

## **PURPOSE OF THE FEDERAL PERFORMANCE-BASED DETENTION STANDARDS**

The Federal Performance-Based Detention Standards is based on the American Correctional Association Standards and is designed to establish the performance level required by the Government to meet the detention contract requirements. The Federal Performance-Based Detention Standards is an aid for Subject Matter Experts designed to support the Government Contract Quality Assurance Program (Federal Acquisition Regulation Part 46).

## **2017 Update of the Federal Performance Based Detention Standards (FPBDS)**

This update of FPBDS included the review of current industry standards in medical, food, fire and environmental safety and other standards, including:

- American Correctional Association's (ACA), Performance Based Standards for Adult Local Detention Facilities (ALDF), 4<sup>th</sup> Edition
- National Commission on Correctional Health Care (NCCHC), Standards for Health Services in Jails, 2008
- National Fire Protection Association (NFPA), Life Safety Code 101
- Food and Drug Administration, U.S. Food Code, 2013

Additionally the review incorporates the principles established by the January 2016, U.S. Department of Justice, Report and Recommendations, Concerning the Use of Restrictive Housing.

If a standard discussed below was directly related to one of the industry standards used above, the industry standard is cited below the FPBDS standard (e.g., "4-ALDF-7D-06").

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# ADMINISTRATION AND MANAGEMENT

## SECTION A:

## A.1 Policies and Procedures

- A.1.1 The facility director ensures that written policies and procedures describe all facets of facility operation, maintenance, and administration. **4-ALDF-7D-06**
- A.1.2 Written policies and procedures are communicated to all employees unless security concerns justly limit access. **4-ALDF-7D-06**
- A.1.3 Detainees can obtain copies of facility policies and procedures unless security concerns justly limit access. **4-ALDF-7D-06**
- A.1.4 Policies and procedures are reviewed and updated on an annual basis. **4-ALDF-7D-06**

## A.2 Quality Control

- A.2.1 An internal quality control plan requires an annual review of the facility operations to ensure compliance with facility policies and procedures. Corrective measures are identified and completed. **4-ALDF-7D-09**
- A.2.2 At a minimum, the internal quality control plan addresses the following areas:
  - A.2.2.a Detainee Health Care
  - A.2.2.b Security and Control
  - A.2.2.c Safety and Sanitation
  - A.2.2.d Food Service
  - A.2.2.e Detainee Grievance Program
  - A.2.2.f Staff Training/Professional Certifications
- A.2.3 The review of the detainee grievance program not only ensures the viability of the grievance program but identifies grievance trends pertaining to facility functions and staff.
- A.2.4 Documentation of the previous quality control review and the corrective action measures are kept on file.
- A.2.5 The facility administrator or assistant facility administrator, and designated department heads visit the facility's living and activity areas at least weekly to encourage information contact with staff and detainees and to encourage informal contact with staff and detainees and to informally observe living and working conditions. **4-ALDF-2A-06**

## A.3 Detainee Records

- A.3.1 The facility maintains custody records on all detainees committed or assigned to the facility.

- A.3.2 Each detainee custody record will include the following:
- A.3.2.a Intake/booking information
  - A.3.2.b Cash and property receipts
  - A.3.2.c Reports of disciplinary actions, grievances, incidents, or crimes(s) committed while in custody
  - A.3.2.d Frequency and cumulative length of restrictive housing placements **DOJ-Restrictive Housing Report**
  - A.3.2.e Records of program participation
  - A.3.2.f Work assignments
  - A.3.2.g Classification records
- A.3.3 The contents of detainee records are identified and separated according to a format approved by the facility director. **4-ALDF 7D-20**
- A.3.4 Detainee files shall be located in a secured area and maintained in an appropriately confidential manner.
- A.3.5 Detainee files remain active during the detainee's stay at a facility and are closed and archived upon the detainee's transfer, release, or removal.

#### **A.4 Facility Admission and Orientation Program**

- A.4.1 The admission process for newly admitted detainees includes but is not limited to: **4-ALDF 2A-21**
- A.4.1.a Recording basic personal data and information to be used for mail and visiting lists
  - A.4.1.b Photographing and fingerprinting
  - A.4.1.c Medical, dental, and mental health screenings
  - A.4.1.d Screening to detect signs of drug/alcohol abuse
  - A.4.1.e Suicide screening
  - A.4.1.f Searching of detainees
  - A.4.1.g Inventorying of detainee property
- A.4.2 Newly admitted detainees are separated from the general population during the admission process. **4-ALDF-2A-22**
- A.4.3 Before reassignment from intake and short-term holding, there is an initial classification of the detainee that considers safety and security issues. **4-ALDF-2A-25**



- A.4.4 Prior to placing and detainee in general population, the detainee is given the opportunity to shower and is issued clean laundered clothing. **4-ALDF-2A-26**
- A.4.5 Prior to being placed in the general population, each detainee is provided with an orientation to the facility, which includes at a minimum **(4-ALDF-2A-27; 4-ALDF-4D-22)**:
- A.4.5.a Written materials describing facility rules and sanctions
  - A.4.5.b Explanation of mail and visiting procedures
  - A.4.5.c Explanation of transportation options for visitors
  - A.4.5.d Explanation of grievance procedures
  - A.4.5.e Explanation of all fees, charges, or copayments that may apply
  - A.4.5.f Description of services, programs, and eligibility requirements
  - A.4.5.g Information on how to access health care
  - A.4.5.h This information is contained in a written handbook that is given to each detainee.
  - A.4.5.i The handbook is translated into those languages spoken by significant numbers of detainees
  - A.4.5.j Sexual Assault Prevention/Intervention
  - A.4.5.k Sexual Assault Self-Protection
  - A.4.5.l Reporting sexual abuse/assault
  - A.4.5.m Sexual Assault Treatment and Counseling
- A.4.6 Detainees are screened within 24-hours of arrival at the facility for potential vulnerabilities or tendencies of acting out with sexually aggressive behavior; housing assignments are made accordingly. **4-ALDF-4D-22-1**
- A.4.7 Detainees verify, by signature, the receipt of their initial orientation and of the detainee handbook and written orientation materials. Signed acknowledgement of the handbook is maintained in the detainee's file. **4-ALDF-2A-28**
- A.4.8 If a detainee cannot read orientation materials then they are read to the detainee by a staff member, or are provided through the use of an audio or video tape. For detainees who do not speak English, interpretive services are provided. **4-ALDF-2A-28**

## **A.5 Detainee Property**

- A.5.1 An itemized inventory of all personal property of newly admitted detainees is conducted during intake. An inventory receipt is provided to the detainee listing all property being held until release. **4-ALDF-2A-23**
- A.5.2 Space is provided for storing the personal property of detainees safely and securely. **4-ALDF 2A-24**
- A.5.3 A system for the tracking and maintenance of detainee personal property and funds on deposit with the facility exists and is in use.

## **A.6 Detainee Transfers and Releases**

- A.6.1 Detainees are only released or transferred with proper orders and notification from the agency of jurisdiction.
- A.6.2 Prior to releasing or transferring a detainee, the facility verifies relevant paperwork/orders, as well as the identity of the detainee being released.
- A.6.3 Absent a compelling reason, detainees are not released directly from restrictive housing to the community. **DOJ-Restrictive Housing Report**

## **A.7 Detainees with Disabilities**

- A.7.1 Detainees with disabilities, including temporary disabilities, are housed in a manner that provides for their safety and security. **4-ALDF-6B-04**
- A.7.2 Housing used by detainees with disabilities, including temporary disabilities, is designed for their use and provides for integration with other detainees. **4-ALDF-6B-04**
- A.7.3 Program and service areas are accessible to detainees with disabilities housed at the facility. **4-ALDF-6B-04**
- A.7.4 Appropriately trained individuals are assigned to assist disabled detainees who cannot otherwise perform basic life functions. **4-ALDF-6B-06**
- A.7.5 Detainees with disabilities are provided with the education, equipment, and facilities, and the support necessary to perform self-care and personal hygiene in a reasonably private environment. **4-ALDF-6B-07**
- A.7.6 Reasonable accommodation is made to ensure that all parts of the facility that are accessible to the public are accessible and usable by visitors with disabilities. **4-ALDF-7E-05**

## **A.8 Discrimination Prevention**

- A.8.1 There is no discrimination regarding administrative decisions or program access based on a detainee's race, religion, national origin, gender, sexual orientation, or disability. **4-ALDF-6B-02**

- A.8.2 When both males and females are housed in the same facility, all available services and programs are comparable. Neither gender is denied opportunities on the basis of its smaller number in the population.

## A.9 Staffing

- A.9.1 A comprehensive staffing analysis is conducted annually. Essential posts and positions, as identified in the staffing plan, are consistently filled with qualified personnel. **4-ALDF 2A-14**
- A.9.2 Prior to entering on duty, a background investigation is conducted on all new employees, contractors, and volunteers.
- A.9.3 Background investigations include:
- A.9.3.a Criminal history
  - A.9.3.b Employment References
  - A.9.3.c Credit history
  - A.9.3.d Verification of US citizenship
  - A.9.3.e Pre-employment interview
  - A.9.3.f Drug screening
- A.9.4 A pre-employment physical examination is conducted for all potential Security personnel. **4-ALDF-7B-04**
- A.9.5 Within one year of each on-site employee's enter on duty date the facility administrator, or designee, shall review, identify, and resolve all derogatory information obtained during the background investigation.
- A.9.6 The facility conducts re-investigations of employees, contractors, and volunteers.
- A.9.7 Compliance with restrictive housing policies is reflected in the employee-evaluations of staff assigned to restrictive housing units. **DOJ-Restrictive Housing Report**
- A.9.8 The facility has a written code of ethics that it provides to all employees. At a minimum the code: **4-ALDF-7C-02; 4-ALDF-7C-01**
- A.9.8.a Prohibits staff, contractors, and volunteers from accepting any gift or gratuity from, or engaging in personal relations or business transactions with a detainee or a detainee's immediate family.
  - A.9.8.b Requires employees to immediately report arrests or other integrity violations relating to themselves or to fellow-employees.
  - A.9.8.c Prohibits the use/possession of illegal drugs.

