 PROCEDURE

The food services manager is responsible for ensuring food services are delivered in an efficient and cost-effective manner by employing the following procedures, including, but not limited to:

- (a) Developing an annual budget realistically calculated according to previous spending data and available revenue, and lists all anticipated costs for the food services operation for the coming year.
- (b) Establishing a per meal, per inmate cost using an inventory of existing supplies and planned purchases, minus the anticipated ending inventory.
- (c) Ensuring accurate meal record data is collected and maintained. Meal records should include, but not be limited to, the date and time of service and the number of:
  1. Meals prepared and served for each meal period.
  2. Meals served per location.
  3. Prescribed therapeutic diet meals served.
  4. Authorized religious diet meals served.
  5. Authorized disciplinary detention diet meals served.
- (d) Ensuring food is purchased from an approved wholesale/institutional vendor to ensure food safety.

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- (e) Bulk-purchasing nonperishable items to maximize the budget dollars.
- (f) Continuous monitoring and improvement to minimize poor food management and/or accounting, including, but not limited to:
  - 1. Following planned menus.
  - 2. Inspection of food deliveries to ensure the right quantity is delivered and the condition of the food is acceptable.
  - 3. Purchasing food in season.
  - 4. Purchasing the grade of product best suited to the recipe.
  - 5. Following standard recipes.
  - 6. Producing and portioning only what is needed.
  - 7. Minimizing food production waste and establishing appropriate food storage and rotation practices, including proper refrigeration.
  - 8. When reasonably practicable, responding to the inmate's food preferences.
  - 9. Establishing minimum staffing requirements based on the layout and security requirements of the facility.
  - 10. Budgeting adequately for equipment repair and replacement, factoring in any labor cost savings, the need for heavy-duty equipment with corrections packages for safety and inmate abuse.
- (g) Establishing purchasing specifications, which are statements of minimum quality standards and other factors, such as quantity and packaging. A basic specification should contain:
  - 1. The common name of the product.
  - 2. The amount to be purchased.
  - 3. The trade, federal or other grade or brand required.
  - 4. The container size and either an exact, or a range of the number of pieces in a shipping container.
  - 5. The unit on which prices are to be quoted ( e.g., 6/#10 cans, 10/gallons).
- (h) Establishing accounting procedures for financial statements and inventory control.
- (i) Maintaining records of invoices, purchase orders, meal count sheets, food production records, therapeutic and religious diet records, inventory of food, supplies and equipment for the required period of time, as mandated by the governing body of the facility.



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##### **910.5 MONTHLY REPORTING**

The food services manager is responsible for ensuring accurate meal record data is collected and maintained. Meal records should include, but not be limited to, the number of:

- (a) Meals prepared and served for each meal period.
- (b) Meals served per location.
- (c) Prescribed therapeutic diet meals served.
- (d) Authorized religious diet meals served.
- (e) Authorized disciplinary diet meals served.

A monthly report summarizing data should be provided to the Jail Chief Deputy.

All meal records shall be retained in accordance with office retention schedules and state statutory regulations (WAC 44-14-03005).

# Inspection of Food Products

## 912.1 PURPOSE AND SCOPE

The purpose of this policy is to establish methods by which the Food and Drug Administration (FDA) and/or the United States Department of Agriculture (USDA) inspections and/or approvals are conducted on any food products grown or produced within the jail system.

## 912.2 POLICY

The Mason County Sheriff's Office will ensure the safety and quality of all food products grown or produced at this facility through routine inspections and approvals, as required by law.

### 912.2.1 FOOD INSPECTION PROCEDURES

The food services manager is responsible for developing procedures for ensuring food used in the food services operation has been inspected and/or approved to standards established by statute and that the delivery of all foodstuffs to the jail kitchens and to the inmates occurs promptly to reduce the risk of any food-borne illness or contamination.

The food services manager shall establish inspection procedures in accordance with established standards and statutes. Such procedures shall include, but are not limited to:

- (a) The FDA or USDA inspection and/or approval of all food products grown or produced by this facility prior to distribution.
- (b) A system of periodic audits and inspections of the facility and of all raw material suppliers, either by custody staff or by a third-party vendor.
- (c) A system of thorough documentation of all inspection and approval processes, training activities, raw material handling procedures, activities, cleaning and sanitation activities, cleanliness testing, correction efforts, record-keeping practices and the proper use of sign-off logs shall be developed and implemented.
- (d) Processes of evaluating the effectiveness of training, and validating cleanliness through testing (e.g., swabs, bioluminescence and visual, taste and odor evaluations) shall be created and implemented. Records of all such activities shall be documented.
- (e) Documentation of any recommendations for continuous quality improvement and their implementation, with the intent of eliminating deficiencies. Documentation should include a post-deployment verification of the correction.
- (f) The food services manager is responsible for ensuring adherence to the following practices, including, but not limited to:
  - 1. The scope of food products being grown or processed internally is well-defined.
  - 2. All critical processes are validated to ensure consistency and compliance with specifications.
  - 3. Any changes to the process are evaluated for effectiveness.

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4. There are clearly written instructions and procedures for the staff and inmates to follow.
5. The staff and inmates are trained to perform all established tasks and document all necessary procedures.
6. Physical barriers for separating raw and cooked food-processing areas are established and maintained.
7. The traffic flow of workers is designed to minimize the risk of any cross-contamination.
8. All drains are used and cleaned properly, within industry standards.
9. Proper equipment and/or tools are provided and designated for specific use.
10. All persons working in the food services areas are wearing proper clothing and protective devices at all times.
11. All persons working in the food services areas wash their hands properly and frequently.
12. Only authorized personnel are allowed in the food processing areas.
13. Only potable water is used for growing or washing produce.
14. The distribution of all prepared food is done in a manner that reduces the risk of food-borne illness or contamination.

## Food Services Facilities Inspection

### 914.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for inspecting food services areas and facilities to ensure a safe and sanitary environment for staff and inmates.

### 914.2 POLICY

It is the policy of the Mason County Sheriff's Office 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.

### 914.3 CLEANING AND INSPECTIONS BY STAFF

The food services manager shall ensure the dining and food preparation areas and all equipment in the food services area are inspected weekly. Adequate hot and cold water should be available in the kitchen. Water temperature of all fixtures, including washing equipment, should be checked and recorded weekly to ensure compliance with the required temperature range. Deficiencies noted by inspections shall be promptly addressed.

A cleaning schedule for each food services area shall be developed and posted for easy reference by staff, and shall include areas such as floors, walls, windows and vent hoods. Equipment, such as chairs, tables, fryers and ovens, should be grouped by frequency of cleaning as follows:

- After each use
- Each shift
- Daily
- Weekly
- Monthly
- Semi-annually
- Annually

The food services manager is responsible for establishing and maintaining a record-keeping system to document the periodic testing of sanitary conditions and safety measures, in accordance with established records retention schedules (WAC 44-14-03005). At the direction of the Jail Chief Deputy or the authorized designee, the food services manager shall take prompt action to correct any identified problems.

#### 914.3.1 SAFETY INSPECTION CHECKLIST

The following items should be part of the weekly inspection:

- Lighting is adequate and functioning properly.
- Ample working space is available.

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- Equipment is securely anchored.
- There are suitable storage facilities, minimizing the risk of falling objects.
- Floors are clean, dry, even and uncluttered.
- Machines have proper enclosures and guards.
- A clear fire safety passageway is established and maintained.
- Fire extinguishers and sprinkler systems are available, not expired and are tested regularly.
- The food preparation area has good ventilation.
- Furniture and fixtures are free from sharp corners, exposed metal and splintered wood.
- All electrical equipment is in compliance with codes and regulations.
- All workers wear safe clothing, hair coverings, gloves and protective devices while working.
- All workers are in good health, with no symptoms of illness or injury that would pose a risk to food safety.
- All ranges, ovens and hot holding equipment are clean and in good operating condition.
- Mixers and attachments are clean and in good operating condition.
- Dishwashing machines are clean and in good operating condition, and proper chemicals are in use.
- Water temperatures for hand sinks, ware washing sinks and dishwashing machines meet minimum acceptable temperatures.
- All hand-washing stations have free access, soap, nail brushes, hot and cold running water under pressure and a method to dry hands.
- Toilet facilities are in good repair and have a sufficient supply of toilet paper.
- All temperature charts and testing documents are current, accurate and periodically reviewed and verified by the food services manager.
- Only authorized personnel are allowed in the kitchen area.
- Foods are labeled and stored properly using the first-in first-out system.
- The refrigerators and freezers are in good operating condition and maintain proper temperature.
- There is no evidence of cross-connection or cross-contamination of the potable water system.

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##### **914.4 CONTRACTING FOR INSPECTION**

The food services manager is responsible for ensuring that the food services operation works in accordance with all state and local laws and regulations.

The Jail Chief Deputy shall contract with an independent, outside source for periodic inspection of the food services facilities and equipment, to ensure established state and local health and safety codes have been met.

Documentation of the inspections, findings, deficiencies, recommended corrective actions and verification the corrective standards were implemented will be maintained by the facility in accordance with established records retention schedules (WAC 44-14-03005).

A contract for services from an independent and qualified inspector should include, but is not limited to, the following components:

- (a) The inspector should conduct a pre-inspection briefing with the Jail Chief Deputy and other appropriate personnel, including the food services manager, to identify the applicable government health and safety codes and the areas to be inspected. The inspector should provide the necessary equipment to conduct the inspection.
- (b) The inspector should audit the policies and procedures of the food services operation.
- (c) During the course of the inspection, the inspector should study and report on whether the following meet acceptable standards:
  - 1. Walls, ceilings and floors are in good condition, smooth and easily cleanable.
  - 2. The kitchen layout is properly designed to avoid cross-contamination.
  - 3. The kitchen is properly lighted and ventilated.
  - 4. The temperature controlled storage areas are in good operating condition and proper temperatures are being maintained.
  - 5. Dry foods are properly stored off the floor, away from the walls and ceilings.
  - 6. There is no sign of vermin infestation.
  - 7. All equipment is properly maintained, in a sanitary condition and is certified by one of the American National Standards Institute certification agencies (e.g., Underwriters Laboratories, Extract, Transform and Load, or the National Science Foundation product certification mark).
  - 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.

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11. The food is properly stored, labeled and rotated according to first-in first-out procedures.
12. The food services staff and inmate workers are wearing clean uniforms and practice proper personal hygiene.
13. All food services workers are trained for proper food handling and there is a person in charge who is responsible for the food safety of the facility.
14. There are ample hand-washing stations supplied with warm water under pressure, soap, nail brushes, a method to dry hands, a waste container and employee hand-washing signs.

Any deficiencies should be noted by the inspector in his/her inspection report and recommendations made for corrective action.

At the exit interview the inspector should cite any violations according to the government health and safety codes.

The inspector should conduct a follow-up inspection to verify the deficiencies have been corrected as recommended.

The food services manager should provide the Jail Chief Deputy 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 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.

### 916.3 PROCEDURES

The food services manager shall be responsible for establishing procedures to ensure the safe preservation and storage of food in the most cost-effective manner, beginning with the receipt of the raw materials through the delivery of prepared meals.

When receiving food deliveries, food services staff shall inspect the order for quality and freshness and shall ensure 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 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 proper storage temperatures have not been maintained, the employee checking the order in will refuse the item and note the refusal on the invoice.

Any food destined for return to the vendor should be stored separately from any food destined for consumption. The food services manager will contact the vendor and arrange for replacement of the unacceptable food items.

Storage temperatures in food storage areas should be checked and logged on a daily basis. Records of the temperature readings should be maintained in accordance with established records retention schedules (WAC 44-14-03005).

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. Actions taken to ensure the safety of the food served should be documented and retained in accordance with established records retention schedules (WAC 44-14-03005).

### 916.4 DRY FOOD STORAGE

Canned items and dry food that does not need refrigeration should be stored in a clean, dry, secure storage area where temperatures are maintained between 45 and 80 degrees. Temperatures shall be monitored and recorded once each day on a checklist.



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All dry items shall be stored at least 6 inches off the floor and at least 6 inches away from any wall. Only full unopened cans and containers shall be stored in the storerooms. Open containers and packages shall be appropriately stored in the working or holding areas.

All storage areas will be kept locked when they are not in actual use. New food shipments shall be placed behind existing like items and rotated using a first-in first-out rotation method.

Personal clothing and personal items shall not be stored in food storage areas.

#### **916.4.1 MAINTENANCE OF DRY FOOD STORAGE AREAS**

Inmate workers or staff should clean the storage areas at least once each day by sweeping and mopping all floors and wiping down shelves and walls. Any damaged items should be inspected for spoilage and repackaged or discarded as appropriate. Food services staff should inspect the storage areas to ensure they are clean and orderly. Staff will document the inspection and record the daily temperature on the storage area checklist.

#### **916.5 REFRIGERATED AND FROZEN STORAGE**

Unless health codes dictate otherwise refrigerators must be kept between 32 and 41 degrees. Deep chill refrigerators will be set between 28 and 32 degrees for cook-chill products, dairy and meat items, to extend shelf life. Freezers shall be maintained at 32 degrees or below.