- A.9.9 Sexual contact between staff and detainees, or contract personnel and detainees, regardless of consensual status, is prohibited and subject to administrative and criminal disciplinary sanctions. **4-ALDF-4D-22-5**
- A.9.10 Staff acknowledges in writing that they have reviewed facility work rules ethics regulations conditions of employment and related documents. A copy of the signed acknowledgement is placed in each staff member's personnel file. **4-ALDF-7C-03**
- A.9.11 The facility provides a confidential means for reporting staff misconduct by other staff and/or detainees.
- A.9.12 An investigation is conducted and documented whenever a sexual assault or threat is reported. **4-ALDF-4D-22-2**
- A.9.13 Staff misconduct allegations are investigated and/or reported to appropriate law enforcement entities.
- A.9.14 The agency of jurisdiction is notified of all employee sexual misconduct allegations made by detainees.

## **A.10 Staff Training**

- A.10.1 Each new employee is provided with an orientation prior to assuming duties. At a minimum, the orientation includes **(4-ALDF-7B-05)**:
  - A.10.1.a Working conditions
  - A.10.1.b Code of ethics
  - A.10.1.c Personnel policy manual
  - A.10.1.d Employees' rights and responsibilities
  - A.10.1.e Overview of the criminal justice system
  - A.10.1.f Tour of the facility
  - A.10.1.g Facility goals and objectives
  - A.10.1.h Facility organization
  - A.10.1.i Staff rules and regulations
  - A.10.1.j Personnel policies
  - A.10.1.k Program overview
- A.10.2 A qualified individual coordinates the staff development and training program. This person has specialized training for that position. Full-time training personnel complete at least a 40-hour training-for-trainers course. The training plan is reviewed annually. **4-ALDF-7B-06**
- A.10.3 All new professional and support employees, including contractors, who have regular or daily detainee contact receive training during their first year

of employment. Forty hours are completed prior to being independently assigned to a particular job. An additional 40 hours of training is provided each subsequent year of employment. At a minimum, this training covers the following areas:

- A.10.3.a Security procedures and regulations
  - A.10.3.b Supervision of detainees
  - A.10.3.c Signs of suicide risk
  - A.10.3.d Suicide precautions
  - A.10.3.e Use-of-force regulations and tactics
  - A.10.3.f Report writing
  - A.10.3.g Detainee rules and regulations
  - A.10.3.h Key control
  - A.10.3.i Rights and responsibilities of detainees
  - A.10.3.j Safety procedures
  - A.10.3.k Interpersonal relations
  - A.10.3.l Social/cultural lifestyles of the detainee population
  - A.10.3.m Cultural diversity
  - A.10.3.n Communication skills
  - A.10.3.o Cardiopulmonary resuscitation (CPR)/first aid
  - A.10.3.p Counseling techniques
  - A.10.3.q Sexual harassment/sexual misconduct awareness
  - A.10.3.r Code of ethics
- A.10.4 All new full-time health care employees complete a formalized, 40-hour orientation program before undertaking their assignments. At a minimum, the orientation program includes instruction in the following **(4-ALDF-7B-09)**:
- A.10.4.a The purpose, goals, policies, and procedures for the facility and parent agency
  - A.10.4.b Security and contraband regulations
  - A.10.4.c Key control
  - A.10.4.d Appropriate conduct with detainees
  - A.10.4.e Responsibilities and rights of employees
  - A.10.4.f Universal precautions
  - A.10.4.g Occupational exposure

- A.10.4.h Personal protective equipment
- A.10.4.i Bio hazardous waste disposal
- A.10.4.j An overview of the correctional field
- A.10.5 All new correctional officers receive 160 hours of training during their first year of employment. At least 40 of these hours are completed prior to being independently assigned to any post. At a minimum, this training covers the following areas **(4-ALDF-7B-10)**:
  - A.10.5.a Security and safety procedures
  - A.10.5.b Emergency and fire procedures
  - A.10.5.c Supervision of offenders
  - A.10.5.d Suicide intervention/prevention
  - A.10.5.e Use-of-force
  - A.10.5.f Offender rights
  - A.10.5.g Key control
  - A.10.5.h Interpersonal relations
  - A.10.5.i Communications skills
  - A.10.5.j Standards of conduct
  - A.10.5.k Cultural awareness
  - A.10.5.l Sexual abuse/assault intervention
  - A.10.5.m Cultural diversity for detainees and staff
  - A.10.5.n Code of ethics
  - A.10.5.o Correctional implications of young adult (age 18-24) brain development and associated de-escalation tactics. **DOJ-Restrictive Housing Report**
- A.10.6 Written policy, procedure, and practice provide that all correctional officers receive at least 40 hours of annual training. This training shall include at a minimum the following areas **(4-ALDF-7B-10-1)**:
  - A.10.6.a Standards of conduct/ethics
  - A.10.6.b Security/safety/fire/medical/emergency procedures
  - A.10.6.c Supervision of offenders including training on sexual abuse and assault
  - A.10.6.d Use of force

- A.10.7 Facility management and supervisory staff receive at least 40 hours of management and supervision training during their first year and at least 24 hours of management training each year thereafter. **4-ALDF-7B-11**
- A.10.8 All personnel authorized to use firearms receive appropriate training before being assigned to a post involving the possible use of such weapons. **4-ALDF-7B-14**
- A.10.9 Firearms' training covers the use, safety, and care of firearms and constraints on their use. **4-ALDF-7B-14**
- A.10.10 All personnel authorized to use firearms must demonstrate competency in their use at least annually. **4-ALDF-7B-14**
- A.10.11 All personnel authorized to use chemical agents receive thorough training in their use and in the treatment of individuals exposed to a chemical agent. **4-ALDF-7B-15**
- A.10.12 All security personnel are trained in self-defense and in the use of force to control detainees. **4-ALDF-7B-16**

## **A.11 Emergency Plans**

- A.11.1 There is a plan that specifies the procedures to be followed in situations that threaten facility security. Such situations include but are not limited to:
  - A.11.1.a Riots
  - A.11.1.b Hunger strikes
  - A.11.1.c Disturbances
  - A.11.1.d Escapes
  - A.11.1.e Hostage situations
- A.11.2 The facility has written agreements securing the provision of emergency assistance as identified by the emergency plans.
- A.11.3 A plan provides for continuing operations in the event of a staff work stoppage or other job action. Copies of this plan are available to appropriate supervisory personnel. **4-ALDF-1C-06**

## **A.12 External Agency Notifications**

- A.12.1 The facility director ensures the immediate notification to the agency of jurisdiction of serious incidents including, but not limited to:
  - A.12.1.a Deaths;
  - A.12.1.b Suicide attempts;
  - A.12.1.c Hunger Strikes;

- A.12.1.d Emergency medical trips;
- A.12.1.e Escapes;
- A.12.1.f Use of Force;
- A.12.1.g Full or partial facility lockdowns;
- A.12.1.h Incidents impacting facility operations (Riots, Disturbances, Food Strikes, Fires, Natural Disasters);
- A.12.1.i Assaults on staff or detainees requiring medical attention;
- A.12.1.j Detainee transportation incidents;
- A.12.1.k Incidents attracting unusual interest or publicity.

## SECTION B: HEALTH CARE

### B.1 Health Care Administration

- B.1.1 The facility has a designated health authority with responsibility for health care services.
- B.1.2 The responsibilities of the health authority include: **4-ALDF 4D-01**
  - B.1.2.a Developing mechanisms, including written agreements, when necessary to assure that the scope of services is provided and properly monitored
  - B.1.2.b Developing a facility's operational health policies and procedures
  - B.1.2.c Identifying the type of health care providers needed to provide the determined scope of services
  - B.1.2.d Establishing systems for the coordination of care among multidisciplinary health care providers
  - B.1.2.e Developing a quality management program
- B.1.3 The health authority may be a physician, health services administrator, or health agency. When the health authority is other than a physician, final clinical judgments rest with a single, designated, responsible physician. **4-ALDF 4D-01**
- B.1.4 Clinical decisions are the sole province of the responsible clinician and are not countermanded by non-clinicians. **4-ALDF 4D-02**
- B.1.5 Health care services are provided by qualified health care personnel whose duties and responsibilities are governed by job descriptions that include qualifications and specific duties and responsibilities. **4-ALDF 4D-03**
- B.1.6 Detainees are treated at the facility by health care personnel other than a licensed provider, the care is provided pursuant to written standing orders or direct orders by personnel authorized by law to give such orders.



**4-ALDF 4D-03**

- B.1.7 All professional staff comply with applicable state and federal licensure, certifications, or registration requirements. Verification of current credentials are on file in the facility. **4-ALDF 4D-05**
- B.1.8 The health authority shares with the superintendent or the warden information regarding a detainee's medical management. **4-ALDF 4D-13**
- B.1.9 The circumstances are specified when correctional staff are advised of a detainee's health status. Only that information necessary to preserve the health and safety of a detainee, other detainees, volunteers, visitors, or the correctional staff is provided. Information provided to correctional, classification staff, volunteers, and visitors addresses only the medical needs of the detainee as it relates to housing, program placement, security and transport. **4-ALDF 4D-13**
- B.1.10 Informed consent standards of the jurisdiction are observed and documented for detainee care in a language understood by the detainee. In case of minors, the informed consent of a parent, guardian, or a legal custodian applies when required by law. **4-ALDF 4D-15**
- B.1.11 When health care is rendered against the patient's will, it is in accordance with state and federal laws and regulations. Otherwise, any detainee may refuse, in writing, medical, dental, and mental care. If the detainee declines to sign the refusal form, it must be signed by at least two witnesses. The form then must be sent to medical and reviewed by a qualified health care professional. If there is a concern about decision-making capacity, and evaluation is done, especially if the refusal is for critical or acute care. **4-ALDF 4D-15**
- B.1.12 First aid kits are available in designated areas of the facility as determined by the designated health authority in conjunction with the facility administrator. The health authority approves the contents, number, location, and procedures for monthly inspection of the kits and written protocols for use by non-medical staff. **4-ALDF 4D-09**
- B.1.13 An automatic defibrillator is available for use at the facility. **4-ALDF 4D-09**
- B.1.14 Correctional and health care personnel are trained to respond to health-related situations within a four-minute response time. The training program is conducted on an annual basis and is established by the responsible health authority in cooperation with the facility or program administrator and includes instruction on the following: **4-ALDF 4D-08**
- B.1.14.a Recognition of signs and symptoms and knowledge of action that is required in potential emergency situations
  - B.1.14.b Administration of basic first aid
  - B.1.14.c Certification in CPR
  - B.1.14.d Methods of obtaining assistance
  - B.1.14.e Signs and symptoms of mental illness, violent behavior, and acute

chemical intoxication and withdrawal

- B.1.14.f Procedures for patient transfers to appropriate medical facilities or health care providers
- B.1.14.g Suicide intervention
- B.1.15 Individual health emergency (man-down) drills are conducted once a year on each shift where health staff are assigned. Each drill is evaluated. **NCCHC J-A-07**
- B.1.16 The method of recording entries in the health record and the format of the health record are approved by the responsible health authority and in a manner that ensures the health record file is complete maintained in a uniform manner. **NCCHC J-H-01; 4-ALDF 4D-26**
- B.1.17 The confidentiality of a patient's written or electronic health record as well as orally conveyed health information is maintained. **NCCHC J-H-02**
- B.1.18 Active and inactive health record files are retained or transferred as permanent records in compliance with the legal requirements of the jurisdiction. **4-ALDF 4D-28**