All freezer and refrigerator storage areas should have at least two thermometers to monitor temperatures. One thermometer should have a display visible to the outside. The second thermometer shall be placed in the warmest place inside the storage area. Daily temperature readings shall be recorded on the storage area checklist. Any variance outside of acceptable temperature range shall be immediately addressed.

All food must be covered and dated when stored. Cooked items shall not be stored beneath raw meats. Cleaned vegetables shall be stored separately from unwashed vegetables. Storage practices shall use a first-in first-out rotation method.

#### **916.5.1 MAINTENANCE OF REFRIGERATED AND FREEZER AREAS**

Refrigeration storage units should be cleaned daily, including mopping floors and wiping down walls. A more thorough cleaning should occur weekly to include dismantling and cleaning shelves. Food services staff should inspect the contents of freezers and storage units daily to ensure all items are properly sealed and labeled.

#### **916.5.2 STORAGE OF CLEANING SUPPLIES AND MATERIALS**

The storage of soaps, detergents, waxes, cleaning compounds, insect spray and any other toxic or poisonous materials are kept in a separate, locked storage area to prevent cross contamination with food and other kitchen supplies.

#### **916.6 WASTE MANAGEMENT**

The food services manager shall develop and maintain a waste management plan which ensures the garbage is removed daily. 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 inmates who require prescribed therapeutic diets as a result of a diagnosed medical condition are provided with nutritionally balanced therapeutic meals medically approved and meet nutritional and safety standards.

### 918.2 POLICY

The Responsible Physician, in consultation with the food services manager, shall:

- (a) Develop written procedures identifying individuals who are authorized to prescribe a therapeutic diet.
- (b) The therapeutic diets utilized by this facility shall be planned, prepared and served with consultation from a registered dietitian.
- (c) The Jail Chief Deputy shall comply with any therapeutic diet prescribed for an inmate.
- (d) The Jail Chief Deputy and the Responsible Physician shall ensure the therapeutic diet manual, which includes sample menus of therapeutic diets, shall be available in both the health services and food services work areas for reference and information. A registered dietitian shall review, and the Responsible Physician shall approve, the therapeutic diet manual on an annual basis.

As a best practice, therapeutic diet prescriptions should be reviewed and rewritten, if appropriate, on a quarterly basis. This is to reduce the risk of an inmate developing an adverse medical condition or nutritional effect as the result of a diet inconsistent with the inmate's current medical needs. A diet request form should be made available to inmates.

Pregnant or lactating women shall be provided a balanced, nutritious diet approved for pregnant women by a physician.

### 918.3 STAFF COMMUNICATION/COORDINATION

It is the responsibility of the health authority to compile a daily list of inmates who are prescribed therapeutic diets. The list should contain the following information:

- (a) Inmate's name
- (b) Inmate's identification number
- (c) Housing location or dining location where the meals will be delivered
- (d) Inmate's therapeutic diet type
- (e) Special remarks or instructions

Any time inmates are assigned to a different housing area, correctional staff must notify the food services personnel immediately.

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#### *Prescribed Therapeutic Diets*

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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 inmate medications. Individual labels or written documents containing the following information should be prepared by the kitchen, clearly identifying each meal and any included snacks:

- (a) Inmate's name
- (b) Inmate's identification number
- (c) Housing location or dining location where the meals will be delivered
- (d) Inmate's therapeutic diet type
- (e) A list of items provided for the meal

The custody staff responsible for meal distribution shall ensure any inmate who has been prescribed a therapeutic meal by the Responsible Physician or the authorized designee receives the prescribed therapeutic meal.

Unless a therapeutic diet was prescribed with a specific end date, only the Responsible Physician or the authorized designee may order that a therapeutic diet be discontinued.

Inmates who are receiving therapeutic diets must receive clearance from the Responsible Physician before he/she may receive a religious or disciplinary diet.

If prescribed by the Responsible Physician, supplemental food shall be served to inmates more frequently than the regularly scheduled meals. An inmate who misses a regularly scheduled meal shall receive his/her prescribed meal.

## Disciplinary Detention Diet

### 920.1 PURPOSE AND SCOPE

This policy establishes the requirement for providing inmates disciplinary detention diets when they are ordered for disciplinary reasons. The disciplinary detention diet will only be utilized after all of the provisions of the Disciplinary Segregation section of the Disciplinary Segregation Policy are implemented.

### 920.2 POLICY

The food services manager shall prepare the disciplinary detention diet after receiving directions from the Jail Chief Deputy. Records of providing this diet shall be maintained by the food services manager.

The disciplinary detention diet shall be served twice during each 24-hour period and shall consist of one-half of a vegetable/meatloaf (see recipe below) per meal (or a minimum of 19 oz. of cooked loaf). The loaf shall be accompanied by two slices of whole wheat bread and at least one quart of water if the inmate does not have access to a water supply. The use of the disciplinary detention diet is an exception to the "three meals per day" policy described in the Disciplinary Segregation Policy.

Inmates on Disciplinary Diet restriction shall be reviewed by the Classification Committee on a weekly basis.

### 920.3 PROCEDURES

The disciplinary detention diet shall consist of the following:

- (a) 2 ½ oz. nonfat dry milk
- (b) 4 ½ oz. raw grated potato
- (c) 3 oz. raw carrots, chopped or grated fine
- (d) 1 ½ oz. tomato juice or puree
- (e) 4 ½ oz. raw cabbage, chopped fine
- (f) 7 oz. lean ground beef, turkey or rehydrated, canned or frozen Textured Vegetable Protein (TVP)
- (g) 2 ½ fl. oz. oil
- (h) 1 ½ oz. whole wheat flour
- (i) ¼ tsp. salt
- (j) 4 tsp. raw onion, chopped
- (k) 1 egg

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#### *Disciplinary Detention Diet*

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(l) 6 oz. dry red beans, pre-cooked before baking (or 16 oz. canned or cooked red kidney beans)

(m) 4 tsp. chili powder

These ingredients should be shaped into a loaf and baked at 350-375 degrees for 50-70 minutes.

## **Chapter 10 - Inmate Programs**

# Inmate Programs and Services

## **1000.1 PURPOSE AND SCOPE**

The purpose of this policy is to establish the programs and services that are available to inmates. The programs and services exist to motivate inmates toward positive behavior while they are in custody. The policy identifies the role and responsibilities of the Inmate Programs Coordinator, who manages a range of programs and services.

## **1000.2 POLICY**

The Mason County Sheriff's Office will make available to inmates a variety of programs and services subject to resources and security concerns. Programs and services offered for the benefit of inmates may include social services, faith-based services, recreational activities, library access, educational training, alcohol and drug abuse recovery programs and leisure time activities.

## **1000.3 INMATE PROGRAMS COORDINATOR RESPONSIBILITIES**

The Inmate Programs Coordinator is selected by the Jail Chief Deputy and is responsible for managing the inmate programs and services, including the following:

- (a) Research, plan, budget, schedule and coordinate security requirements for all inmate programs and services.
- (b) Develop or procure programs and services as authorized by the Jail Chief Deputy.
- (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 and substance abuse counselors).
- (d) Develop, maintain and make available to inmates the schedule of programs and services.
- (e) Develop policies and procedures and establish rules for the participation of inmates in the programs and services.
- (f) Develop and maintain records on the number and type of programs and services offered, as well as inmate attendance at each offering.
- (g) Establish controls to verify that the content and delivery of programs and services are appropriate for the circumstances.
- (h) Accumulate data and prepare monthly and annual reports as directed by the Jail Chief Deputy.

## **1000.4 SECURITY**

Programs and services offered to benefit inmates shall adhere to the security and classification requirements of this facility. To the extent practicable, the Inmate Programs Coordinator will develop individualized programs and services for inmates who are housed in high-security or administrative segregation.

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#### *Inmate Programs and Services*

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##### **1000.5 DISCLAIMER**

Inmate programs are provided at the sole discretion of the Mason County Sheriff's Office in keeping with security interests, available resources and best practices.

Nothing in this policy is intended to confer a legal right for inmates to participate in any program offered other than what is required by law or that which is medically required.



## Inmate Welfare Fund

### 1002.1 PURPOSE AND SCOPE

The Office is authorized to maintain a fund derived from proceeds from the commissary, vending machines, telephones and other inmate-related commerce activities, to be used primarily to provide welfare and education programs for the benefit of the inmate population. This policy establishes guidelines for maintaining and administering the Inmate Welfare Fund.

### 1002.1 INMATE WELFARE FUND

The Jail Chief in cooperation with the Finance Manager will establish and maintain an Inmate Welfare Fund where proceeds derived from inmate telephones, commissary profits, vending machines and other income intended for the support of inmate programs, is deposited.

The Inmate Welfare Fund is allocated to support a variety of programs, services and activities benefiting the general inmate population and enhancing inmate activities and programs. This includes capital construction and improvement projects in support of such programs, services and activities.

### 1002.2 INMATE WELFARE FUNDING SOURCES

Revenues and funding from the following sources shall be deposited into the Inmate Welfare Fund account:

- (a) All proceeds from commissary operations
- (b) Proceeds from vending machines made available for inmate use
- (c) Proceeds from the operation of inmate telephones
- (d) Proceeds from the sale of inmates' arts-and-crafts projects
- (e) Donations
- (f) Interest income earned by the Inmate Welfare Fund

### 1002.3 EXPENDITURE OF INMATE WELFARE FUNDS

The Inmate Welfare Fund shall be used solely for the welfare and benefit of the inmate population or as otherwise permitted by law.

Expenditures permitted from the Inmate Welfare Fund include, but are not limited to, the following:

- (a) Education programs
- (b) Recreational goods and services, such as:
  - 1. Recreational equipment, games and sporting goods
  - 2. Televisions and cable/satellite subscriptions, video players and content media
  - 3. Library books
  - 4. Vending machines

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#### *Inmate Welfare Fund*

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- (c) Salary and benefit costs for personnel while they are employed in positions or are performing activities solely for the benefit of inmates or to facilitate inmate programs
- (d) Welfare packages for indigent inmates
- (e) Alcohol and drug treatment programs
- (f) Office facility canteens, including vending machines available for inmate use
- (g) Inmate trust accounting system
- (h) Envelopes, postage and personal hygiene items for indigent inmates
- (i) Approved non-prescription, over-the-counter health aids for inmate use
- (j) Libraries designated for inmate use
- (k) Visiting room equipment, supplies and services
- (l) Inmate activity programs, including:
  - 1. Equipment for television viewing
  - 2. Visiting music/entertainment groups
  - 3. Music equipment and supplies
  - 4. Activities equipment, supplies and services
  - 5. Repair of equipment purchased from the Inmate Welfare Fund
  - 6. Food or supplies for special occasions
  - 7. Inmate awards for the purpose of providing umpires or referees, and maintaining activity equipment and apparel
  - 8. Inmate tournaments and holiday events
  - 9. Inmate club activities
  - 10. Entertainment equipment, cable or satellite subscription services and other related supplies
  - 11. Materials for faith-based programs

#### 1002.3.1 PROHIBITED EXPENDITURES OF INMATE WELFARE FUND

Except as permitted by law, the Inmate Welfare Fund shall not be used to fund activities associated with any of the following:

- (a) Security-related functions, including staff, safety equipment, radios, weapons or control devices that are specifically designated for use by the custody staff in maintaining the security, safety and order in the facility
- (b) Food service, staff costs, equipment and supplies
- (c) Medical/dental services, staff costs, equipment and supplies
- (d) Maintenance and upkeep of office facilities not otherwise permitted by law
- (e) Janitorial services and supplies

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#### *Inmate Welfare Fund*

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- (f) Transportation to court, medical appointments or other reasons not related to inmate programs
- (g) Any other normal operating expenses incurred by the day-to-day operation of the Office

#### **1002.4 FINANCIAL ACCOUNTING OF INMATE WELFARE FUNDS**

The Jail Chief in cooperation with the Finance Manager shall maintain an accounting system to be used for purchasing goods, supplies and services that support inmate programs.

# Inmate Accounts

## **1005.1 PURPOSE AND SCOPE**

This policy establishes guidelines and procedures for managing, handling and accounting of all money belonging to inmates that is held for their personal use while they are incarcerated in this facility.

## **1005.2 INMATE ACCOUNTS**

The Department will establish an inmate account for the purpose of receiving funds from authorized sources for inmate use. A separate account will be established for each inmate when he/she is booked into this facility.

When an inmate is admitted to the jail, an account will be opened in the computer banking system, and all U.S. currency and coin in the inmate's possession shall be deposited to the account. Any subsequent deposits to the inmate's account shall be entered in to the inmate's account. An inmate shall be issued a receipt and a Personal Identification Number (PIN) for all money held until his/her release.

An inmate may use money in his/her inmate account for bail or to purchase items from the inmate commissary. Inmates may receive money while in custody. Inmates may release funds, once while in custody, at the discretion of the shift supervisor. Funds will be made available to inmates for their use in accordance with the rules and regulations established by the Jail Chief Deputy.

## **1005.3 FUNDING SOURCES**

The inmate account will only accept funds for deposit from approved sources. Funds deposited into an inmate's account will first be used to settle the inmate's negative balance, should one exist. Deposits to an account with outstanding balances will be split 80% to debt and 20% to the account.