## B.2 Intake Health Screening

- B.2.1 All Detainees receive a medical and mental health screening upon admission to the facility. **4-ALDF 4C-22**
- B.2.2 Medical screenings are conducted by health trained or qualified health care personnel. **4-ALDF 4C-22**
- B.2.3 Medical screenings document the following:
  - B.2.3.a Inquiry into:
    - B.2.3.a.1 History of chronic illnesses, serious infections, or communicable diseases
    - B.2.3.a.2 Current illness or health problems
    - B.2.3.a.3 Dental problems
    - B.2.3.a.4 Drug and alcohol use
    - B.2.3.a.5 Pregnancy
    - B.2.3.a.6 Other health problems designated by the responsible physician
  - B.2.3.b Observation of the following: **4-ALDF 4C-22; NCCHC J-E-02**:
    - B.2.3.b.1 Behavior including state of consciousness, mental status, appearance, conduct, tremor, and sweating
    - B.2.3.b.2 Body deformities and other physical abnormalities
    - B.2.3.b.3 Ease of movement
    - B.2.3.b.4 Condition of the skin, including trauma markings, bruises, lesions, jaundice, rashes, and infestations,

recent tattoos, and needle marks or other indications of drug abuse

- B.2.4 A tuberculin skin test or radiograph is performed within 72 hours of arrival.
- B.2.5 Medical screenings result in one the following dispositions: Cleared for general population; Cleared for general population with prompt referral to appropriate health care service; or Referral to appropriate health care service for emergency treatment. **4-ALDF 4C-22**
- B.2.6 Mental health screenings are conducted by mental-health trained or qualified mental-health personnel. **4-ALDF 4C-29**
- B.2.7 Mental health screenings document the following:
  - B.2.7.a Inquiry into whether the detainee:
    - B.2.7.a.1 Has a present suicide ideation
    - B.2.7.a.2 Has a history of suicidal behavior
    - B.2.7.a.3 Is presently prescribed psychotropic medication
    - B.2.7.a.4 Has current mental health complaint
    - B.2.7.a.5 Is being treated for mental health problems
    - B.2.7.a.6 Has a history of inpatient or outpatient psychiatric treatment
    - B.2.7.a.7 Has a history of treatment for substance abuse
    - B.2.7.a.8 Has a history of sexually aggressive behavior
    - B.2.7.a.9 Is at risk for sexual victimization
  - B.2.7.b Observation of the following: **4-ALDF 4C-29; 4-ALDF 4D-22-4**:
    - B.2.7.b.1 General appearance and behavior
    - B.2.7.b.2 Evidence of abuse and/or trauma
    - B.2.7.b.3 Current symptoms of psychosis, depression, anxiety, and/or aggression
- B.2.8 Mental health screenings result in one the following dispositions: Cleared for general population; Cleared for general population with prompt referral to appropriate mental-health care service; or Referral to appropriate mental-health care service for emergency treatment. **4-ALDF 4C-29**

### **B.3 Medical, Mental Health, and Dental Appraisals**

- B.3.1 A comprehensive health appraisal for each detainee is completed by qualified health care professional within 14-days after arrival at the facility. If there is documented evidence of a health appraisal within the previous 90-days, a new health appraisal is not required except as determined by the designated health authority. **4-ALDF 4C-24**
- B.3.2 Health appraisals include the following: **4-ALDF 4C-24; NCCHC J-E-04**

- B.3.2.a A review of the intake screen
- B.3.2.b Collection of additional data to complete the medical, dental, mental health, and immunization histories
- B.3.2.c Recording of vital signs
- B.3.2.d Physical Examination, as indicated by the patient's gender, age, and risk factors
- B.3.2.e Review of the results of the medical examination, tests, and identification of problems
- B.3.2.f Immunizations, when appropriate
- B.3.2.g Initiation of therapy, when appropriate
- B.3.2.h Development and implementation of treatment plan, including recommendations concerning housing, job assignment, and program participation, when appropriate
- B.3.3 Medical appraisal results are reviewed by a physician or other qualified health care personnel. **NCCHC J-E-04**
- B.3.4 Detainees referred receive a comprehensive mental health appraisal by a qualified mental health person within 14-days after arrival at the facility. If there is documented evidence of a health appraisal within the previous 90-days, a new health appraisal is not required except as determined by the designated health authority. **4-ALDF-4C-30**
- B.3.5 The comprehensive mental health appraisal includes:
  - B.3.5.a History of:
    - B.3.5.a.1 Psychiatric hospitalization and outpatient treatment
    - B.3.5.a.2 Suicidal behavior
    - B.3.5.a.3 Violent behavior
    - B.3.5.a.4 Victimization
    - B.3.5.a.5 Special education placement
    - B.3.5.a.6 Cerebral trauma or seizures
    - B.3.5.a.7 Sex offenses
  - B.3.5.b Current status of:
    - B.3.5.b.1 Psychotropic medications
    - B.3.5.b.2 Suicidal ideation
    - B.3.5.b.3 Drug or alcohol use
  - B.3.5.c Orientation to person, place, and time
  - B.3.5.d Emotional response to incarceration
  - B.3.5.e Screening for intellectual functioning **ALDF 4C-30; NCCHC J-E-05**

- B.3.6 An oral screening by dentist or qualified health care professional trained by a dentist is performed within 14-days of admission. **4-ALDF 4C-20**
- B.3.7 Oral screening include (unless completed during intake screening):  
**4-ALDF 4C-20; NCCHC J-E-06**
- B.3.7.a Visual observation of the teeth and gums and notation of any obvious or gross abnormalities requiring immediate referral to a dentist
- B.3.7.b Instructions on dental hygiene
- B.3.8 The health record contains results of the medical, mental health, and dental appraisals with documentation of the referral or initiation of treatment when indicated.

## **B.4 Access to Health Care**

- B.4.1 All detainees are informed about how to access health services during the intake/admission process in a manner understood by the detainee to include translation into languages spoken by a significant numbers of detainees, or verbally communicated to the detainee if literacy is an issue. **NCCHC 4C-01**
- B.4.2 If the facility charges detainees a co-payment fee, detainees are informed of the guidelines of the co-payment program during the intake/admission process. **NCCHC 4C-02**
- B.4.3 Detainees are not denied access to health services due to an inability to pay co-payment fees.
- B.4.4 Co-payment fees are not applied to appointments, services, or follow-up appointments initiated by medical staff. **NCCHC 4C-02**
- B.4.5 Using readily available forms, all detainees may request health care services (sick call) on a daily basis. These requests are triaged daily by health professionals or health trained personnel, with a priority system used to schedule clinical services. **NCCHC 4C-03**
- B.4.6 Clinical services are available to detainees in a clinical setting at least five days a week and are performed by a physician or other qualified health care professional. **NCCHC 4C-03**
- B.4.7 Detainees who require health care beyond the capacity of the facility as determined by the responsible physician are transferred under appropriate security to a facility where such care is available. (All non-emergency outside care of USMS detainees shall require pre-authorization of the USMS to ensure consistency with USMS Detainee Health Care Standards).  
**NCCHC 4C-05**
- B.4.8 There are 24-hour emergency medical dental and mental health services. Services include the following (**NCCHC 4C-08**):
- B.4.8.a On-site emergency first aid and crisis intervention
- B.4.8.b Emergency evacuation of the detainee from the facility

- B.4.8.c Use of one or more designated hospital emergency rooms or other appropriate health facilities.
- B.4.8.d Emergency on-call physician, dentist, and mental health professional services are available 24-hours per day when the emergency health facility is not located in the community
- B.4.9 Health encounters including medical and mental health interviews, examinations, and procedures are conducted in a setting that respects the detainee's privacy. Female detainees are provided a female escort for encounters with a male health care provider. **4-ALDF-4D-19**

## **B.5 Provision of Health Care**

- B.5.1 If infirmity care is provided it includes at a minimum the following (**4-ALDF-4C-09; NCCHC J-G-03**)
  - B.5.1.a Definition of the scope of infirmity care services available
  - B.5.1.b A physician on call or available 24-hours a day
  - B.5.1.c A supervising registered nurse is on-site at least once every 24-hours
  - B.5.1.d Detainee patients are within sight or sound of a qualified health care professional
  - B.5.1.e A manual of nursing care procedures is consistent with the state's nurse practicing act and licensing requirements
  - B.5.1.f The frequency of physician and nursing rounds is commensurate with the category of care being provided
- B.5.2 Patients with chronic diseases are identified and enrolled in a chronic disease program to decrease the frequency and severity of symptoms, prevent disease progression and complication, and foster improved function. Chronic diseases include, but are not limited to: asthma, diabetes, high blood cholesterol, HIV, hypertension, seizure disorder, tuberculosis, and major mental illnesses. **NCCHC J-G-01**
- B.5.3 Chronic care treatment programs include but are not limited to (**NCCHC J-G-01; 4-ALDF-4C-19**):
  - B.5.3.a Determining the frequency of follow-up for medical evaluation
  - B.5.3.b Adjusting the treatment modality as clinically indicated
  - B.5.3.c Indicating the type and frequency of diagnostic testing and therapeutic regimens
  - B.5.3.d Instructions on diet and exercise
- B.5.4 The health authority maintains a list of chronic care patients. **NCCHC J-G-01**