### **1005.3.1 DEPOSITS DURING BOOKING**

With the exception of legally prescribed fees (e.g., booking fees, restitution), all money received during the booking process shall be deposited to the inmate's account after the inmate signs an acknowledgement agreeing to the amount.

### **1005.3.2 DEPOSITS THROUGH THE MAIL**

All funds received by mail to be deposited to an inmate's account shall be entered into the inmate's account, and the inmate shall be given a receipt for the deposit.

Only cash, money orders, cashier checks, and checks issued by federal, state, county or city government agencies received through the mail are acceptable for deposit into inmate accounts. Although cash may be accepted for deposit, it is not recommended that cash be sent through the mail. All personal checks, payroll checks and other unapproved monies will be forwarded to the personal property storage area and placed in the inmate's property bag.

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##### **1005.3.3 VISITOR DEPOSITS**

Deposits to the inmate account shall be accepted anytime through the jails public lobby. Only cash, money orders, or cashier check may be accepted for deposit to an inmate's account. Depositors shall be required to provide valid identification.

The staff member shall post funds received to the inmate's account and prepare a validated receipt for the transaction. A copy of the transaction receipt shall be provided to both the inmate and the person making the deposit. A copy will be retained by the agency.

##### **1005.4 AUTHORIZATION FOR SELF-BAIL**

Inmates may use their inmate account funds for bail. They must sign the transaction receipt authorizing the release of funds for bail.

##### **1005.5 RELEASE OF FUNDS TO OTHER PERSONS**

Inmates wishing to release all or part of their personal funds to a person who is not in custody must sign a withdrawal transaction document. The person to whom the funds are to be released must contact Correction Staff, who will prepare a withdrawal transaction document 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 cashier. Staff will then forward the withdrawal transaction document to the proper housing area for the inmate's signature and approval.

##### **1005.6 RELEASE FROM CUSTODY**

Staff members responsible for release of inmates shall close the inmate's financial account and have the inmate sign the account closed receipt. If funds are on the account at closing, the staff member shall issue a prepaid debit card for inmates being directly released to the community. Inmates being released for transfer to another facility shall have a check drafted and placed into their inmate transport property bag.

##### **1005.7 RESPONSIBILITY**

At the end of every shift, a staff member shall be responsible for balancing transactions completed during the shift.

All money shall be counted and verified against the banking system transaction receipt. Receipts and money will be put into an envelope and secured in the safe.

Any unresolved discrepancies found during the balancing procedures shall be promptly reported. The staff member reporting the discrepancies shall prepare a report showing the amount of the discrepancy.

The report shall include the following:

- (a) Date and time each cash discrepancy was discovered
- (b) Amount of overage or shortage
- (c) Explanation of the cause of the overage/shortage

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- (d) Documentation used to identify the error
- (e) Recovery attempts
- (f) Name of person reporting the discrepancy
- (g) Name of person approving the report and the date approved
- (h)

#### **1005.8 SECURE BANKING OF INMATE FUNDS**

All monies collected by custody personnel shall be secured daily in an officially designated and secure place, and verified by a supervisor.

#### **1005.9 AUTOMATED KIOSKS**

The use of automated kiosks for the deposit of monies into the inmate trust fund or to transfer inmate monies for the purchase of commissary or other authorized items will meet the financial accounting requirements of this policy and other standard financial practices.

## Counseling Services

### **1007.1 PURPOSE AND SCOPE**

The purpose of this policy is to establish a process for providing counseling and crisis intervention services to inmates.

### **1007.2 POLICY**

This office will provide counseling and crisis intervention services to any inmate who either requests services or is determined by a health provider to be in need of counseling or crisis intervention services. These services may be provided by:

- (a) Medical/mental health staff assigned to the facility.
- (b) Faith-based counseling by the chaplain or religious volunteers (see the Religious Programs Policy).
- (c) Corrections Deputies assigned to the facility who have specific training and expertise in this area.

The Jail Chief Deputy shall coordinate with the Responsible Physician to develop and confidentially maintain records of counseling and crisis intervention services provided to inmates and to ensure that those records are retained in accordance with established records retention schedules (WAC 44-14-03005).

The Jail Chief Deputy shall ensure that request forms are available and provided to inmates who request counseling services. All inmate requests for counseling shall be forwarded to the Shift Supervisor. If an inmate displays behavior indicating a need for counseling or crisis intervention services, the facility employee shall notify the Shift Supervisor. The Shift Supervisor shall assess the need and area of counseling and make a reasonable effort to provide the inmate with the requested counseling as soon as practicable with consideration given to facility security, scheduling and available resources. Inmates who are victims of a sexual abuse or harassment incident will be informed of the availability and continuity of counseling (28 CFR 115.82; 28 CFR 115.83).

### **1007.3 NON-CRISIS COUNSELING**

The Department shall, when reasonably practicable, make counseling services available to assist inmates who are being released into the community.

# Inmate Exercise and Recreation

## 1011.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines and procedures ensuring that the Mason County Sheriff's Office facility will have sufficiently scheduled exercise and recreation periods and sufficient space for these activities, as required by law.

### 1011.1.1 DEFINITIONS

Definitions related to this policy include:

**Exercise** - The physical exertion of large muscle groups.

**Recreation** - Activities that may include table games, watching television or socializing with other individuals.

## 1011.2 POLICY

It is the policy of this department to provide inmates with access to exercise opportunities and to recreation activities in accordance with state laws or requirements. The Jail Chief Deputy or the authorized designee shall be responsible for ensuring there is sufficient secure space allocated for physical exercise and recreation, and a schedule is developed to ensure accessibility for all inmates.

## 1011.3 ACCESS TO EXERCISE

Inmates shall have access to exercise opportunities, including at least two hours outside of their individual cells, and the opportunity to exercise outdoors, at least 3 times per week, when weather permits.

The Control Room Operator shall use the approved daily log sheet to document when cell blocks are offered exercise and shall record when outdoor recreation has been declined due to weather conditions.

Daily log sheets should be collected monthly and forwarded to the Jail Chief Deputy. Log sheets shall be maintained in accordance with established records retention schedules WAC 44-14-03005).

## 1011.4 ACCESS TO RECREATION

Each inmate shall have access to recreational (leisure-time) activities outside the cell at least once a day. The length of time will be determined by the inmate's classification status, security concerns and operational schedules that preclude recreation during a period of time (e.g., meal times, searches, lockdown or court). The staff should ensure the maximum time possible is provided to the inmates for this purpose.

Books, table games and other items may also be made available to enhance recreation time. Consideration will be given to the passive or active recreational needs of older inmates and inmates with disabilities.



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#### *Inmate Exercise and Recreation*

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##### **1011.5 SECURITY AND SUPERVISION**

The staff supervising the inmates during exercise and recreation time shall document when each inmate living area has the opportunity to exercise or recreate.

Staff shall be responsible for inspecting exercise and recreational equipment to ensure it appears safe for use. Broken equipment or equipment in an unsafe condition shall not be used. Inmates will not be permitted to use equipment without supervision. All equipment shall be accounted for before inmates are returned to their housing unit.

The supervising staff may terminate the exercise or recreation period and escort back to the housing unit any inmate who continues to act in an aggressive or disorderly manner after being ordered to stop by the staff. Whenever an exercise or recreation period is involuntarily terminated, the staff will document the incident and rationale for terminating the exercise period. The Shift Supervisor will determine whether disciplinary action is warranted.

##### **1011.6 EXERCISE SPACE**

Sufficient outdoor and covered/enclosed exercise areas, as specified by federal, state and/or local laws or requirements, should be provided. Use of outdoor exercise is preferred but weather conditions may require the use of covered/enclosed space.

##### **1011.7 INABILITY TO MEET REQUIREMENTS**

In the event the inmate population exceeds the ability of the facility to meet the exercise and recreation requirements, the facility should notify the governing body about the deficiency in space for exercise, it may violate the law and/or the requirements, and request funds to remedy the situation. The facility should document all action taken to try to remedy the situation, including funding requests, population reduction requests and all responses to those requests.

# **Inmate Educational, Vocational and Rehabilitation Programs**

## **1013.1 PURPOSE AND SCOPE**

This department provides educational and vocational programs that are designed to help inmates improve personal skills, assist in their social development and improve inmate employability after release. The ability of the department to offer educational programs is dictated by available funding, inmate classification and other required inmate programs and routines.

## **1013.2 POLICY**

The educational and vocational programs offered by the Mason County Sheriff's Office are available to all eligible inmates and are subject to schedule, space, personnel and other resource constraints.

Designated space for inmate education and vocational programs will, whenever practicable, be designed in consultation with the appropriate school authorities or educational/vocational service providers.

Adequate funding is required. If the funding source reduces or eliminates funding in these areas, educational and/or vocational programs may be reduced or eliminated.

While the housing classification of an inmate has the potential to pose security issues, every effort, to the extent reasonably practicable, will be made to provide individualized educational opportunities (WAC 392-121-107 and WAC 392-122-228).

## **1013.3 COURSE OFFERINGS**

Course offerings will be subject to need, available resources, security concerns, available space and inmate classification, and may include the following:

- (a) Basic education, General Educational Development (GED) preparation
- (b) Substance abuse and healthy lifestyles education (AA and NA)
- (c) Other courses as deemed appropriate by the Inmate Programs Coordinator

## **1013.4 OUTREACH**

Information about educational opportunities should be included in the general inmate orientation. At a minimum, inmates should receive instruction on how to request participation in the inmate education programs, along with eligibility requirements and rules for participation.

## **1013.5 ELIGIBILITY REQUIREMENTS**

Educational/vocational programming (other than televised courses) may be offered to sentenced and pretrial inmates. The Sheriff shall ensure that there is equal opportunity for participation for male and female inmates.

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#### *Inmate Educational, Vocational and Rehabilitation Programs*

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##### **1013.6 SELF-STUDY PROGRAM**

Inmates admitted into the GED program are issued the necessary books and supplies to use for self-study.

Upon completion of a GED self-study program, the inmate may be given the opportunity to take the GED test.

##### **1013.7 HIGH-SECURITY/ADMINISTRATIVE SEGREGATION INMATES**

To the extent reasonably practicable, high-security inmates and those held in administrative segregation may receive individual instruction in the form of a correspondence course.

##### **1013.8 REHABILITATION PROGRAM**

The Office provides opportunities for rehabilitation programs that are based upon victim and community input and are fashioned in a way that gives the inmate an opportunity to make amends for the harm done.

The Sheriff and Jail Chief Deputy 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

##### **1013.9 DISCLAIMER**

Nothing in this policy is meant to confer a legal right for inmates to participate in any educational offering. Educational programming is provided at the sole discretion of the Sheriff and Jail Chief Deputy.

##### **1013.10 CLASSROOM USE AND DESIGN**

The demographics of the inmate population should always be considered when developing educational and other programs. Inmate classification and segregation requirements also need to be considered.

The Jail Chief Deputy should encourage and include educators in the set up and design of classrooms that have been identified for inmate education programs. To the extent reasonably possible, in consideration of the space design and the ability to provide adequate security, teachers, education managers and administrators should be consulted to ensure that their needs are met.

In addition to the traditional classroom approach to educational programming, there are several other delivery methods. These include independent study and computer education programs.

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#### *Inmate Educational, Vocational and Rehabilitation Programs*

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##### **1013.11 NEW CONSTRUCTION OR RENOVATION**

Whenever construction of new facilities is considered, the Jail Chief Deputy may include education specialists during the design phase to ensure that the needs of education providers are met with regard to security, sound levels and educational equipment.

The Jail Chief Deputy 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

### 1015.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a commissary program which gives inmates the opportunity to purchase personal items not provided by the facility.

### 1015.2 POLICY

It is the policy of this office to provide space for an inmate commissary, or to provide for a commissary service, so inmates who are not on disciplinary restriction and who have funds posted to their inmate accounts may purchase approved items not furnished by the facility.

Commissary inventory or sales issues related to religious diets shall be addressed in the Religious Programs Policy.

### 1015.3 COMMISSARY LIAISON RESPONSIBILITIES

The Jail Chief Deputy shall be responsible for designating a qualified person to act as the Commissary Liaison. The Commissary Liaison shall be responsible for the general operation of the commissary and serve as the contact between the agency and the commissary provider.

### 1015.4 COMMISSARY ACCOUNTING

The Shift Supervisor shall be responsible for ensuring inmates who have commissary privileges have the opportunity to order and receive commissary items in a timely manner.

All inmates shall be afforded the opportunity to review an accounting of their money held in their account, to include deposits, debits and commissary goods purchased and received. Any discrepancy of the inmate's funds shall be immediately reported to the Commissary Liaison. If the Commissary Liaison and the involved inmate cannot settle the discrepancy, the Jail Chief Deputy shall be notified and the Jail Chief Deputy will resolve the discrepancy.

### 1015.5 INMATE WELFARE PACKS

The Jail Chief Deputy or the authorized designee shall monitor the provision of indigent packs to indigent inmates. Indigent packs shall include, but not be limited to:

- (a) Three postage-paid envelopes and paper letters each week to permit correspondence with family members and friends.
- (b) Personal hygiene items, including toothbrush, toothpaste, soap, deodorant and other supplies deemed to be appropriate for indigent inmates.

The Sheriff may expend money from the Inmate Welfare Fund to provide indigent inmates with essential clothing and limited transportation expenses upon release.

### 1015.6 AUDIT OF THE COMMISSARY

The Commissary Liaison shall ensure an annual audit of the commissary operation is conducted. The written report prepared by the auditor shall be reviewed for accuracy by the Commissary Liaison and provided to the Jail Chief Deputy.

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Excess funds derived from the operation of the commissary shall be deposited into the Inmate Welfare Fund or otherwise used for the benefit of the inmates. They also may be deposited and used in accordance with expenditures authorized by the Corrections Chief. An itemized report of expenditures shall be submitted annually.

## Library Services

### **1017.1 PURPOSE AND SCOPE**

The purpose of this policy is to establish guidelines for funding of library services and for providing inmates access to leisure and legal reading materials.

### **1017.2 RESPONSIBILITIES**

The Jail Chief Deputy or the authorized designee is responsible for the administration of the library services and should appoint a capable member to serve as librarian to run the daily library operations. The library services shall include access to legal reference materials, current information on community services and resources, and religious, educational, and recreational reading material.

The librarian shall ensure that reading materials are provided to the general housing units and that any member assigned to assist with the delivery of library services has received the appropriate training in facility safety and security practices.

### **1017.3 LIBRARY FUNDING AND MAINTENANCE**

The Jail Chief Deputy should ensure that funding is available to operate the library. The Jail Chief Deputy may use monies from the Inmate Welfare Fund to offset the cost of salaries, services, and supplies. The librarian may enlist the assistance of the local public library system and other community organizations to maintain and update the library. Donated books and materials should be screened by the librarian for permissible content and safety prior to being distributed to inmates.

The Office may reject library materials that may compromise the safety, security, and orderly operation of this facility (see the Inmate Mail Policy for examples of materials that may be rejected).

The library shall be operated within the physical, budgetary, and security limits of the existing facility.

Books and other reading material should be provided in languages that reflect the population of the facility.

### **1017.4 LEISURE LIBRARY MATERIALS**

Each inmate is allowed to have no more than six books at a time. Existing selections must be returned before new books may be selected by an inmate. Inmates who destroy or misuse books and library materials will be subject to disciplinary action and may be required to pay for the material. If staff believes the destruction was intentional, the matter may be referred for criminal prosecution.

### **1017.5 ACCESS TO LEGAL PUBLICATIONS/LAW LIBRARY**

Inmates shall have reasonable access to the legal system, which may include access to legal reference materials. Pro se inmates shall have priority regarding access to legal publications.

Electronic legal information provided through the library includes, but is not limited to:

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- Criminal code sections.
- Criminal and/or civil cases.
- Judicial forms for criminal cases, civil cases and general litigation.

Inmates desiring access to the library or legal publications shall submit an inmate request to staff. Only one request per inmate per week is allowed unless the inmate is court ordered pro se. Inmates in disciplinary segregation shall have the same access to reading materials and legal materials as the general population unless a restriction is directed by the court.

The corrections deputy will collect completed request forms and deliver them to the Shift Supervisor. The Shift Supervisor shall arrange for the inmate to have access to law library services if they are available and do not conflict with scheduling and security concerns. Records of access to legal references and whether the requests were fulfilled or denied shall be documented via entry in to the inmate log through the jail electronic records management system.

Pro se inmates may keep minimal supplies for their case in their cells (e.g., paper, letters, reference materials), provided it does not create a fire hazard.

#### **1017.6 ALTERNATE MEANS OF ACCESS TO LEGAL RESOURCES**

Nothing in this policy shall confer a right to access a law library. Unless it is specified by court order, the Sheriff may provide access to legal resources by a variety of means that may include public or private legal research services (e.g., web-based legal resources).

#### **1017.7 POLICY**

It is the policy of this facility to operate a library service that provides leisure and legal reading materials to inmates.

#### **1017.8 ACCESS TO LIBRARY**

Access to the inmate library or to library materials shall be based on inmate classification, housing location, and other factors that legitimately relate to maintaining the safety and security of the facility.

Inmates in disciplinary segregation shall have the same access to reading materials and legal materials as the general population unless a restriction is directed by the court.



# Inmate Mail

## **1019.1 PURPOSE AND SCOPE**

The purpose of this policy is to provide guidelines for the receipt, rejection, inspection and sending of inmate mail.

## **1019.2 POLICY**

This Office will provide ample opportunity for inmates to send and receive mail, subject to restriction only when there is a legitimate government interest.

## **1019.3 MAIL DEFINITIONS**

Inmates may, at their own expense, send and receive mail without restrictions on quantity, provided it does not jeopardize the safety of staff, visitors or other inmates, or pose an unreasonable disruption to the orderly operation of the facility.

However, inmates are only allowed to store a limited number of letters, as determined by the Jail Chief Deputy, in their cell. Excess mail will be stored with the inmate's personal property and returned at his/her release.

Upon request, indigent inmates will be permitted to mail up to Three letters per week with postage to be paid by this office. There shall be, however, no limit to office-paid correspondence by indigent inmates to legal and other representatives as described in the section on confidential correspondence below.

Inmates will be provided information on mail policies and procedures during their orientation.

## **1019.4 CONFIDENTIAL CORRESPONDENCE**

Inmates may correspond confidentially with courts, legal counsel, officials of this office, state and local elected officials, ombudsman for corrections 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 outgoing confidential correspondence for contraband before it is sealed, provided the inspection is completed in the presence of the inmate. In the event 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.

## **1019.5 SUSPENSION/RESTRICTION OF MAIL PRIVILEGES**

Mail privileges may be suspended or restricted upon approval of the Jail Chief Deputy whenever staff becomes aware of mail sent by an inmate that involves:

- (a) Threats of violence against any member of the government, judiciary, legal representatives, victims or witnesses.

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- (b) Incoming or outgoing mail representing a threat to the security of the facility, staff or the public.

The County Prosecutor or Prosecutor should be consulted in cases where criminal charges are considered against an inmate or there is an apparent liability risk to the Office that relates to suspension or restriction of mail privileges.

#### **1019.6 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 held for no more than 48 hours. Mail processing may be suspended on weekends, holidays or during any emergency situation resulting in the suspension of normal facility activities. An emergency situation may include, but is not limited to, a riot, escape, fire, natural disaster, employee action or other serious incident.

Assigned corrections deputies should open and inspect incoming general mail of current inmates and may read the correspondence as frequently as deemed necessary to maintain security or monitor a particular problem. Mail for inmates no longer in custody should not be opened.

After the perusal of incoming general mail, If approved for distribution, staff will make a photo copy of the envelope and its contents,. The inmate will be provided the photo copies. The original envelope and its contents will be disposed of. Original photographs will be copied and distributed with the originals being placed into the inmates property.

Incoming confidential mail will be opened and photo copied in front of the inmate. The inmate will be provided a photo copy of the envelope and its contents. The original envelope and its contents will be shredded in the presence of the inmate.

Except for confidential correspondence, outgoing mail may not be sealed by the inmate and may be read and inspected by staff when:

- (a) There is reason to believe the mail would:
  - 1. Interfere with the orderly operation of the facility.
  - 2. Be threatening to the recipient.
  - 3. Facilitate criminal activity.
- (b) The inmate is on a restricted mail list.
- (c) The mail is between inmates.
- (d) The envelope has an incomplete return address.

When mail is found to be inappropriate in accordance with the provisions of this policy or when an inmate is sent material not prohibited by law but is considered contraband by the facility as defined on the jail's unauthorized mail list, the material may be returned to the sender or held in the inmate's property to be given to the inmate upon release. If returned to sender, the sender shall be notified, in writing, the reason for the rejection and given information regarding the means to file an appeal. The appeal must be submitted within 10 days.

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If an inmate's outgoing mail is rejected, see unauthorized mail list, the mail shall be returned to the inmate advising of the reason for rejection and the right to due process as defined in the jail's grievance policy. The intended recipient shall be notified by sending written notification, which shall specify the publication, letter, package, or mail which has been restricted, the reason for the restriction as outlined in this policy, and the instructions for appeal. The intended recipient has 10 days to file an appeal. If the intended recipient is a protected person by court order, or the reason for the rejection involves criminal activity, or the address is not verified or valid, recipient notification shall not be made.

Inmates are allowed to correspond with other inmates in this jail, as well as other jails or correctional institutions, as long as the mailing is sent and received through the U.S. Postal Service. No over the counter mail shall be accepted for inmates, except mail from those within the criminal justice system.

Inmates shall be notified in writing whenever their mail is held or returned to the sender. Mail logs and records, justification of censoring or rejection of mail, and copies of hold or return notices shall be maintained in the inmate's file in accordance with established records retention schedules (WAC 44-14-03005).

Cash, government checks and money orders contained in incoming inmate mail shall be removed and credited to the inmate's account. Personal checks may be returned to the sender or held in the inmate's property to be given to the inmate upon release.

#### **1019.6.1 DESIGNATION OF STAFF AUTHORIZED TO READMAIL**

Only staff designated by the Jail Chief Deputy 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.

#### **1019.7 BOOKS, MAGAZINES, NEWSPAPERS, PERIODICALS, AND PACKAGES**

Unless otherwise in conflict with this policy and prohibited by the Jail Chief Deputy, inmates are permitted to purchase, receive and read any soft covered book, newspaper, periodical or writing accepted for distribution by the U.S. Postal Service.

Publications, magazines, books, newspapers, or packages shall be accepted only if they are mailed directly from the publisher or a publicly recognized book distributor, to a named inmate. Items such as product samples, CD's, DVD's etc., will be removed and placed in the inmate's property. Items such as perfume samples shall be discarded. Ribbon or bookmarks attached or included with any publication will be cut away and discarded.

Packages are defined as wrapped or boxed objects; a parcel or bundle containing one or more objects; or a container in which something is packaged for storage, transport, or mailing. Staff shall not accept packages for inmates unless they fall into the category of confidential mail or are from a publicly recognized book distributor.

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##### **1019.8 REJECTION OF MAGAZINES AND PERIODICALS**

The Office may reject magazines, periodicals and other materials which may inhibit the reasonable safety, security and control in the daily operation of this facility. Generally, books, newspapers and magazines are accepted only if they are sent directly by the publisher or book distributor. Materials which may be rejected include, but are not limited to:

- Materials advocating violence or a security breach.
- Literature that could incite racial unrest.
- Sexually explicit material, including pornographic magazines, nude pictures, 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 which would have a tendency to incite murder, arson, riot, violent racism or any other form of violence; material which would have a tendency to incite crimes against children; any material concerning unlawful gambling or an unlawful lottery; the manufacture or use of weapons, narcotics or explosives or any other unlawful activity.
- Material which could lead to sexual aggression, an offensive environment for inmates.
- Material which could create a hostile or offensive work environment.
- Any material with content which could reasonably demonstrate a legitimate government (safety, security, and order) interest in rejecting the material.

Staff shall notify the Shift Supervisor whenever a decision is made to reject books, magazines or periodicals. The Jail Chief Deputy or the authorized designee will be responsible for making the final decision as to the specific magazines, periodicals and other materials will be prohibited within this facility.

Religious texts not supplied by facility-authorized entities may be accepted by the chaplain or other religious volunteer who has received training on facility rules involving contraband, and who has been approved by a supervisor to review such documents for distribution.

##### **1019.9 FORWARDING OF MAIL**

Any non-legal mail received for a former inmate should be returned to the sender with a notation the inmate is not in custody. Obvious legal mail should be forwarded to the former inmate's new address if it is reasonably known to the facility. Otherwise, legal mail should be returned to the sender.

# Inmate Telephone Access

## 1021.1 PURPOSE AND SCOPE

This policy establishes guidelines for permitting inmates to access and use telephones.

## 1021.2 POLICY

The Mason Jail will provide access to telephones for use by inmates consistent with federal and state law. The Jail Chief Deputy or the authorized designee shall develop written procedures establishing the guidelines for access and usage. All inmates will be provided a copy of the telephone usage rules as part of their inmate orientation during the booking process.

## 1021.3 PROCEDURE

Inmates housed in general population will be permitted reasonable access to public telephones at scheduled times in the dayrooms for collect calls unless such access may cause an unsafe situation for the facility, staff or other inmates. The Jail Chief Deputy shall ensure notice is given to inmates and persons receiving calls that non-attorney calls may be monitored and recorded.

Inmates are not permitted to receive telephone calls. Messages will only be delivered in the event of a verified emergency.

In the event of a facility emergency, or as directed by the supervisor, the Jail Chief Deputy or the authorized designee, all telephones will be turned off.

For security reasons, inmates who are awaiting transport to another facility or release to another agency are not permitted to use the telephones.

Telecommunications Device for the Deaf (TDD) or equally effective telecommunications devices will be made available to inmates who are deaf, hard of hearing or have speech impairments to allow these inmates to have equivalent telephone access as those inmates without these disabilities.

The minimum time allowed per call should be 15 minutes, except where there are substantial reasons to justify such limitations.

Reasons for denial of telephone access shall be documented and a copy placed into the inmate's file. The rules governing the use of the telephone will, in addition to being provided to inmates during orientation, be posted near the telephones.