- B.5.5 A proactive program exists that provides care for special needs patients who require medical supervision or multidisciplinary care. Special needs patients include, but are not limited to developmentally disabled individuals, frail/elderly, physical impairments which impair mobility, and patients with serious mental health needs. **NCCHC J-G-02**
- B.5.6 The health authority maintains a list of special needs patients. **NCCHC J-G-02**
- B.5.7 Female Detainees receive gynecological and obstetrical treatment and examinations, including pap smears and mammograms, in accordance with community medical standards for those detainees in uninterrupted custody or 12 months or more.
- B.5.8 Pregnant Detainees receive timely and appropriate prenatal care, specialized obstetrical services when indicated, and postpartum care. **NCCHC J-G-07**
- B.5.9 There is a written plan that addresses the management and reporting to applicable local, state, and federal agencies of infections and communicable diseases. **4-ALDF-4C-14**
- B.5.10 There is a written plan addressing the management of infections and communicable diseases including, but not limited to: **4-ALDF-4C-15; 4C-16; 4C-17**
- B.5.10.a Tuberculosis
- B.5.10.b Hepatitis A, B, & C
- B.5.10.c HIV
- B.5.11 Written plans addressing the management of infectious and communicable diseases include: **ACA-4-ALDF-4C-15; 4C-16; 4C-17; NCCHC J-B-01**
- B.5.11.a Identification
- B.5.11.b Surveillance
- B.5.11.c Treatment, when indicated
- B.5.11.d Follow-up and isolation, when indicated (Active TB patients are housing in negative pressure rooms).
- B.5.12 Immunizations are provided to prevent disease where appropriate. **NCCHC J-B-01**
- B.5.13 Management of bio-hazardous waste and decontamination of medical and dental equipment complies with applicable local, state, and federal regulations. **4-ALDF 4C-18**
- B.5.14 Detoxification, when performed at the facility, is done only under the medical supervision in accordance with local, state, and federal laws. Specific guidelines are followed for the treatment and observation of individuals manifesting mild or moderate symptoms of intoxication or withdrawal from alcohol and other drugs. **4-ALDF 4C-36**
- B.5.15 Detainees experiencing severe, life threatening intoxication (overdose) are

- or withdrawal are transferred under appropriate security conditions to a facility where specialized care is available. **4-ALDF 4C-36**
- B.5.16 Detainees have access to a chemical dependency treatment program. **4-ALDF 4C-37**
- B.5.17 Management of pharmaceuticals includes: **4-ALDF-4C-38; NCCHC J-D-01; NCCHC J-D-02**
- B.5.17.a A formulary
  - B.5.17.b A formalized method for obtaining non-formulary medications
  - B.5.17.c Prescription medications are administered or delivered to the patient only on the order of a physician, dentist, or other legally authorized individual
  - B.5.17.d Secure storage and perpetual inventory of all controlled substances, syringes, and needles
  - B.5.17.e Administration of medication is by persons properly trained and under the supervision of the health authority and facility administrator or designee.
  - B.5.17.f Providing a 7-day supply of prescribed medication to detainees transferring/releasing from the facility.
- B.5.18 Detainees entering the facility on prescription medications continue to receive the medication in a timely fashion as prescribed, or acceptable alternate medications are provided as clinically indicated. **NCCHC J-D-02**
- B.5.19 Mental Health services include at a minimum **(4-ALDF-4C-27)**:
- B.5.19.a Screening for mental health problems on intake
  - B.5.19.b Referral for the detection, diagnosis, and treatment of mental illness
  - B.5.19.c Crisis intervention, and management of acute psychiatric episodes
  - B.5.19.d Stabilization of the mentally ill and the prevention of psychiatric deterioration in the correctional setting
  - B.5.19.e Referral to licensed mental health facilities for detainees with psychiatric needs exceeding the treatment capacity of the facility
  - B.5.19.f Obtaining and documenting consent
- B.5.20 Routine and emergency dental care is provided to each detainee under the direction and supervision of a licensed dentist. **4-ALDF-4C-20; NCCHC J-E-06**
- B.5.21 Dental care includes the following **(4-ALDF-4C-20; NCCHC J-E-06)**:
- B.5.21.a Intake dental screening
  - B.5.21.b Instruction in oral hygiene and preventative oral care



- B.5.21.c Oral treatment is timely and includes prompt access for urgent or painful conditions.
- B.5.21.d Oral treatment is provided within the scope of the USMS detainee Health Care Standards
- B.5.21.e Detainees in USMS custody for more than 12 months receive an oral examination.
- B.5.22 The use of detainees for medical, pharmaceutical, or cosmetic experiments is prohibited, unless written authorization is provided by the agency of jurisdiction. **4-ALDF-4D-18**
- B.5.23 Investigational or Experimental drugs, devices, and procedures are not covered. For procedures, services, and supplies that are experimental or investigational, and/or not approved by the FDA, if the detainee is taking an investigational drug on a compassionate use basis at the time of arrest, he or she may continue it as long as it involves no cost to the government, and as long as the investigational protocol does not require the detainee to make visits anywhere outside of the facility to which he or she is confined. **USMS Detainee Health Care Standard – Publication 100**

## B.6 Incident Health Care

- B.6.1 Detainee Suicides
  - B.6.1.a The facility suicide prevention program is approved by the health authority and the facility warden or designee.
  - B.6.1.b The suicide prevention program includes specific procedures for:
    - B.6.1.b.1 Staff training
    - B.6.1.b.2 Intake/admission procedures
    - B.6.1.b.3 Identifying suicidal detainees
    - B.6.1.b.4 Referring suicidal detainees for mental health intervention
    - B.6.1.b.5 Housing observation, and Suicide watch
    - B.6.1.b.6 Incident review/debriefing
    - B.6.1.b.7 Follow-up monitoring
  - B.6.1.c All staff who supervise detainees receive suicide prevention/response training annually.
  - B.6.1.d Staff training in suicide prevention/response includes, but is not limited to:
    - B.6.1.d.1 Identifying warning signs and symptoms of impending suicide behavior
    - B.6.1.d.2 Responding to suicidal and depressed detainees
    - B.6.1.d.3 Use of referral procedures

- B.6.1.d.4 Housing observation and suicide watch procedures
- B.6.1.e Detainees referred for suicide intervention are evaluated promptly by a designated health professional, who is able to direct the intervention and assure follow-up treatment/evaluation as needed.
- B.6.1.f Actively suicidal detainees and potentially suicidal detainees who are placed in isolation are maintained under constant supervision.
- B.6.1.g Housing for suicidal detainees facilitates staff observation and utilizes suicide resistant fixtures.
- B.6.1.h Suicide review debriefings include administration, health services, and security representatives.
- B.6.1.i The agency of jurisdiction received notification of the incident.
  
- B.6.2 Hunger Strikes
  - B.6.2.a The facility's hunger strike management program is reviewed by the health authority.
  - B.6.2.b Medical staff receives training in hunger strike evaluation and treatment and remain up to date on these procedures.
- B.6.3 Medical Restraints/Therapeutic Seclusion
  - B.6.3.a Clinically ordered restraint and seclusion are available for patients exhibiting behavior dangerous to self or others as a result of medical or mental illness. **NCCHC J-I-01**
  - B.6.3.b The procedures for the use of medical restraints/seclusion include **NCCHC J-I-01; 4-ALDF-4D-21**
    - B.6.3.b.1 The authorization by a physician or other qualified health care professional where permitted by law, who has determined that no less restrictive treatment is appropriate
    - B.6.3.b.2 The types of restraints to be used
    - B.6.3.b.3 Documentation of 15-minute checks by health-trained personnel or health services of detainees placed in medical restraints
    - B.6.3.b.4 How proper hydration, nutrition, and toileting are provided
    - B.6.3.b.5 Documentation of efforts for less restrictive treatment alternatives as soon as possible
- B.6.4 Sexual Assault
  - B.6.4.a Detainees identified as high risk with a history of sexually assaultive behavior are assessed by a mental health or other qualified professional. Detainees with a history of sexually

assaultive behavior are identified, monitored, and counseled.

**4-ALDF-4D-22-3**

- B.6.4.b Detainees identified as at risk for sexual victimization are assessed by a mental health or other qualified professional. Detainees at risk for sexual victimization are identified, monitored, and counseled. **4-ALDF-4D-22-4**
- B.6.4.c Victims of sexual assault are referred under appropriate security provisions to a community facility for treatment and gathering of evidence. If these procedures are performed in-house, the following guidelines are used: **4-ALDF-4D-22-6**
  - B.6.4.c.1 A history is taken by health care professionals who conduct an examination to document the extent of physical injury and to determine if referral to another medical facility is indicated. With the victim's consent, the examination includes collection of evidence from the victim, using a kit approved by the appropriate authority.
  - B.6.4.c.2 Provision is made for testing of sexually transmitted diseases and counseling as appropriate.
  - B.6.4.c.3 Prophylactic treatment and follow-up for sexually transmitted diseases are offered to all victims as appropriate.
  - B.6.4.c.4 Following the physical examination there is availability of an evaluation by a mental health professional to assess the need for crisis intervention counseling and long-term follow-up.
  - B.6.4.c.5 A report is made to the facility or program administrator or designee to assure separation of the victim from his or her assailant.
- B.6.4.d All case records associated with claims of sexual abuse, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling are retained in accordance with an established schedule. **4-ALDF-4D-22-8**
- B.6.5 Detainee Death
  - B.6.5.a As part of an overall protocol that describes the actions to be taken in the event of a detainee death, the facility will immediately notify the agency of jurisdiction. **4-ALDF-4D-23**
  - B.6.5.b All deaths are reviewed to determine the appropriateness of clinical care; to ascertain whether changes to policies, procedures,

or practices are warranted; and to identify issues that require further study. This process will ensure: **NCCHC J-A-10**

- B.6.5.b.1 All deaths are reviewed within 30 days
- B.6.5.b.2 A death review consists of:
  - B.6.5.b.2.1 An administrative review
  - B.6.5.b.2.2 A clinical mortality review
  - B.6.5.b.2.3 A psychological autopsy if death is by suicide
- B.6.5.b.3 Treating staff are informed of the clinical mortality review and administrative review findings.
- B.6.5.b.4 Corrective actions identified through the mortality review process are implemented and monitored.

#### B.6.6 Restrictive Housing

- B.6.6.a When a detainee is transferred to restrictive housing, health care personnel are informed immediately and provide assessment and review of medical and mental health risk factors as indicated by the protocols established by the health authority. **4-ALDF-2A-4**
- B.6.6.b If a detainee with serious mental illness is placed in restrictive housing: **DOJ-Restrictive Housing Report**
  - B.6.6.b.1 Mental health staff conduct a mental health consultation at the time of the detainee's placement;
  - B.6.6.b.2 The detainee receives intensive, clinically appropriate mental health treatment for the entirety of the detainee's placement in restrictive housing;
  - B.6.6.b.3 At least once per week, a qualified mental health practitioner, assigned to supervise mental health treatment in the restrictive housing unit, conducts face-to-face clinical contact with the detainee, to monitor the inmate's mental health status and identify signs of deterioration.
- B.6.6.c After 30 days in restrictive housing, and every 30 days thereafter, all detainees in restrictive housing receive a face-to-face psychological review by mental health staff. If at any point a detainee show signs of psychological deterioration while in restrictive housing, the detainee is immediately evaluated by mental health staff. **DOJ-Restrictive Housing Report**

## SECTION C: SECURITY AND CONTROL

### C.1 Correctional Supervision

- C.1.1 Space is provided for a 24-hour secure control center for monitoring and coordinating the facility's security, life safety, and communications systems. **4-ALDF-2A-01**
- C.1.2 The secure control center is staffed continuously. **4-ALDF-2A-02**
- C.1.3 Correctional officer posts are located in or immediately adjacent to detainee living areas to permit officers to see or hear and respond promptly to emergency situations. **4-ALDF-2A-03**
- C.1.4 Prisoners classified as medium or maximum security risks are personally observed by an officer at least every 40 minutes on an irregular schedule. Prisoners classified as minimum or low security risks are personally observed by an officer at least every 60 minutes on an irregular schedule. **4-ALDF-2A-05**
- C.1.5 When both males and females are housed in a facility, at least one male staff member and one female staff member are on duty at all times. **4-ALDF 2A-08**
- C.1.6 No detainee or group of detainees is given control, or allowed to exert authority, over other detainees. **4-ALDF-2A-09**
- C.1.7 All Detainee movement from one area of the facility to another is controlled by staff. **4-ALDF-2A-10**
- C.1.8 Correctional staff maintain a permanent log recording routine information, emergency situations, and unusual incidents. **4-ALDF-2A-11**
- C.1.9 Correctional supervisors review permanent logs on each shift to provide responsible department heads/shift supervisors with relevant information. These reviews are documented. **4-ALDF-2A-11**
- C.1.10 Supervisory staff conduct a daily patrol, including holidays and weekends, of all areas occupied by detainees. Unoccupied areas are to be inspected at least weekly. Patrols and inspections are documented. **4-ALDF-2A-12**
- C.1.11 A qualified person conducts at least weekly inspections of all security devices, identifying those needing repair or maintenance. Results the weekly security inspections are reported in writing. **4-ALDF-2A-13**

### C.2 Detainee Accountability

- C.2.1 There is a detainee population management system that includes records on the admission, processing, and release of detainees. **4-ALDF-2A-16**
- C.2.2 The facility has a system for physically counting detainees. The system includes strict accountability for detainees being counted outside of their assigned living area. **4-ALDF-2A-17**

- C.2.3 At least one complete institution count is conducted for each shift, with no less than three complete institution counts being conducted in a 24-hour period. **4-ALDF-2A-17**

### **C.3 Control of Contraband**

- C.3.1 Procedures guide searches of facilities and detainees to control contraband and provide for its disposition. **4-ALDF-2C-01**
- C.3.2 Procedures govern the preservation, control, and disposition of all physical evidence obtained in connection with a violation of law and/or institution regulation. At a minimum, the procedures address the following **(4-ALDF-2C-06)**.
- C.3.2.a Chain of custody
  - C.3.2.b Evidence handling
  - C.3.2.c Location and storage requirements
  - C.3.2.d Manner of disposition
- C.3.3 A search of a detainee's body and attire is conducted upon their arrival at the facility and prior to transportation out of the facility.
- C.3.3.a Detainees are searched after contact with the public or when returning from public areas.
  - C.3.3.b Detainee searches are conducted in an appropriate setting and by staff of the same gender.
- C.3.4 A strip search of general population detainees is only conducted when there is reasonable belief that the detainee may be in possession of an item of contraband. The least invasive form of search is conducted. **4-ALDF-2C-04**
- C.3.5 Manual or instrument inspection of body cavity is conducted only when there is reasonable belief that the detainee is concealing contraband and when authorized by the facility administrator or designee. Health care personnel conduct the inspection in private. **4-ALDF-2C-05**

### **C.4 Use of Force/Non-Routine Application of Restraints**

- C.4.1 The use of physical force is restricted to instances of justifiable self-defense, protection of others, protection of property, and prevention of escapes, and then only as a last resort and in accordance with appropriate statutory authority. **4-ALDF-2B-01**
- C.4.2 Physical force and restraints are not used as punishment. **4-ALDF-2B-01; 4-ALDF-2B-02**
- C.4.3 There are defined circumstances under which supervisory approval is needed prior to the application of restraints. **4-ALDF-2B-02**
- C.4.4 The application of four/five point restraints complies with the following criteria **(4-ALDF-2B-03)**:

- C.4.4.a Four/five point restraints are used only in extreme instances and only when other types of restraints have proven ineffective.
- C.4.4.b Advance approval is secured from the facility administrator/designee before a detainee is placed in a four/five point restraint.
- C.4.4.c The health authority or designee must be notified to assess the detainee's medical and mental health condition.
- C.4.4.d The health authority or designee determines if, whether based on serious danger to self or others, the detainee should be in a medical/mental health unit for emergency involuntary treatment with sedation and/or other medical/mental health unit.
- C.4.5 In the event a detainee is placed in four/five point restraints the following procedures are followed **(4-ALDF-2B-03)**:
  - C.4.5.a Direct visual observation by staff is continuous prior to obtaining approval from the health authority or designee
  - C.4.5.b Subsequent visual observation is made at least every 15 minutes
  - C.4.5.c Restraint procedures are in accordance with guidelines approved by the designated health authority
  - C.4.5.d All decisions and actions are documented
- C.4.6 Written reports are submitted to the facility administrator or designee no later than the conclusion of the tour of duty when any of the following occur **(4-ALDF-2B-07)**:
  - C.4.6.a Discharge of firearm or other weapon
  - C.4.6.b Use of less lethal devices to control detainees
  - C.4.6.c Use of force to control detainees
  - C.4.6.d Detainee(s) remaining in restraints at the end of the shift
- C.4.7 All calculated Use of Force Incidents and Non-Routine Application of Restraints are supervised and videotaped.
- C.4.8 The agency of jurisdiction is immediately notified of any Use of Force Incident or Non-Routine Application of Restraints.
- C.4.9 All Use of Force incidents are reviewed by the facility director to ensure compliance with the facility's Use of Force policy.

## **C.5 Weapons Control**

- C.5.1 Procedures govern the availability, control, and use firearms, less lethal devices, and related security devices, and specify the level of authority required for their access and use. **4-ALDF-2B-04**
- C.5.2 Chemical agents and electrical disablers are used only with the authorization of the facility administrator or designee. **4-ALDF-2B-04**

- C.5.3 Employees are instructed to use deadly force only after other actions have been tried and found ineffective, unless the employee believes that a person's life is immediately threatened. **4-ALDF-2B-08**
- C.5.4 Storage space is provided for the secure storage of less lethal devices and related security equipment, and this space is located in an area separate and apart from detainee housing or activity areas. **4-ALDF-2B-05**
- C.5.5 Access to the weapons storage space is restricted to authorized persons only. **4-ALDF-2B-05**
- C.5.6 The facility maintains a written record of routine and emergency distribution of security equipment. **4-ALDF-2B-06**
- C.5.7 Firearms, chemical agents, and related security equipment are inventoried at least monthly to determine their condition and expiration dates. **4-ALDF-2B-06**
- C.5.8 Firearms, chemical agents, and related security equipment are issued only to qualified staff.
- C.5.9 Visiting Law Enforcement Officers secure their weapons in a locker located outside the secure perimeter of the facility. **4-ALDF-2B-08**
- C.5.10 Employees on duty use only firearms or other security equipment that have been approved by the facility administrator. **4-ALDF-2B-08**
- C.5.11 Appropriate equipment is provided to facilitate safe unloading and loading of firearms. **4-ALDF-2B-08**
- C.5.12 Incidents of missing weapons are reported promptly to supervisory security personnel.

## **C.6 Keys, Tools, and Medical Equipment Control**

- C.6.1 The use of keys is controlled and inventoried. **4-ALDF-2D-01**
- C.6.2 Emergency keys:
  - C.6.2.a Are kept in a secure but accessible location
  - C.6.2.b Reach every area of the facility
  - C.6.2.c Usage is limited to authorized staff
  - C.6.2.d Usage is documented
- C.6.3 The use of tools and culinary equipment is controlled and inventoried. **4-ALDF-2D-02**
- C.6.4 In the event detainee workers are assigned to work details involving the use of tools, facility policy identifies what tools may be used by detainees and identifies the level of required staff supervision.
- C.6.5 Medical and dental instruments, equipment, and supplies (syringes, needles, and other sharps) are controlled and inventoried. **4-ALDF-2D-03**



- C.6.6 Incidents of missing keys, tools, culinary equipment, medical and dental equipment, and supplies are reported promptly to security personnel.