The staff should monitor the use of public telephones to ensure inmates have reasonable and equitable access and the rules of use are observed. Inmates refusing to cooperate with the telephone rules may have his/her call terminated, telephone privileges suspended and/or incur disciplinary action.

Requirements relating to the use of telephones during booking and reception are contained in the Inmate Reception Policy.

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##### **1021.4 USE OF TELEPHONES IN HIGH-SECURITY OR ADMINISTRATIVE SEGREGATION HOUSING**

Inmates who are housed in high-security or administrative segregation may use the public telephones in the dayroom during the time allocated for that classification of inmate to utilize that space. If portable telephones are available in the facility, inmates who are housed in high-security or administrative segregation units may have reasonable access to the portable telephones.

##### **1021.5 COURT-ORDERED TELEPHONE CALLS**

If a court order specifying free telephone calls is received by the facility, or a supervisor determines there is a legitimate need for a free telephone call for a specific inmate, the supervisor may direct an inmate use a facility telephone at no charge. Calls placed from a facility telephone should be dialed by a staff member. The staff shall be responsible for ensuring the inmate is not calling a number restricted by a court order or by request of the recipient. Such a call shall be recorded to the same extent authorized for calls not court-ordered.

##### **1021.6 ATTORNEY-CLIENT TELEPHONE CONSULTATION**

Through the period of custody, whether the inmate has been charged, tried, convicted or is serving an executed sentence, reasonable and non-recorded telephone access to an attorney shall be provided to the inmate, in accordance with the Inmate Access to Courts and Counsel Policy.

Foreign nationals shall be provided access to the diplomatic representative of their country of citizenship. Staff shall assist them upon request. Domestic and international calling cards are available through the inmate commissary.

##### **1021.7 CONFERENCE CALL REGARDING CHILD PLACEMENT**

Inmates who are parents shall be allowed to participate in a case conference convened pursuant to RCW 13.34.067 by either conference call or video conference.

##### **1021.8 TELEPHONE CONTRACTS AND CHARGES**

The Jail Chief Deputy or the authorized designee is responsible for ensuring contracts involving telephone services for inmates comply with all applicable state and federal regulations, rates and surcharges are commensurate with those charged to the general public for similar services, and the broadest range of calling options is provided, in accordance with sound correctional management practices.

# Inmate Visitation

## 1023.1 PURPOSE AND SCOPE

The purpose of this policy is to establish rules for visitation and to provide a process for inmate visits and visitors. Visitation is a privilege and is based on space availability, schedules and on-duty staffing.

## 1023.2 POLICY

The Jail Chief Deputy shall develop written procedures for inmate visiting, which shall provide for as many visits and visitors as facility schedules, space and number of personnel will reasonably allow, with no fewer visits allowed than those specified per week, by type of facility. These procedures are subject to safety and security requirements. General public visits shall be conducted primarily via Video Visitation. Professional visits can be conducted via Video Visitation or on-site, in the secure visitation area. Secure Visitation is the area where the public visits inmates behind a glass barrier and provides a means for voice communication.

Video visits are recorded and randomly monitored by Corrections Staff to assure compliance with agency policy.

Court orders granting a special inmate visitation are subject to county legal review and interpretation.

## 1023.3 PROCEDURES

The Office has provided adequate space for on-site visiting including appropriate space for the screening and searching of both inmates and visitors. Public visitation shall be conducted via Video Visitation. For indigent visitors or visitors without adequate high speed internet services, an on site terminal is available in the jail's public lobby. Indigent video visits are limited to two visits per week.

Limitations on the number of visitors an inmate may receive, including the length of those visits, is determined by:

- The facility's schedule.
- The on site availability of video terminals and the terminals within the inmate living areas.
- Whether an emergency or other conditions justify a limitation in visiting privileges.

The Jail Chief Deputy or the authorized designee is responsible for defining, in writing, the conditions under which visits may be denied.

The visiting area shall accommodate inmates and visitors with disabilities. Visitors with disabilities who request special accommodations shall be referred to a supervisor. Reasonable accommodations will be granted to inmates and disabled visitors to facilitate a visitation period.

Visitor logs and records shall be maintained by the video visitation vendor.(WAC 44-14-03005).

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##### **1023.3.1 VISITOR REGISTRATION AND IDENTIFICATION**

Visitors must register on-line and produce valid government identification.

- (a) The registration form must include the information mandated by the visitation vendor.

##### **1023.4 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 there is reasonable cause to believe the visitor 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.

##### **1023.5 VISITING SCHEDULE**

The Jail Chief Deputy shall designate times which inmate video visitation is available including daytime, evening, and weekend hours. Inmate access to visitation shall be defined in the inmate handbook. The visiting hours will be posted in the public area of the facility.

##### **1023.6 DENIAL OR TERMINATION OF VISITING PRIVILEGES**

Visitation may be denied or terminated by a supervisor if the visitor poses a danger to the security of the facility or there is other good cause, including, but not limited to, the following:

- (a) The visitor appears to be under the influence of drugs and/or alcoholic beverages.
- (b) Inappropriate behavior and/or dress.
- (c) The visitor or inmate violates facility rules or posted visiting rules, e.g. late for a visit.
- (d) Visitors attempting to enter this facility with contraband will be denied a visit and may face criminal charges.
- (e) Or any other behavior which may jeopardize the safety, security, and orderly operation of the facility.

Any visitation denied or terminated early, on the reasonable grounds the visit may endanger the security of the facility, shall have the actions and reasons documented. A copy of the documentation will be placed into the inmate's file and another copy will be forwarded to the Jail Chief Deputy.

##### **1023.7 GENERAL VISITATION RULES**

All visitors and inmates will be required to observe the following general rules during visitation:

- (a) A maximum of two adults will be permitted to visit, on-site with an inmate at any one time.
- (b) Minors are only allowed in the County jail facility for visitation purposes. Minors must be accompanied by a parent or legal guardian who must be at least 18 years of age. Legal guardians may be required to show proof of guardianship. Emancipated minors, married to the inmate they are visiting, may visit with proof of marriage.
- (c) An inmate may refuse to visit with a particular individual.



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- (d) Those inmates who are named as the restrained person in any restraining or other valid court order shall not be allowed visits from persons who are protected by the order.
- (e) Visitors must be appropriately attired during visiting.
- (f) 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.
- (g) All on-site visitors must have footwear.
- (h) Visitors who enter the facility with handbags, packages or other personal items will be instructed to lock the items in a vehicle or return at another time without the items. The facility is not responsible for lost or stolen items.
- (i) Food or drink is not permitted in the visitor's area.
- (j) Inmates will be permitted to sign legal documents, vehicle release forms or other items authorized by the Shift Supervisor. Transactions of this nature will not constitute a regular visit.
- (k) The jail does not provide notary services.

#### **1023.8 SPECIAL VISITS**

The Shift Supervisor may authorize special visitation privileges. These visits may be conducted in the secure visitation area. The Shift Supervisor, who authorizes the special visit, will take into consideration the following factors:

- The purpose of the visit
- The relationship of the visitor to the inmate
- The circumstances of the visit
- Distance traveled by the visitor

Whenever a special visit is denied, an entry into the duty log will be made. The entry will include the requesting visitor's name and the reason why the visit was denied.

#### **1023.9 ATTORNEY VISITS**

Inmates shall have access to any attorney retained by or on behalf of the inmate, or to an attorney the inmate desires to consult, in a confidential area. Staff shall not interfere with, suspend or cancel official visits except in circumstances where the safety, security or good order of the facility is compromised (see the Inmate Access to Courts and Counsel Policy).

Attorney's may visit inmates anytime as long as the visit does not unduly disrupt the orderly operation or jeopardize the safety of the facility. Attorney's employed by Mason County or the City of Shelton are allowed access to visit inmates within the secure confines of the facility. When inside the security perimeter of the facility, they must prominently display identification visible to all staff at all times.

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Non-county or City employed attorneys shall be checked in by Corrections Staff and shall produce valid identification identifying them as a licensed attorney. I.E. - bar card, etc. Non-county employed attorneys shall visit either via video visit or in the secure visitation area.

#### **1023.10 PROFESSIONAL VISITS**

Inmates should have access to professional visits from clergy, bondsman, counselors, educators and evaluators who are mandated by law to have access to their clients. Staff shall not interfere with, suspend or cancel official visits except to maintain order. Unless cleared and approved (see electronic Professional Visitor approved folder) to provide one on one or group services, these visits shall be either via video visitation or take place in the secure visitation area.

## Work Release Program

### 1032.1 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.

### 1032.2 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 (RCW 70.48.210).

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.

### 1032.3 WORK RELEASE PROGRAM

Any inmate who has met the eligibility requirements and received approval may be granted permission to leave the facility to work at his/her place of employment in accordance with state and local guidelines, court orders and the provisions of this policy.

The Jail Chief Deputy or the authorized designee has sole authority to approve participation in the program and is responsible for the overall administration of the Work Release Program.

The Work Release Program participants are limited to geographic restrictions of the facility and must remain within state boundary lines unless otherwise ordered by the sentencing court.

#### 1032.3.1 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
- Must not be a risk to the community

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.

#### 1032.3.2 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 instruct the employer to notify the contact person immediately if an inmate does not report to work, leaves prior to the scheduled departure time, or if any concerns arise during the work shift. The facility should provide a contact person who is available 24 hours a day, seven days a week, as some inmates will work evening or overnight shifts.

#### 1032.3.3 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

#### 1032.3.4 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, and 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 Jail Chief Deputy or the authorized designee.

#### 1032.3.5 FINANCIAL MANAGEMENT

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, and other appropriate expenses. Fines to the court, victim restitution, allowances to help pay family financial obligations, and funds for a

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savings account may also be taken from the account with the permission of the inmate, court order, or state law (RCW 72.11.020; RCW 72.65.020; RCW 72.65.050).

#### 1032.3.6 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.

#### 1032.3.7 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.

#### 1032.3.8 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.

### 1032.4 RECORDS

The following records shall be maintained by the Jail Chief Deputy or the authorized designee on all inmates participating in the Work Release Program and retained in accordance with the office established records retention schedule (WAC 44-14-03005):

- (a) All payments and accounting associated with the Work Release Program
- (b) All contacts between the staff and employers prior to releasing inmates to work and confirming all employment information
- (c) All daily logs of time worked and payments received

# Inmate Work Program

## **1036.1 PURPOSE AND SCOPE**

The purpose of this policy is to establish the guidelines and requirements for the Inmate Work Program. The Inmate Work Program allows inmates to improve and/or develop useful job skills, work habits and experiences which facilitate a successful return to the community.

## **1036.2 POLICY**

The Mason County Sheriff's Office shall operate an Inmate Work Program, in accordance with applicable federal, state or local work safety laws, rules and regulations, and to the extent the operation of inmate work programs do not pose a risk to the safety of the staff, other inmates or the public. The Inmate Work Program is inclusive of both internal and external inmate workers. This policy establishes the requirements, selection process, supervision and training of inmates prior to and after entering the facility's Inmate Work Program.

## **1036.3 LEGAL REQUIREMENTS**

### **1036.3.1 SENTENCED INMATE WORKERS**

Low Risk, sentenced Inmates who are physically and mentally able shall be offered work assignments if they are not assigned to other programs. Sentenced Inmates shall have outside work assignment priority. Inmates shall not be required to perform work which exceeds their physical limitations. Inmates may be excused from work in order to maintain their participation in an educational, vocational or drug abuse treatment program. The Office will abide by all laws, ordinances and regulations when using inmates to work in the facility.

### **1036.3.2 PRETRIAL AND UNSENTENCED INMATE WORK REQUIREMENTS**

Pretrial and unsentenced Inmates may volunteer to participate in the Inmate Work Program but shall not be required to participate in work beyond maintaining the immediate living area.

## **1036.4 INMATE WORKER SELECTION**

The Inmate Work Program coordinator shall be responsible for the selection and assignment of inmates to the various work assignments. The Coordinator should solicit input from other custody staff in assisting with inmate selection and assignment. Staff shall take into consideration the following eligibility criteria:

- (a) Inmates who have posed a threat in the past or have been charged with escape should be carefully screened for inmate work projects.
- (b) The inmate's charges and classification are such that the inmate will not pose a security risk to other inmates, staff or the public.
- (c) The inmate's capacity to perform physical tasks will match the job requirements.
- (d) The inmate is able to learn the necessary work routines.
- (e) The special interests, abilities, craft or trade of the inmate will benefit the work assignment.

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- (f) The inmate must have a risk score, based on the objective classification system of 0-6 (minimum security); Inmate's scoring 7-8 (low medium security) require an override authorized by the Alternative Sentencing Supervisor and Classification Deputy; Inmates scoring more than 8 require administrative override and authorization.

Inmates must be able to pass a health-screening test in accordance with the policies contained in this manual, and must meet statutory and regulatory requirements. Health-screening shall be done for inmates who work in the kitchen, around food products or who serve meals to the inmate population.

#### **1036.5 WORK ON PUBLIC PROJECTS**

Inmates assigned to the Inmate Work Program 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.

#### **1036.6 PROHIBITION OF NON-PUBLIC WORK PROJECTS**

Work projects on behalf of any private individual or to an individual's private property are strictly prohibited and may constitute a violation of the law.