## C.7 Post Orders

- C.7.1 There are current written orders for every correctional officer post, which clearly outline duties, responsibilities, and expectations of that post. **4-ALDF-2A-04**
- C.7.2 Post orders for armed posts contain instructions regarding the proper care and safe handling of firearms and specific instructions stating when and under what circumstances their use is authorized.
- C.7.3 Officers assigned to those posts acknowledge in writing that they have read and understand the orders and record the date. **4-ALDF-2A-04**
- C.7.4 The facility administrator or designee reviews post orders annually and updates them as needed. **4-ALDF-2A-04**

## C.8 Detainee Discipline

- C.8.1 Rules of detainee conduct specify acts prohibited within the facility and the range of penalties that can be imposed for various degrees of violations. **4-ALDF-3A-01**
- C.8.2 Disciplinary Segregation, as a penalty for committing a prohibited act, is reserved for offenses involving violence, escape, or posing a threat to institutional safety by encouraging others to engage in such conduct. **DOJ-Restrictive Housing Report**
- C.8.3 There is a sanctioning schedule for rule violations. The maximum sanction for rule violations is no more than 60 days of disciplinary segregation for all violations arising out of one incident. **4-ALDF-2A-50**
- C.8.4 A detainee who allegedly commits an act covered by criminal law is referred to the appropriate criminal justice agency. **4-ALDF-6C-02**
- C.8.5 There are written guidelines for resolving minor detainee infractions that include a written statement of the rule violated and a hearing and decision within seven days, excluding weekends and holidays, by a person not involved in the rule violation; detainee may waive the hearing. **4-ALDF-6C-01**
- C.8.6 When rule violations require formal resolutions, staff members prepare a disciplinary report and forward it to the designated supervisor. **4-ALDF-6C-03**
- C.8.7 Disciplinary reports include, but are not limited to, the following:  
**4-ALDF-6C-04**
- C.8.6.a Specific rule violated
  - C.8.6.b Formal statement of the charge
  - C.8.6.c An explanation of the event that includes who was involved, what

transpired, and the time and location of the occurrence

- C.8.6.d Any physical evidence and disposition
- C.8.6.e Any immediate action, including use of force
- C.8.6.f Reporting staff member's signature and date and time of incident.
- C.8.8 When an alleged rule violation is reported, an appropriate investigation is begun within 24 hours of the time the violation is reported and is completed without delay, unless there are exceptional circumstances for delaying. **4-ALDF-6C-05**
- C.8.9 Absent compelling circumstances, such as a pending criminal investigation, a detainee does not remain in investigative segregation for a longer period of time than the maximum term of disciplinary segregation permitted for the most serious offense charged. **DOJ-Restrictive Housing Report.**
- C.8.10 A detainee charged with a rule violation receives a written statement of the charge(s) including a description of the incident and specific rules violated. The detainee is given the statement at the same time the disciplinary report is filed with the disciplinary committee but no less than 24 hours prior to the disciplinary hearing. The hearing may be held in less than 24 hours, only with the detainee's written consent. **4-ALDF-6C-07**
- C.8.11 Detainees charged with rule violations are present at the hearing, unless they waive that right in writing or through their behavior. Any detainee's absence or exclusion is documented. **4-ALDF 6C-08**
- C.8.12 Disciplinary hearing are convened as practical but no later than seven days, excluding weekends and holidays, after the alleged violation. Inmates are notified of the hearing at least 24 hours in advance of the hearing. Reasons for postponement or continuance are documented. **4-ALDF 6C-09; 4-ALDF 6C-10**
- C.8.13 The disciplinary hearing is conducted by a correctional official outside the regular chain of command at the institution where the inmate is housed. **DOJ-Restrictive Housing Report**
- C.8.14 Detainees have an opportunity to make a statement and present documentary evidence at the hearing and can request witnesses on their behalf; the reasons for denying such a request are stated in writing. **4-ALDF-6C-12**
- C.8.15 A staff member or agency representative assists detainees at disciplinary hearings when it is apparent that a detainee is not capable of collecting and presenting evidence on his or her own behalf. **4-ALDF 6C-13**
- C.8.16 When a disciplinary hearing officer is confronted with a detainee who demonstrates symptoms of mental illness, the disciplinary officer consults with qualified mental health services professionals to provide input as to: **DOJ-Restrictive Housing Report**
  - C.8.16.a The detainee's competence to participate in the disciplinary hearing;

- C.8.16.b Responsibility for charged behavior;
- C.8.16.c Information of known mitigating factors in regard to the behavior
- C.8.16.d Impact of applicable sanctions on the detainee's mental health treatment plan.
- C.8.17 Disciplinary decisions are based solely on information obtained in the hearing process, including staff reports, the statements of the inmate charged, and the evidence derived from witnesses and documents. **4-ALDF 6C-14**
- C.8.18 The detainee's behavior while in investigative segregation is given consideration by the disciplinary hearing officer. **DOJ-Restrictive Housing Report**
- C.8.19 Time spent in investigative segregation is credited towards the term of disciplinary segregation. **DOJ-Restrictive Housing Report**
- C.8.20 Disciplinary sentences for offenses resulting from the same incident are served concurrently. **DOJ-Restrictive Housing Report**
- C.8.21 A written report is made of the decision and supporting reasons, and a copy is given to the detainee. The hearing record and supporting documentation are kept in the detainee's file.
- C.8.22 The facility administrator or designee reviews all disciplinary hearings and dispositions to assure conformity with policy and regulations. **4-ALDF-6C-17**
- C.8.23 Detainees may appeal decisions of the disciplinary hearing officer. Appeals of disciplinary actions must be affirmed or reversed within 15 days of the appeal. **4-ALDF 6C-18**

## **C.9 Detainee Transportation**

- C.9.1 Detainee transportation vehicles receive an annual safety inspection by qualified personnel. **4-ALDF-1B-03**
- C.9.2 Transportation vehicles are secured when not in use.
- C.9.3 Transportation vehicles are equipped with serviceable air conditioning and heating systems.
- C.9.4 Transportation vehicles are available to accommodate disabled or movement impaired detainees.
- C.9.5 Transportation vehicles are equipped with serviceable communication equipment.
- C.9.6 Transportation vehicles are equipped with a serviceable fire extinguisher.
- C.9.7 Transportation vehicles are compartmentalized to permit the secure separation of male and female detainees if they are transported in the same vehicle.

- C.9.8 Transportation vehicles are equipped with security screens between the operator compartment and the detainee compartment
- C.9.9 The facility's vehicle sally port provides a secure environment for the loading and unloading of detainees.
- C.9.10 The facility's detainee intake and discharge area provides a secure area for processing, transferring, searching, and applying/removing retraining devices.
- C.9.11 Detainees are searched prior to boarding a vehicle.
- C.9.12 Detainees are fully restrained (handcuffs, waist chains, and leg irons) during transportation. Medical exceptions are documented and approved.
- C.9.13 Transportation officers consist of a minimum of two armed escorts when utilizing a sedan or van; and a minimum of two armed escorts in addition to the driver when utilizing a bus to transport detainees
- C.9.14 Transport vehicles are searched for contraband prior to and after each detainee movement.

## SECTION D: FOOD SERVICE

### D.1 Food Service Administration

- D.1.1 A person who is experienced in food service management supervises food service operations and is certified by a food protection manager certification program. **4-ALDF-4A-04; 2013 U.S. Food Code: 2-102.11, 2-102.12, 2-102.20, 2-103.11**
- D.1.2 The Food Service Administrator or designee conducts daily inspections of all food service areas, including dining and food preparation areas and equipment. **4-ALDF-4A-15**
- D.1.3 The facility's food service operation is reviewed by an independent; outside source to ensure the food service facilities and equipment meet established governmental health and safety codes. Corrective action is documented for all deficiencies. **4-ALDF-4A-11**
- D.1.4 Meals are prepared, delivered, and served under staff supervision. **4-ALDF-4A-17**
- D.1.5 All staff, contractors, and volunteer detainee workers who work in the food service department are trained in the use of food service equipment and in the safety procedures to be followed in the food service department. **4-ALDF-4A-12-1**

### D.2 Food Service Employee/Worker Health

- D.2.1 Volunteer, detainee food service workers receive a pre-assignment medical examination and periodic reexamination to ensure freedom from diarrhea, skin infections, and other illnesses transmissible by food or utensils.

#### **4-ALDF-4A-13**

- D.2.2 Food service employees/workers are required to report information about their health and activities as they relate to diseases that are transmissible through food, in a timely manner and sufficient detail to reduce the risk of foodborne disease transmission. **2013 U.S. Food Code: 2-201.11, 3-103.11(3)**
- D.2.3 Food service employees/workers are required to clean their hands and exposed portions of their arms immediately before engaging in food preparation including working with exposed food, clean equipment, and utensils. **2013 U.S. Food Code: 2-301.11, 2-301.12, 2-301.14**
- D.2.4 Food service employees/workers are required to clean their hands in a handwashing sink or approved automatic handwashing facility and may not clean their hands in a sink used for food preparation or ware washing, or in a service sink or a curbed cleaning facility used for the disposal of mop water and similar liquid waste. **2013 U.S. Food Code 2-301.15**
- D.2.5 Food service employees/workers are required to wear clean outer clothing to prevent contamination of food, equipment, utensils, linens, and single-service and single-use articles. **2013 U.S. Food Code 2-304.11**
- D.2.6 Food Service employees/workers are required to wear hair restraints such as hats, hair coverings or nets, beard restraints, and clothing to keep their hair from contacting exposed food; clean equipment, utensils, and linens. **2013 U.S. Food Code 2-402.11**
- D.2.7 Food service employees and detainee workers shall eat or drink only in designated areas where contamination of exposed food, clean equipment, utensils or other items cannot occur. **2013 U.S. Food Code 2-401.11**

### **D.3 Food Storage and Preparation**

- D.3.1 Refrigerated, potentially hazardous food deliveries are checked on delivery to ensure compliance with Food Code. **2013 U.S. Food Code 3-202.11, 3-202.15**
- D.3.2 Food is stored in a manner compliant with Food Code. **2013 U.S. Food Code 3-3**
- D.3.3 Food is protected from contamination from equipment, utensils, and linens in a manner compliant with Food Code. **2013 U.S. Food Code 3-305.11, 3-305.12**
- D.3.4 During preparation (Cooking, Freezing, Reheating), unpackaged food shall be protected from environmental sources of contamination in a manner compliant with Food Code. **2013 U.S. Food Code 3-4, 3-5**

### **D.4 Equipment, Utensils, and Linens**

- D.4.1 Utensils and food contact surfaces are designed and constructed of

- materials compliant with Food Code. **2013 U.S. Food Code 4-1, 4-2**
- D.4.2 Ware washing (dishwashing) machines are operating within designed specifications and/or in a manner compliant with Food Code. **2013 U.S. Food Code: 4-204.113, 4-204.114, 4-204.115, 4-204.117, 4-204.118, 4204.119, 4-501.110, 4-501.112, 4-501.113, 4-501.114, 4-501.116**
- D.4.3 Manual ware washing operations utilize at least 3 sufficiently sized compartments for manually washing, rinsing, and sanitizing equipment and utensils; and are compliant with Food Code. **2013 U.S. Food Code 4-301.12, 4-301.13, 4-501.114, 4-501.111**
- D.4.4 If hot water is used for sanitization in manual ware washing operations, the sanitizing compartment of the sink shall be compliant with Food Code. **2013 U.S. Food Code 4-204.116, 4-204.119**
- D.4.5 Drain boards, utensil racks, or tables large enough to accommodate all soiled and cleaned items that may accumulate during hours of operation shall be provided for necessary utensil holding before cleaning and after sanitizing. **2013 U.S. Food Code 4-301.13**
- D.4.6 Ventilation hood systems and devices shall be sufficient in number and capacity to prevent grease or condensation from collecting on walls and ceilings. **2013 U.S. Food Code 4-301.14**
- D.4.7 Food temperature measuring devices shall be readily accessible for used in ensuring attainment and maintenance of food temperatures and the manual washing and sanitizing temperatures as specified under Food Code. **2013 U.S. Food Code 4-302.12, 4-302.13**
- D.4.8 A test kit or other device that accurately measures the concentration sanitizing solutions shall be provided. **2013 U.S. Food Code 4-302.14**
- D.4.9 Food service equipment shall be cleaned, maintained in good repair and in a manner compliant Food Code. **2013 U.S. Food Code 4-501.11, 4-501.12, 4-501.14**
- D.4.10 Food service equipment shall be used in accordance with the manufacturer's operating instructions and in a manner compliant with Food Code. **2013 U.S. Food Code 4-501.15, 4-501.16**
- D.4.11 Cleaning agents are used in accordance with the manufacturer's label instructions. **2013 U.S. Food Code 4-501.17**
- D.4.12 In manual ware washing operations, the wash, rinse, and sanitize solutions shall be maintained clean and temperatures maintained in accordance with the cleaning agent manufacturer's label instructions or as required by Food Code. **2013 U.S. Food Code 4-501.18, 4-501.19**
- D.4.13 Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils shall be clean to sight and touch. **2013 U.S. Food Code 4-601.11a**
- D.4.14 The food-contact surfaces of cooking equipment and pans shall be kept free of encrusted grease deposits and other soil accumulations.