#### **1036.7 SUPERVISION OF INMATE WORKERS**

The qualified personnel supervising inmates assigned to work crews should adhere to the following:

- (a) Inmate workers should be provided with safety equipment, clothing and footwear commensurate with the work performed. Safety equipment may include, but is not limited to, eye protection, gloves, hardhat or headwear and sunscreen for protection from sun exposure.
- (b) Work periods shall not exceed 10 hours per day.
- (c) Inmate workers should be provided with work breaks to allow them to take care of personal needs.
- (d) Inmate workers shall have access to nutritious meals and a reasonable amount of time to consume those meals during their work period.
- (e) Inmates who work shifts during the early morning or late-night hours should be provided with a quiet space to allow for sleep during daytime hours.
- (f) The inmate workday approximates the workday in the community.
- (g) Inmate performance is regularly evaluated and recorded.
- (h) Inmates receive written recognition of the competencies they acquire.
- (i) No tobacco products are allowed.

Inmate workers shall be under the direct supervision of the qualified supervisory personnel at all times when they are on assignment through the Inmate Work Program.

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Persons who are responsible for the supervision of inmates on work crews should receive training in basic areas of safety, security and reporting procedures as defined in the Alternative Sentencing program rules.

Disciplinary action for inmate worker misconduct shall adhere to the Inmate Discipline Policy.

#### **1036.8 INMATE WORKER TRAINING**

Inmates who are assigned to work in any area requiring the handling of any chemicals or the use of any equipment shall receive training from the respective work-crew supervisor prior to using the chemicals or equipment. Work-crew supervisors shall also train inmate workers on safety practices. Inmates should never be assigned to handle dangerous chemicals or equipment that normally require a level of expertise and competency beyond their demonstrated ability.

#### **1036.9 INMATE WORKER INCENTIVES**

The Jail Chief Deputy is responsible for establishing a recognition program for inmates assigned to the Inmate Work Program. Recognition of inmates can be observed in the following ways:

- (a) Granting "Good Time and Work" credits as allowed by state or local law.
- (b) Using credits for sentence reduction when allowed by statute.
- (c) Granting special housing, extra privileges, recreation and special rewards, as allowed by law, regulation and policy. Inmate welfare funds may be used to offset the cost of a reward program.
- (d) Awarding certificates of achievement for successful completion of vocational, educational and/or work programs.
- (e) When allowed by law, ordinance and in consideration with local labor relations, giving monetary compensation for work on government projects.



## Religious Programs

### 1038.1 PURPOSE AND SCOPE

This policy provides guidance regarding the right of inmates to exercise their religion and for evaluating accommodation requests for faith-based religious practices of inmates.

#### 1038.1.1 DEFINITIONS

Definitions related to this policy include:

**Compelling government interest** - A method for determining the constitutionality of a policy that restricts the practice of a fundamental right. In order for such a policy to be valid, there must be a compelling government interest, which is necessary or crucial to the mission of the Office, as opposed to something merely preferred, that can be furthered only by the policy under review.

**Least restrictive means** - A standard imposed by the courts when considering the validity of policies that touch upon constitutional interests. If the Office adopts a policy that restricts a fundamental religious liberty, it must employ the least restrictive measures possible to achieve its goal.

**Religious exercise** - Any exercise of religion, whether or not it is compelled by, or central to, a system of religious belief. The key is not what a faith requires but whether the practice is included in the inmate's sincerely held religious beliefs.

**Substantial burden** - For the purposes of this policy, substantial burden means either of the following:

- A restriction or requirement imposed by the Office that places an inmate in a position of having to choose between following the precepts of his/her religion and forfeiting benefits otherwise generally available to other inmates, or having to abandon one of the precepts of his/her religion in order to receive a benefit.
- The Office puts considerable pressure on an inmate to substantially modify his/her behavior in violation of his/her beliefs.

### 1038.2 POLICY

This office permits inmates 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 inmate 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 inmate for participating or not participating in any religion or religious practice. Inmates are not required to participate in religious programs or activities.

### 1038.3 CHAPLAIN

The Sheriff shall appoint an individual to serve as the chaplain to coordinate religious activities in the facility.

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The chaplain shall be responsible for assisting the Jail Chief Deputy with planning, directing and supervising all aspects of the religious program. The chaplain 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 Jail Chief Deputy and ensure the current list is available to the staff.
- (c) Reviewing requests for religious accommodations.
- (d) Approval and coordination of training lay clergy and religious volunteers.
- (e) Providing or arranging for grief counseling for inmates.
- (f) Distribution of a variety of religious texts.
- (g) Developing and maintaining liaison with a variety of religious faiths in the community.
- (h) Making reasonable efforts to enlist religious leaders from outside the community as necessary.
- (i) Seeking donations for religious programs from the community, when appropriate.
- (j) Working with inmate families when requested.
- (k) Providing guidance to the Sheriff and Jail Chief Deputy on issues related to religious observance.

#### **1038.4 RELIGIOUS BELIEFS AND ACCOMMODATION REQUESTS**

Inmates are not required to identify or express a religious belief. An inmate may designate any belief, or no belief, during the intake process and may change a designation at any time by declaring their religious belief in writing to the chaplain. Inmates seeking to engage in religious practices shall submit a request through the established process. Requests to engage in practices that are on the facility's list of accepted practices should be granted. Requests to engage in religious practices that are not on the approved list shall be processed as provided in this policy.

All requests for accommodation of religious practices shall be treated equally, regardless of the religion that is involved. Equal and consistent treatment of all religions and religious beliefs shall not always require that all inmates of the same religion receive the same accommodations. Requests for accommodation of religious practices shall be submitted to a supervisor. In determining whether to grant or deny a request for accommodation of a religious practice, the supervisor will work with the chaplain to determine the sincerity of the religious claim of an inmate. Requests should be denied only if the denial or reason for denial would further a compelling interest of the facility and is the least restrictive means of furthering that compelling interest.

A supervisor who does not grant the accommodation, either in part or in full, should promptly forward the request to the Jail Chief Deputy, who, after consultation with legal counsel as appropriate, should make a determination regarding the request within 10 days following the inmate's request.

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A Jail Chief Deputy who does not grant an accommodation, either in part or in full, should forward the request to the Sheriff with the basis for the denial within 14 days of the inmate's original request being made. The Sheriff or the authorized designee will review the denial and respond to the requesting inmate as soon as reasonably practicable.

The Jail Chief Deputy and the Sheriff shall be informed of all approved accommodations. The chaplain should make any necessary notifications to staff as necessary to meet an approved accommodation.

All inmate requests for religious accommodations and related determinations shall be fully documented in the inmate's record.

#### **1038.4.1 SUSPENSION OR REVOCATION OF ACCOMMODATIONS**

In an emergency or extended disruption of normal facility operations, the Jail Chief Deputy may suspend any religious accommodation. The Jail Chief Deputy may also revoke or modify an approved religious accommodation if the accommodated inmate violates the terms or conditions under which the accommodation was granted.

#### **1038.4.2 APPEALS OF SUSPENSION OR REVOCATION OF ACCOMMODATIONS**

Inmates may appeal the Jail Chief Deputy's denial, suspension or revocation of an accommodation through the inmate appeal process.

#### **1038.5 DIETS AND MEAL SERVICE**

The Jail Chief Deputy should provide inmates requesting a religious diet, including fasting and/or hour of dining, a reasonable and equitable opportunity to observe their religious dietary practice. This should be consistent with the security and orderly management of the facility. The chaplain shall provide a list of inmates authorized to receive religious diets to the food services manager. The food services manager shall establish a process for managing religious meal accommodations.

#### **1038.6 HAIRSTYLES AND GROOMING**

Unless it is necessary for the health and sanitation of the facility, inmates who wear head and facial hair in the observance of their religion will generally not be required to shave or cut their hair. To the extent reasonably practicable, alternative housing may be considered to accommodate the need for religious hair and grooming, while meeting the health and sanitation needs of the facility.

Any inmate whose appearance is substantially altered due to changes in facial hair or hair length may be required to submit to additional identification photographs.

#### **1038.7 RELIGIOUS TEXTS**

Religious texts should be provided to the requesting inmate, if available and if the texts do not pose a threat to the safety, security and orderly management of the facility.

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##### **1038.8 UNAUTHORIZED PRACTICES OR MATERIAL**

The following list, which is not intended to be exhaustive, includes materials or practices that shall not be authorized:

- (a) Animal sacrifice
- (b) Language or behaviors that could reasonably be construed as presenting a threat to facility safety or security
- (c) Self-mutilation
- (d) Use, display or possession of weapons
- (e) Self-defense or military training
- (f) Disparagement of other religions
- (g) Nudity or sexual acts
- (h) Profanity
- (i) Use of illegal substances or controlled substances without a prescription

##### **1038.9 GROUP RELIGIOUS SERVICES**

Group religious services may be allowed after due consideration of the inmate's classification or other concerns that may adversely affect the order, safety and security of the facility.

Alternatives to attendance of group religious services may include, but are not limited to:

- The provision of religious books and reading materials.
- Access to religious counselors.
- Recorded religious media (e.g., DVDs, CDs, video tapes).

##### **1038.10 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).

##### **1038.11 RELIGIOUS GARMENTS AND CLOTHING**

Inmates who practice a religion that requires particular modes of dress, garments, headgear, etc., other than standard-issue clothing, should generally be accommodated subject to the need to identify inmates and maintain security.

Head coverings shall be searched before being worn in the housing areas of the facility and shall be subject to random searches for contraband. Personal head coverings should be exchanged in favor of office-supplied head coverings when available and appropriate.

Inmates wearing headscarves or other approved coverings shall not be required to remove them while in the presence of or while visible to the opposite sex, if they so desire. Religious garments

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that substantially cover the inmate's head and face shall be temporarily removed during the taking of booking and identification photographs.

To the extent reasonably practicable, alternative housing may be considered to accommodate an inmate's need for religious attire, while meeting the security needs of the facility.

#### **1038.12 FAITH- AND MORALS-BASED COUNSELING**

The Jail Chief Deputy shall be responsible for establishing a plan for inmates to receive faith- and morals-based counseling from the chaplain or religious volunteers. Inmates should be reasonably accommodated, including reasonable access to clergy members and spiritual advisers, volunteer religious organizations, faith- and morals-based programs and other secular volunteer programs.

No inmate shall be required to participate in any such program.

#### **1038.13 SPACE AND EQUIPMENT FOR RELIGIOUS OBSERVANCES**

The Jail Chief Deputy shall ensure that there is adequate work space, equipment and furnishings for the chaplain to serve the inmate population, including providing access to areas of the facility. Space for group worship will be dictated by the availability of secure areas and the classification status of the inmates to be served. All recognized religious groups should have equal access to the space, equipment and services which the facility normally provides for religious purposes.

#### **1038.14 COMMUNITY RESOURCES**

The chaplain may minister his/her particular faith and any other similar faiths to inmates but should also establish contacts with clergy of other faiths, who can provide services to inmates of other religious denominations.

Whenever the chaplain is unable to represent or provide faith-based services to an inmate, a religious leader or other volunteer from the community 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 the chaplain. All efforts to contact faith-based representatives should be documented and retained in accordance with established records retention schedules.

Volunteers are another valuable resource that could be utilized extensively in the delivery of the religious program (see the Volunteer Program Policy). A volunteer could ensure that religious personnel who provide programming in the facility possess the required credentials and have the security clearance to enter the facility.

The chaplain, in cooperation with the Jail Chief Deputy or the authorized designee, shall develop and maintain communication with faith communities. The chaplain 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.

#### **1038.15 TRAINING**

The Office shall provide training to facility staff on the requirements of this policy.

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The Office shall also provide training in safety and security to the chaplain. The chaplain shall approve and train lay and clergy volunteers from the faiths represented in the inmate 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 correctional staff and inmates. This contact should be by direct physical observation of all cells, dayrooms and recreation areas. Electronic surveillance may be used to augment the observation of inmates but shall not be used as a substitute for personal contact and interaction.

All parts of the facility that are accessible to the public should be accessible to and usable by disabled persons.

## 1100.3 SPACE REQUIREMENTS

Except for emergency accommodations of a limited duration, all areas in the physical plant shall conform to building and design requirements contained in federal and state law, codes and minimum jail standards as required for their intended design and use. Areas that are repurposed for other than their original intended use shall likewise comply with all building design requirements for the new purpose.

## 1100.4 ALTERNATE APPROVED CAPACITY

If needed, the Jail Chief Deputy may base the approved capacity on an alternate method of calculation as provided in the jail standards. This alternate method allows capacity to be based on overall living space available to inmates, adjusted for the time inmates actually have access to any specific areas. If this method is selected, the Jail Chief Deputy, together with county officials, should develop a plan to bring the facility into agreement with the space-related standards within a five-year period.

## 1100.5 DETENTION HARDWARE

All locks, detention hardware, fixtures, furnishings and equipment shall have the proper security value for the areas in which they are used. The use of padlocks in place of security locks on cell or inmate housing unit doors is generally prohibited, as unauthorized locking mechanisms may pose a significant threat to the safety and security of the facility in the event of an emergency.

## 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.



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##### 1100.6.1 LIGHTING LEVELS

Lighting throughout the facility shall be sufficient for staff and inmates to perform necessary tasks. Night lighting levels should permit adequate illumination for supervision but should not unnecessarily interfere with the ability of inmates to sleep.

##### 1100.6.2 NATURAL LIGHT

All inmate living areas should provide visual access to natural light, unless prohibited by security concerns.

##### 1100.6.3 NOISE LEVEL

Noise levels at night should be sufficiently low to allow inmates to sleep. Nothing in this policy is intended to limit or impair in any way staff's ability to monitor the jail in a manner that is consistent with safety and security and good correctional practices. Noise measurements in each housing unit shall be documented by a qualified independent source no less than once per annual inspection cycle and a report provided to the Jail Chief Deputy.

##### 1100.6.4 VENTILATION

The ventilation system shall be sized and calibrated to supply fresh or circulated air in accordance with federal and state laws, codes and jail standards. Toilet rooms and cells with toilets shall be calibrated to have no less than four exchanges of air per hour, unless local codes require a different number of air exchanges.

Other than an emergency situation, inmates or jail staff shall not adjust or restrict the ventilation systems without the express permission of the supervisor. Any adjustments made to the ventilation system shall only be allowed for the duration of the emergency or until qualified maintenance personnel can adjust or repair the ventilation system.

Air quantities shall be documented at least annually by a qualified independent contractor, and a report provided to the Jail Chief Deputy.

##### 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.

Temperature readings shall be documented for each area of the facility on a weekly basis on the appropriate log. Staff shall immediately contact facility maintenance in the event that temperatures or humidity levels become uncomfortable.

##### 1100.6.6 CELL FURNISHINGS

Each inmate housed in this facility shall be provided with the following items:

- A sleeping surface and mattress at least 12 inches off the floor
- A writing surface and seat
- An area for the storage of clothing and personal belongings

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##### **1100.7 DAYROOMS**

Dayrooms shall be equipped with at least one shower for every 15 inmates or fraction thereof, and tables and sufficient seating for all inmates at capacity. Where inmates do not have continuous access to their cells, dayrooms shall also be equipped with one toilet, an immediate source of fresh potable water and lavatory with hot and cold water for every 12 inmates or fraction thereof.

##### **1100.8 JANITOR CLOSETS**

Janitor closets shall be located near or inside each housing unit. Each janitor closet should contain a sink and the necessary cleaning implements. Access to the janitor closets shall be controlled and supervised by the staff. Only inmates with a minimum security classification status shall be allowed access to the janitor closets, and then only under the supervision of staff.

##### **1100.9 EMERGENCY POWER**

The facility shall be equipped with a sufficient emergency power source to operate communications, security and alarm systems in control centers, and emergency lighting in corridors, stairwells, all inmate housing areas, security control points and audio-visual monitoring systems.

##### **1100.10 NEW CONSTRUCTION AND RENOVATION**

In the case of partial renovation of an existing facility, it is intended that these standards should apply only to the part of the facility being renovated. The remainder of the facility would be subject to the existing standards.

# Smoking and Tobacco Use

## 1102.1 PURPOSE AND SCOPE

This policy establishes limitations on the use of tobacco products by employees and others while on-duty or while in Mason County Sheriff's Office facilities or vehicles.

## 1102.2 POLICY

The Mason County Sheriff's Office recognizes that tobacco use is a health risk and can be offensive to other employees and to the public. This policy is consistent with Mason County Ordinance No. 30-87, relating to smoking in any building owned or leased by Mason County and is based on the following facts:

1. Smoking is a health hazard, both to those who smoke and those who do not;
2. Smoking is a fire hazard;
3. Smoking is an irritant to the large majority of employees, inmates, and persons who not smoke.

## 1102.3 EMPLOYEE USE

Employees' combined smoke breaks shall total no more than fifteen (15) minutes in any four (4) hour work period per day, excluding their lunch period. Because of shift schedules employees should have these breaks approved by their supervisors.

Smoking 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 inside county facilities and vehicles.

## 1102.4 ADDITIONAL PROHIBITIONS

No person may smoke in a public place or in any place of employment (RCW 70.160.030).

No person shall smoke tobacco products within 25 feet of a main entrance, exit or operable window of any public building, including any office facility (RCW 70.160.075).

## Control Center

### **1104.1 PURPOSE AND SCOPE**

The purpose of this policy is to establish a 24-hour secure control center for monitoring and coordinating the facility's security, life safety and communications systems, including aspects of staffing, training and communications and monitoring capabilities.

### **1104.2 POLICY**

It is the policy of this office to provide sufficient space for a 24-hour secure control center, which shall be staffed continuously for the purpose of monitoring and coordinating the facility's security, life safety and communications systems.

### **1104.3 COMMUNICATIONS AND MONITORING CAPABILITIES**

Control Room shall have multiple means of direct communication capabilities with all staff control stations in inmate housing areas, including telephone, intercom and radio.

The Control Room 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.

Control Room shall be located in close proximity to the inmate living areas to enable staff to monitor and respond quickly to any emergency.

### **1104.4 TRAINING**

The Training Supervisor shall ensure that all staff members assigned to posts are properly trained to perform all duties and responsibilities associated with this position. This is particularly true in fire, life safety and the emergency response procedures that have been implemented by the Jail Chief Deputy. 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 (WAC 44-14-03005).

# Crowding

## 1106.1 PURPOSE AND SCOPE

One of the determining factors in maintaining a safe and secure jail is to limit the inmate population to the number of beds constructed in each inmate classification level.

Occasionally, emergencies occur that will require the jail to exceed its approved bed capacity. This policy establishes the approved bed capacity of the facility, addresses temporary population excess and provides a plan for gathering statistics and projecting long-term space needs via a jail needs assessment.

## 1106.2 POLICY

It is the policy of the Mason County Sheriff's Office to manage the inmate population to the extent reasonably possible to avoid exceeding the facility's approved bed capacity. The Sheriff is responsible for ensuring that the number of inmates does not exceed the approved bed capacity.

The facility has a sufficient number of housing units in an appropriate configuration so that inmates can be separated according to the facility's classification plan.

In the event of an emergency that causes the facility to be populated beyond the approved bed capacity, every reasonable effort should be made to reduce the inmate population to the approved bed capacity as soon as reasonably practicable. The Office will take affirmative action to address excess population, including the petition of the Governor for assistance, in accordance with RCW 9.94A.875. In the event that the inmate population remains over capacity or continues to increase, a law and justice council 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 LAW AND JUSTICE COUNCIL

The county legislative authority is responsible for forming a law and justice council. When the number of inmates exceeds the approved bed capacity of the facility, the Sheriff should schedule a meeting with the council for the purpose of identifying potential solutions to reduce the population to, or below, the approved bed capacity (RCW 72.09.300).

A complete report describing facility population, conditions and mitigation recommendations should be provided to all members of the council, as well as being released to the public.

The council membership should include, but not limited to, the following:

- (a) The Sheriff
- (b) Representatives from municipal police departments within the county
- (c) Representatives of the city legislative authorities within the county
- (d) The county prosecutor and representatives of the municipal prosecutors within the county
- (e) A representative of the county's superior, juvenile, district and municipal courts

# Mason County Sheriff's Office

## Mason County SO Custody Manual

### Mason County SO Custody Manual

#### *Crowding*

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- (f) The county jail administrator
- (g) The county clerk
- (h) The county risk manager

Officials designated may appoint representatives.

#### **1106.4 FACILITY NEEDS ASSESSMENT**

In the event that the jail maintains an average 80 percent occupancy rate consistently for one year, the Office should initiate a jail needs assessment. The assessment initiates a systematic process that is designed to identify a variety of operational issues and program needs, and may indicate when expansion or replacement of the facility is warranted.

#### **1106.5 INMATE POPULATION REPORTS**

The Jail Chief Deputy or the authorized designee is responsible for ensuring that detailed daily logs of the facility's inmate population are completed and maintained by the staff. These logs shall reflect the monthly average daily population of sentenced and non-sentenced inmates by categories of male, female and juvenile as of midnight of each day. The number of inmates occupying holding cells shall also be counted at midnight each day. An inmate population report summarizing this information shall be created daily and distributed to the Sheriff and the Jail Chief Deputy (RCW 10.98.130).

# Mason County SO Custody Manual

Mason County SO Custody Manual

## Attachments

## **Strip Search form.pdf**



**Mason County Jail**  
*Strip Search Authorization and Report*

Inmate Name: \_\_\_\_\_ Sex \_\_\_\_ ID# \_\_\_\_ Booking Number: \_\_\_\_  
Last, First , MI

---

**Automatic:**

This search is automatically authorized based upon:

- ☐ Post Conviction status
  - ☒ Self-Surrender/Transfer from another facility (RCW 10.79.120)
  - ☐ No Bail Warrant
  - ☐ Offense involving Escape, Burglary, and Use of a deadly weapon
  - ☐ "Violent" Offense as defined under RCW 9.94A.030 (50) (41). Charge: \_\_\_\_\_
  - ☐ VUCSA (RCW 69.50) Specific Charge: \_\_\_\_\_
- 

**Probable Cause:**

This search was authorized by the shift supervisor based upon probable cause to believe there may be:

- ☐ Concealed weapon or other contraband: \_\_\_\_\_
- ☐ Possession of evidence of a crime: \_\_\_\_\_
- ☐ Existence of health condition necessitating immediate discovery by means of partial or complete strip search: \_\_\_\_\_

Shift Supervisor has given authorization for a search based upon the above information, and only because less intrusive means have failed to produce suspected materials of conditions.

**Pre-Authorization Approved by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

---

The search was conducted on \_\_\_\_\_ at \_\_\_\_\_ Location: \_\_\_\_\_  
DATE TIME

Search conducted/observed by: \_\_\_\_\_ Sex \_\_\_\_ ID# \_\_\_\_  
OFFICER NAME  
\_\_\_\_\_ Sex \_\_\_\_ ID# \_\_\_\_  
OFFICER NAME

The search was conducted with all safeguards afforded the inmate through agency standard operating procedure. The following weapons, other contraband, criminal evidence or health condition was found: \_\_\_\_\_

**Authorized by::** \_\_\_\_\_ **Date:** \_\_\_\_\_

---

**Custody Lieutenant Signature:** \_\_\_\_\_ **Date :** \_\_\_\_\_

## **Volunteer Application 031418.pdf**

**Personal**

Please use and attach additional sheets of paper for any section requiring an answer where additional space is required.

Full Name: \_\_\_\_\_

List any and all Aliases (Including Maiden/Married Names/Nicknames): \_\_\_\_\_

\_\_\_\_\_ U.S. Citizen ☐ Yes ☐ No

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

Legal Address: Street: \_\_\_\_\_ Mailing: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (     ) \_\_\_\_\_ Work Phone: (     ) \_\_\_\_\_

**Reason for requesting security clearance-I. E- religious volunteer, chemical dependency provider, chaplain, cook, etc.** \_\_\_\_\_

**Residence**

Beginning with the most recent, list residence addresses and dates for the past ten years.

\_\_\_\_\_ ☐ Rent ☐ Own

Address (Street and Number) City State Zip Dates Occupied Residence

Address (Street and Number) City State Zip Dates Occupied Residence

Address (Street and Number) City State Zip Dates Occupied Residence

Address (Street and Number) City State Zip Dates Occupied Residence

Address (Street and Number) City State Zip Dates Occupied Residence

**References**

List 3 personal references (not relatives) that have known you well during the last five years, and can vouch for your integrity.

Name: \_\_\_\_\_ Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Home Phone: (     ) \_\_\_\_\_ Work Phone: (     ) \_\_\_\_\_ Length of Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Home Phone: (     ) \_\_\_\_\_ Work Phone: (     ) \_\_\_\_\_ Length of Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Home Phone: (     ) \_\_\_\_\_ Work Phone: (     ) \_\_\_\_\_ Length of Relationship: \_\_\_\_\_

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**Arrest History** Please fill out the following information accurately and completely.

---

---

Have you ever been cited, arrested, convicted, charged or questioned for any offense, violation or any statute or ordinance, law or regulation by any civil or military authority? (Include any convictions or adjudications as a juvenile.)

☐ Yes ☐ No If yes, describe below:

Date	Location	Arresting Agency	Original Charge	Reduced To	Court Action

List below any Traffic and/or Parking citations you have received since you have been driving. Please list citations you received in this county and any other county.

Date	Location/Agency	Accident Related?	Original Charge	Reduced To	Court Action
		<input type="checkbox"/> Yes <input type="checkbox"/> No			
		<input type="checkbox"/> Yes <input type="checkbox"/> No			
		<input type="checkbox"/> Yes <input type="checkbox"/> No			
		<input type="checkbox"/> Yes <input type="checkbox"/> No			
		<input type="checkbox"/> Yes <input type="checkbox"/> No			

Have you ever been licensed to drive in another state?

☐ No ☐ Yes If yes, State: \_\_\_\_\_ License Number and Type: \_\_\_\_\_

Have you ever had your license revoked, suspended or restricted?

☐ No ☐ Yes If yes, State: \_\_\_\_\_ Date and Reason Revoked/Susp: \_\_\_\_\_

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**Mason County** Please answer the following yes or no questions. If your answer is yes, please explain below in the space provided.