**2013 U.S. Food Code 4-601.11b**

- D.4.15 Nonfood-contact surfaces of equipment shall be kept free of an accumulation of dust, dirt, food residue, and other debris. **2013 U.S. Food Code 4-601.11c**
- D.4.16 Equipment, food-contact surfaces, utensils, cooking equipment, baking equipment, non-food contact surfaces, and linens, shall be cleaned in frequency and method compliant with Food Code. **2013 U.S. Food Code: 4-602.11, 4-602.12, 4-602.13, 4-603.11, 4-603.12, 4-603.13, 4-603.14, 4-603.15, 4-603.16, 4-603.17, 4-701.10, 4-702.11, 4-703.11, 4-801.11, 4-802.11, 4-803.11, 4-803.12, 4-803.13**
- D.4.17 Clean and sanitized equipment and utensils are dried in accordance with Food Code. **2013 U.S. Food Code: 4-901.11, 4-901.12, 4-904.14**
- D.4.18 Food service equipment maintenance is performed in a manner, which does not contaminate food contact surfaces and is compliant with Food Code. **2013 U.S. Food Code: 4-902.11, 4-902.12**
- D.4.19 Food service equipment, utensils, linens, and single service and single use articles are stored in a manner compliant with Food Code. **2013 U.S. Food Code: 4-903.11, 4-903.12, 4-904.11, 4-904.12, 4-904.13**

**D.5 Detainee Meals and Special Diets**

- D.5.1 Detainee meal menus and religious diets are reviewed annually by a qualified nutritionist or dietician to ensure that they meet the nationally recommended dietary allowances for basic nutrition for appropriate age groups. **4-ALDF-4A-07**
- D.5.2 Prepared detainee meals adhere to the approved menus. Meal substitutions are nutritionally equivalent. **4-ALDF-4A-08**
- D.5.3 Accurate records are maintained of all meals served. **4-ALDF-4A-06**
- D.5.4 Menu evaluations are conducted at least quarterly by food service supervisory staff to verify adherence to the established basic daily servings. **4-ALDF-4A-07**
- D.5.5 The planning and preparation of all meals takes into consideration food flavor, texture, temperature, appearance, and palatability. **4-ALDF-4A-08**
- D.5.6 Three meals, including at least two hot meals, are provided at regular times during each 24-hour period, with no more than 14-hours between the evening meal and breakfast. Variations may be allowed based on weekend and holiday food service demands provided basic nutritional goals are met. **4-ALDF-4A-18**
- D.5.7 Therapeutic diets are provided as prescribed by appropriate clinicians. **4-ALDF-4A-09**
- D.5.8 Clinical orders for medical diets include the type of diet, the duration for which it is to be provided, and any special instructions. **NCCHC J-F-02**
- D.5.9 Special diets are provided for detainees whose religious beliefs require the

adherence to religious dietary laws when approved by the facility chaplain.  
**4-ALDF-4A-10**

## SECTION E: RESTRICTIVE HOUSING

### E.1 Detainee Records

E.1.1 Frequency and cumulative length of restrictive housing placement.

#### **DOJ-Restrictive Housing Report**

### E.2 Detainee Transfer and Releases

E.2.1 Absent a compelling reason, detainees are not released directly from restrictive housing to the community.

#### **DOJ-Restrictive Housing Report**

### E.3 Staffing

E.3.1 Compliance with restrictive housing policies is reflected in the employee-evaluations of staff assigned to restrictive housing units. **DOJ-Restrictive Housing Report**

### E.4 Staff Training

E.4.1 Correctional implications of young adult (age 18-24) brain development and associated de-escalation tactics. **DOJ-Restrictive Housing Report**

### E.5 Incident Health Care

E.5.1 When a detainee is transferred to restrictive housing, health care personnel are informed immediately and provide assessment and review of medical and mental health risk factors as indicated by the protocols established by the health authority. **4-ALDF-2A-4**

E.5.2 If a detainee with serious mental illness is placed in restrictive housing: **DOJ-Restrictive Housing Report**

E.5.2.a Mental health staff conducts a mental health consultation at the time of the detainee's placement;

E.5.2.b The detainee receives intensive, clinically appropriate mental health treatment for the entirety of the detainee's placement in restrictive housing;

E.5.2.c At least once per week, a qualified mental health practitioner, assigned to supervise mental health treatment in the restrictive housing unit, conducts face-to-face clinical contact with the detainee, to monitor the inmate's mental health status and identify signs of deterioration.

E.5.3 After 30 days in restrictive housing, and every 30 days thereafter, all detainees in restrictive



housing receive a face-to-face psychological review by mental health staff. If at any point a detainee show signs of psychological deterioration while in restrictive housing, the detainee is immediately evaluated by mental health staff. **DOJ-Restrictive Housing Report**

## E.6 Detainee Discipline

- E.6.1 Disciplinary Segregation, as a penalty for committing a prohibited act, is reserved for offenses involving violence, escape, or posing a threat to institutional safety by encouraging others to engage in such conduct. **DOJ-Restrictive Housing Report**
- E.6.2 Absent compelling circumstances, such as a pending criminal investigation, a detainee does not remain in investigative segregation for a longer period of time than the maximum term of disciplinary segregation permitted for the most serious offense charged. **DOJ-Restrictive Housing Report.**
- E.6.3 The disciplinary hearing is conducted by a correctional official outside the regular chain of command at the institution where the inmate is housed. **DOJ-Restrictive Housing Report**
- E.6.4 When a disciplinary hearing officer is confronted with a detainee who demonstrates symptoms of mental illness, the disciplinary officer consults with qualified mental health services professionals to provide input as to: **DOJ-Restrictive Housing Report**
- E.6.5 The detainee's behavior while in investigative segregation is given consideration by the disciplinary hearing officer. **DOJ-Restrictive Housing Report**
- E.6.6 Time spent in investigative segregation is credited towards the term of disciplinary segregation. **DOJ-Restrictive Housing Report**
- E.6.7 Disciplinary sentences for offenses resulting from the same incident are served concurrently. **DOJ-Restrictive Housing Report**

## E.7 Administrative/Disciplinary

- E.7.1 The reason for placing and retaining a detainee in restrictive housing is clearly articulated, supported by objective evidence, and serves a specific penological purpose. **DOJ-Restrictive Housing Report**
- E.7.2 Policy identifies the conditions in which a detainee may be placed in restrictive housing in response to an alleged disciplinary violation. Such placements are limited to an investigation into those offenses for which disciplinary segregation is an approved sanction. (Offenses involving violence, escape, or a threat to institutional safety by encouraging others to engage in such misconduct.) **DOJ-Restrictive Housing Report**
- E.7.3 Policy prohibits the placement of juveniles in restrictive housing. **DOJ-Restrictive Housing Report**
- E.7.4 The facility administrator or designee can order immediate placement in restrictive housing when it is necessary to protect the detainee or others. The action will be approved, denied, or modified within 24 hours by an appropriate and higher authority who is not involved in the initial placement.

- E.7.5 Detainees are not placed in restrictive housing unless correctional officials conclude, based on evidence, that no other form of housing will ensure the detainee's safety and the safety of staff, other detainees and the public. **DOJ-Restrictive Housing Report**
- E.7.6 Detainees who are lesbian, gay, bisexual, transgender, intersex (LGBTI), gender nonconforming, or whose appearance or manner does not conform to traditional gender expectations should not place in restrictive housing solely on the basis of such identification or status. If a detainee in this category faces a legitimate threat from other inmates, correctional officials shall seek alternative housing, with conditions comparable to those of general population. **DOJ-Restrictive Housing Report**
- E.7.7 Women who are pregnant, who are postpartum, who recently had a miscarriage, or who recently had a terminated pregnancy should not to be placed in restrictive housing. If a detainee in this category is placed in restrictive housing, the decision to must be approved by senior correctional officials above the facility administrator and in consultation with health officials who are above the facility clinical director. This review must be completed within 24-hours of the initial placement and reviewed every 24-hours thereafter. **DOJ-Restrictive Housing Report**
- E.7.8 When a detainee is transferred to restrictive housing, health care personnel are informed immediately and provide assessment and review of medical and mental health risk factors as indicated by the protocols established by the health authority.
- E.7.9 Detainees with serious mental illness are not placed in restrictive housing, unless: **DOJ-Restrictive Housing Report**
- E.7.9.a The detainee presents such an immediate and serious danger that there is no reasonable alternative;
  - E.7.9.b A qualified mental health practitioner determines:
    - E.7.9.b.1 That placement in restrictive housing would not harm the detainee;
    - E.7.9.b.2 The detainee is not a suicide risk;
    - E.7.9.b.3 The detainee does not have active psychotic symptoms;
    - E.7.9.b.4 In disciplinary circumstances, the detainee's lack of responsibility due to mental illness or mitigating factors related to the mental illness should also preclude the detainee's placement in restrictive housing.
- E.7.10 If a detainee with serious mental illness is placed in restrictive housing: **DOJ-Restrictive Housing Report**
- E.7.10.a Mental health staff conduct a mental health consultation at the time of the detainee's placement ;
  - E.7.10.b At least once per week, a multidisciplinary committee of correctional officials should review the detainee's placement in restrictive housing;