---

---

List the names of any acquaintances employed by Mason County:

\_\_\_\_\_

Have you ever applied or been employed by Mason County in any capacity (paid or volunteer)? ☐ Yes ☐ No

If yes, details: \_\_\_\_\_

Have you applied for a security clearance within the last three years (volunteer or paid)? ☐ Yes ☐ No

If yes, details: \_\_\_\_\_

Have you ever been fired, discharged or asked to resign from any position? ☐ Yes ☐ No

If yes, details: \_\_\_\_\_

Have the police ever been called to your home? ☐ Yes ☐ No

If yes, details: \_\_\_\_\_

Have you ever committed any criminal violation that has gone undetected? ☐ Yes ☐ No

If yes, details: \_\_\_\_\_

Have you or your spouse ever been sued or summoned into court? ☐ Yes ☐ No

If yes, details: \_\_\_\_\_

Have any relatives of you or your spouse ever been convicted of any crime or imprisoned? ☐ Yes ☐ No

If yes, details: \_\_\_\_\_

Have you ever had any friends or relatives in the Mason County Jail? ☐ Yes ☐ No

If yes, details: \_\_\_\_\_

Do you now or have you ever had any gambling debts? ☐ Yes ☐ No

If yes, details: \_\_\_\_\_

Have you ever had an FBI fingerprint check done for any reason? ☐ Yes ☐ No

If yes, details: \_\_\_\_\_

Have you received any verbal or written reprimands or suspensions for violations of policy? ☐ Yes ☐ No

If yes, details: \_\_\_\_\_

Would you have difficulty working with members of another sex, race, religion or nationality? ☐ Yes ☐ No

If yes, details: \_\_\_\_\_

Would you be able to follow direct orders even if you did not agree with them? ☐ Yes ☐ No

If yes, details: \_\_\_\_\_

In any job that you've held, have you been involved in any physical or verbal confrontations? ☐ Yes ☐ No

If yes, details: \_\_\_\_\_

In any previous job were you ever exposed to high stress or extreme emergency situations? ☐ Yes ☐ No

If yes, details: \_\_\_\_\_

Have you ever left a place of employment without giving two weeks notice? ☐ Yes ☐ No

If yes, details: \_\_\_\_\_

Have you ever operated a motor vehicle under the influence of alcohol or drugs? ☐ Yes ☐ No

If yes, details: \_\_\_\_\_

Have you ever been extensively delinquent on any of your financial obligations? ☐ Yes ☐ No

If yes, details: \_\_\_\_\_

Have you ever had any of your financial obligations turned over to a collections agency? ☐ Yes ☐ No

If yes, details: \_\_\_\_\_

Have you ever filed bankruptcy? ☐ Yes ☐ No

If yes, details: \_\_\_\_\_

☐ Yes      ☐ No

☐ Yes      ☐ No

☐ Yes      ☐ No

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

---

Date

---

---

***For Agency Use Only***

Do not write below this line.

---

- ☐ Driver's Check      Date: \_\_\_\_\_ Completed By: \_\_\_\_\_
- ☐ Wants/Warrants      Date: \_\_\_\_\_ Completed By: \_\_\_\_\_
- ☐ Fingerprints      Date: \_\_\_\_\_ Completed By: \_\_\_\_\_
- ☐ Background      Date: \_\_\_\_\_ Completed By: \_\_\_\_\_

---

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***Approval***

---

\_\_\_\_\_  
**Program Supervisor**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Lieutenant**

\_\_\_\_\_  
Date

\_\_\_\_\_  
**Jail Administrator**

\_\_\_\_\_  
Date





## **Unauthorized and Restricted mail list.docx.pdf**

#### Unauthorized and Restricted mail list:

- Mail to or from an individual with whom contact is restricted by a court.
- Mail containing threats of physical harm against any persons or threats of criminal activity.
- Mail containing blackmail or extortion threats.
- Mail considered contraband or could secrete contraband, or relates to sending contraband in or out of the facility.
- Mail depicting or describing the procedures for constructing or using weapons, ammunition, bombs, or incendiary devices.
- Mail containing plans to escape, or mail depicting or describing blueprints or operation detail of an existing facility's security devices (e.g. locks, electronics, facility grounds/buildings, etc.)
- Mail containing plans for activities in violation of facility rules or for criminal activity, or mail that violates facility rules.
- Mail written or appears to be written in code.
- Maps or charts of any kind, with the exception of those received by the facility libraries.
- Mail in a foreign language with contents not understood by the inspecting staff, after reasonable efforts have been made to translate.
- Mail containing information which could create a risk of violence and/or physical harm.
- Sexually explicit mail;
  - Sexually explicit refers to any pictorial representation intended for sexual gratification and shows male or female genitalia, full frontal nudity, or depicts the following sexual behaviors:
    - Non-consenting
    - A minor, or a minor alone is depicted in a sexually suggestive way.
    - Acting in a forceful, threatening, or violent manner.
    - Dominating one or more of the other participants.
    - In a submissive role.
    - Degraded or humiliates or appears to willingly engage in behavior which is degrading or humiliating.
  - Bodily excretory behavior appearing to be sexual in nature.
  - Bestiality, sadomasochistic behavior, and/or bondage.
  - Sexual acts including, but not limited to, intercourse/penetration, sodomy, fellatio, cunnilingus, anilingus, or masturbation.
- Mail deemed a threat to specific and articulated legitimate penological objectives.
- Publications which have been altered after publication (e.g., pages or portions of pages removed, extraneous markings, etc.).
- Mail advocating any group is inferior based on national origin, race, color, religion, age, gender, marital status or status as a state registered domestic partner, sexual orientation, etc.

- Mail purposed to be legal mail, but upon visual scanning for contraband is determined to be general correspondence.
- Mail containing cash or personal checks.
- Mail containing markings of gang symbols or symbols of other groups which may be thought to perpetuate violence.
- Mail containing a photo wherein the non-photo side is, or can be, separated from the photo side of the picture, or mail containing multiple copies of the same photo.
- Mail containing items such as hazardous materials, correction tape, fluids, crayon, metal clasps, staples, lipstick, glitter, stains, perfume, glue, adhesives, stickers, rubber inked stamps, stickers/labels, stamps, batteries, or other envelopes containing another inmate's correspondence.
- Mail containing cassette tapes or CD's.
- Publications (i.e reproduced handwritten, typed/printed, or pictorial materials, including books, periodicals, newspapers, magazines and pamphlets) and catalogs (i.e. a publication predominantly or substantially focused on offering items for sale) not mailed directly from a publisher/retailer.
- Mail without an identifiable author/sender.
- The outside of the envelope or package does not contain a return address as defined in policy.
- Other items which threaten the security and order of the facility or the inmate's treatment as identified by the Jail Administrator or designee.

**Outgoing** mail can also be restricted for the following reasons:

- The inmate's judgment and Sentence prohibits contact with the individual or class of individuals during or upon release from custody.
- The mail is addressed to a minor whose parent or guardians have objected in writing to such correspondence.
- There is an active no contact order with the individual.
- The mail is addressed to an individual or his/her guardian who has previously received unwanted mail from the inmate and has complained or asked mail from the inmate not be sent.
- Mail which does not specify the intended recipient.
- Mail which threatens or facilitates criminal activity or constitutes evidence of a crime.

## **Jail Medical Intake 2017.pdf**

# JAIL INTAKE ASSESSMENT

<b>Inmate Name:</b>					
	Last	First	Middle	Date:	Time:

## ARRESTING / TRANSPORTING OFFICER QUESTIONS

	NO	YES	If yes, details:
Has this arrestee engaged in any assaultive or violent behavior?	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Has your search of this arrestee or the environment where arrested uncovered any dangerous contraband such as drugs or weapons?</b>	<input type="checkbox"/>	<input type="checkbox"/>	
Has this arrestee attempted to elude or escape from custody?	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Are you aware of this arrestee's consumption of use of a potentially dangerous level of alcohol and or drugs?</b>	<input type="checkbox"/>	<input type="checkbox"/>	
Are you aware of any acute medical condition or injury recently sustained by this arrestee that may require immediate medical attention? (ie: accident)	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Has this arrestee demonstrated any behaviors that might suggest mental illness or mental disability?</b>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Has this arrestee demonstrated behaviors which might suggest he/she wants to harm self?</b>	<input type="checkbox"/>	<input type="checkbox"/>	
Are you aware of the need to keep this arrestee separate from other person housed in this facility?	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Do you have information which may assist this agency in the care, custody and/or a release plan for this arrestee?</b>	<input type="checkbox"/>	<input type="checkbox"/>	

Printed Officer Name and Badge Number

Arresting Agency

Officer Signature

\*\*\*\*\* CORRECTIONS USE ONLY \*\*\*\*\*

### Jail Medical Intake

*~Shaded answers require immediate supervisor notification and name of supervisor notified~*

	NO	YES	If yes, details:
Do you have respiratory problems?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you have food or medicine allergies?	<input type="checkbox"/>	<input type="checkbox"/>	
Are you in need of a special diet for any reason?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you have heart problems?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you have High Blood Pressure?	<input type="checkbox"/>	<input type="checkbox"/>	
Are you on Birth Control or could you be pregnant?	<input type="checkbox"/>	<input type="checkbox"/>	
Have you had a recent delivery or abortion?	<input type="checkbox"/>	<input type="checkbox"/>	
Are you a hemophiliac? (A bleeder?)	<input type="checkbox"/>	<input type="checkbox"/>	
Do you have any major dental problems?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you have Epilepsy or seizures?	<input type="checkbox"/>	<input type="checkbox"/>	
Have you had a recent accident or head injury?	<input type="checkbox"/>	<input type="checkbox"/>	
Have you been diagnosed with a traumatic brain injury?	<input type="checkbox"/>	<input type="checkbox"/>	
Have you been diagnosed with a Developmental Delay Disorder?	<input type="checkbox"/>	<input type="checkbox"/>	
Are you currently experiencing pain?	<input type="checkbox"/>	<input type="checkbox"/>	
Are you experiencing abnormal body function?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you have any open or oozing sores on your body?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you have liver disease?	<input type="checkbox"/>	<input type="checkbox"/>	

	NO	YES	If yes, details:
<b>Are you now or have you recently received psychiatric care?</b>	<input type="checkbox"/>	<input type="checkbox"/>	
Are you experiencing symptoms of mental illness such as anxiety or depression?	<input type="checkbox"/>	<input type="checkbox"/>	
Are you thinking about committing suicide?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Have you ever thought about committing suicide?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Has anyone in your immediate family recently committed or attempted suicide?	<input type="checkbox"/>	<input type="checkbox"/>	
Have you visited the hospital or clinic within the last 72 hours?	<input type="checkbox"/>	<input type="checkbox"/>	
Are you or should you be taking any medications?	<input type="checkbox"/>	<input type="checkbox"/>	
If yes: Do you have the medication with you?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>Have you been drinking alcohol? If yes, PBT READING _____</b>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Are you dependent on any drugs or medications?</b>	<input type="checkbox"/>	<input type="checkbox"/>	
Do you have or have you been exposed to hepatitis?	<input type="checkbox"/>	<input type="checkbox"/>	
Are you diabetic?	<input type="checkbox"/>	<input type="checkbox"/>	
If yes: Do you take insulin? (How often?)	<input type="checkbox"/>	<input type="checkbox"/>	
Do you have kidney disease?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you have a venereal disease?	<input type="checkbox"/>	<input type="checkbox"/>	
<b>TUBERCULOSIS SCREENING: (Refer to medical if 2 yes answers in TB section) If yes, get clearance before entering jail.</b>			
Do you cough up blood?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you have a fever, chills or night sweats?	<input type="checkbox"/>	<input type="checkbox"/>	
Have you had a recent unexplained weight loss?	<input type="checkbox"/>	<input type="checkbox"/>	
Have you ever had a positive TB skin Test?	<input type="checkbox"/>	<input type="checkbox"/>	
If yes: Did you take medicine or have a chest x-ray?	<input type="checkbox"/>	<input type="checkbox"/>	
Have you had close contact with someone who has TB within the last year?	<input type="checkbox"/>	<input type="checkbox"/>	
<b>STAFF OBSERVATION:</b>			
Is the inmate fully conscious and alert?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Inmate complained of medical problems or carrying themselves in ways which indicate they are experiencing pain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Are there signs of Mental Illness?	<input type="checkbox"/>	<input type="checkbox"/>	

<b>FINANCIAL RESPONSIBILITY/MISC QUESTIONS:</b>	NO	YES
Do you have medical insurance?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, who is the provider?		
Do you own a house?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a Job?	<input type="checkbox"/>	<input type="checkbox"/>
What is your monthly income?	\$	
Do you need a place to live when you get out of jail?	<input type="checkbox"/>	<input type="checkbox"/>
Do you want to see a counselor about a plan for when you get out?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any religious beliefs or needs we need to be aware of?	<input type="checkbox"/>	<input type="checkbox"/>

<b>CORRECTIONS USE ONLY</b>
Any other notes for Medical or Transition Services?

<b>PRISONER ACCEPTANCE</b>	
Receiving Officer: _____	Date: _____
Accepted for Admission: YES NO	Accepted with Medical Clearance: YES NO

## Documentation of Training scan.jpg

# Mason County SO Custody Manual

Mason County SO Custody Manual

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