- E.7.10.c The detainee receives enhanced opportunities for in-cell and out-of-cell therapeutic activities and additional unstructured out-of-cell time, to the extent such activities can be conducted while ensuring the safety of the detainee, staff, other detainees and the public;
- E.7.10.d After 30 days in restrictive housing, the detainee is removed from restrictive housing, unless the facility administrator certifies that transferring the detainee to alternative housing is clearly inappropriate. This determination includes an evaluation by mental health staff.
- E.7.11 Unless medical attention is needed more frequently, all detainees in restrictive housing receives a daily visit from a qualified health care provider. The presence of a health care provider in restrictive housing is announced and recorded.
- E.7.12 Clinical encounters are conducted out-of-cell to ensure patient privacy and reduce barriers to treatment. **DOJ-Restrictive Housing Report**
- E.7.13 After 30 days in restrictive housing, and every 30 days thereafter, all detainees in restrictive housing receives a face-to-face psychological review by mental health staff. **DOJ-Restrictive Housing Report**
- E.7.14 A detainee's initial and ongoing placement in restrictive housing is reviewed every seven days by a multi-disciplinary staff committee, which includes facility leadership and medical and mental health professionals. **DOJ-Restrictive Housing Report**
- E.7.15 To incentivize conduct that furthers institutional safety, detainees who demonstrate good behavior during disciplinary segregation should be given consideration by the multi-disciplinary committee for early release from segregation. **DOJ-Restrictive Housing Report**
- E.7.16 For every detainee in restrictive housing correctional staff develop a clear plan for returning the detainee to less restrictive conditions as promptly as possible. This plan is shared with the detainee, unless doing so would jeopardize the safety of the inmate, staff, other inmates, or the public. **DOJ-Restrictive Housing Report**
- E.7.17 Detainees placed in restrictive housing for preventative purposes are provided an opportunity to participate in a step-down program to allow them to progress to less restrictive housing. **DOJ-Restrictive Housing Report**
- E.7.18 There is a defined process for releasing a detainee from restrictive housing.
- E.7.19 Continuous confinement in restrictive housing for more than 30 days requires the review and approval of the facility administrator.
- E.7.20 Restrictive housing units provide living conditions that approximate those of the general detainee population. All exceptions are clearly documented. **4-ALDF-2A-51**

- E.7.21 Restrictive housing cells/rooms permit the detainees assigned to them converse with and be observed by staff members. **4-ALDF-2A-51**
- E.7.22 Written policy, procedure, and practice require that all special management inmates are personally observed by a correctional officer twice per hour, but no more than 40 minutes apart, on an irregular schedule. Inmates who are violent or mentally disordered or who demonstrate unusual or bizarre behavior receive more frequent observation; self-harm and suicidal inmates are under continuous observation. Identification of the type of observation (minimal to constant) is determined and documented on a log by a qualified mental health professional during regular hours or medical staff after hours.
- E.7.23 Detainees in restrictive housing receive daily visits from the facility administrator or designee, and weekly visits from members of the program staff.
- E.7.24 Staff assigned, on a regular basis, to work directly with detainees in restrictive housing are selected based on criteria that includes:
- E.7.24.a Completion of a 1-year probationary period (Staff of USMS contract facilities must have also received final employment approval.)
  - E.7.24.b Experience
  - E.7.24.c Suitability for this population
  - E.7.24.d Specialized training which includes: (1) a review of restrictive housing policy and procedures, and (2) identifying and reporting signs of mental health decompensation of detainees in restrictive housing. **DOJ-Restrictive Housing Report**
- E.7.25 Staff assigned to restrictive housing units are closely supervised and their performance is documented annually. There are provisions for rotation to other duties/posts.
- E.7.26 Staff operating restrictive housing units maintain a permanent log that contains at a minimum the following information for each detainee admitted to restrictive housing:
- E.7.26a Name
  - E.7.26b Number
  - E.7.26c Housing location
  - E.7.26d Date admitted
  - E.7.26e Type of infraction or reason for admission
  - E.7.26f Tentative/actual transition date
  - E.7.26g Special medical or mental health issues
- E.7.27 All visitors to the restrictive housing unit are documented on a permanent log.

- E.7.28 Written policy, procedure, and practice provide that all detainees in restrictive housing are provided medication as prescribed. **4-ALDF-2A-56**
- E.7.29 Written policy, procedure, and practice provide that all detainees in restrictive housing are provided suitable clothing, and access to basic personal items for use in their cells unless there is imminent danger that a detainee or any other detainee(s) will destroy an item or induce self-injury. **4-ALDF-2A-56-1**
- E.7.30 Detainees in restrictive housing units have the opportunity to shave and shower at least three times per week. Detainees in restrictive housing units receive laundry and hair care services and are issued and exchange clothing, bedding, and linen on the same basis as detainees in general population. Exceptions are permitted only when determined to be necessary. Any exception is recorded in the unit log and justified in writing. **4-ALDF-2A-57**
- E.7.31 When a detainee in restrictive housing is deprived of any usual authorized item or activity, a report of the action is made and forwarded to the facility administrator or designee. **4-ALDF-2A-58**
- E.7.32 If a detainee uses food or food service equipment in a manner that is hazardous to self, staff, or other detainees, alternative meal service may be provided. Alternative meal service is on an individual basis, is based on health or safety considerations only, meets basic nutritional requirements, and occurs with the written approval of facility administrator or designee and responsible health authority. The substitution does not exceed seven days. **4-ALDF-2A-59**
- E.7.33 Detainees in restrictive housing units can write and receive letters on the same basis as detainees in the general population. **4-ALDF-2A-60**
- E.7.34 Detainees in restrictive housing units have opportunities for visitation unless there are substantial reasons for withholding such privileges. All denials for visitation are documented. **4-ALDF-2A-61**
- E.7.35 Detainees in restrictive housing units have access to legal materials. **4-ALDF-2A-62**
- E.7.36 Detainees in restrictive housing units have access to reading materials. **4-ALDF-2A-63**
- E.7.37 Detainees in restrictive housing units are offered a minimum of one hour of exercise five days a week outside of their cells, unless security or safety considerations dictate otherwise. **4-ALDF-2A-64**
- E.7.38 In addition to the minimum period of recreation, the multi-disciplinary committee identifies ways to increase out-of-cell opportunities for recreation, education, clinically appropriate treatment therapies, skill-building, and social interaction with staff and other detainees. **DOJ-Restrictive Housing Report**
- E.7.39 Detainees in disciplinary detention are allowed limited telephone privileges consisting of telephone calls related to specifically to access to the judicial process and family emergencies as determined by the facility administrator or designee. **4-ALDF-2A-65**

E.7.40 Detainees in restrictive housing have access to programs and services that include, but are not limited to the following:

- E.7.40.a Educational services
- E.7.40.b Commissary services
- E.7.40.c Library services
- E.7.40.d Social services
- E.7.40.e Religious guidance
- E.7.40.f Recreational programs
- E.7.40.g Telephone access
- E.7.40.h Medical and behavioral health services

E.7.41 Data is available about several aspects of restrictive housing units. This data includes: **DOJ-Restrictive Housing Report**

- E.7.41.a Total number of each type of restrictive housing placement
- E.7.41.b Restrictive housing recidivism rates
- E.7.41.c Average length of restrictive housing placement
- E.7.41.d Demographic information of detainees placed in restrictive housing to include: race, national origin, religion, gender, gender identity, sexual orientation, disability, and age.

## **E.8 Restrictive Housing: Classification and Housing**

- E.8.1 The classification process ensures detainees are housed in the least restrictive setting necessary to ensure their own safety, as well as the safety of staff, other detainees, other detainees, and the public. **DOJ-Restrictive Housing Report**
- E.8.2 Classification systems identify the most common reasons that detainees request protective housing (e.g., prior cooperation with law enforcement, conviction for sex offense, gang affiliation, and sex or gender identification) and identify procedures for safely housing these detainees outside restrictive housing units. **DOJ-Restrictive Housing Report**

# **SECTION F: SAFETY AND SANITATION**

## **F.1 Fire Safety and Chemical Control**

- F.1.1 The facility conforms to applicable federal, state, and/or local fire safety codes; in addition to those set forth by the National Fire Protection Association (NFPA), and the Occupational Safety and Health Administration (OSHA).
- F.1.2 The facility's fire prevention regulations and practices ensure the safety of staff, detainees, and visitors. These include, but are not limited to: **4-ALDF-1C-08**
- F.1.2.a An adequate fire protection service;
  - F.1.2.b Availability of fire hoses or extinguishers at appropriate locations throughout the facility.
- F.1.3 A fire alarm and automatic detection system is required. The jurisdiction having authority approves any variances, exceptions, or equivalencies and these must not constitute a life-safety threat to the occupants of the facility. **4-ALDF-1C-07**
- F.1.4 Where the fire alarm system is out of service for more than 4 hours in a 24-hour period, the authority having jurisdiction shall be notified, and the building shall be evacuated, or an approved fire watch shall be provided for all occupants left unprotected by the shutdown until the fire alarm system has been returned to service. **NFPA Life Safety Code 101 - 9.6.1.6**
- F.1.5 The facility fire safety inspection includes: **4-ALDF-1C-09**
- F.1.5.a A weekly fire and safety inspection of the facility by a qualified departmental staff member;
  - F.1.5.b A comprehensive and thorough monthly inspection of the facility by a qualified fire and safety officer for compliance with safety and fire prevention standards;
  - F.1.5.c An annual inspection by local or state fire officials;
  - F.1.5.d Documented corrective action for all areas of non-compliance.
- F.1.6 Fire safety equipment is tested at least quarterly. **4-ALDF-1C-09**
- F.1.7 Facility furnishings meet fire safety performance requirements. **4-ALDF-1C-10**
- F.1.8 An evacuation plan is used in the event of a fire or major emergency. The plan is approved by an independent outside inspector trained in the application of national fire safety codes and is reviewed annually, updated if necessary, and reissued to the local fire jurisdiction. The plan includes the following: **4-ALDF-1C-02**
- F.1.8.a Location of building/room floor plan

- F.1.8.b Use of exit signs and directional arrows for flow of traffic
- F.1.8.c Location of publicly posted plan
- F.1.9 There is a means for the immediate release of detainees from locked areas in case of emergency and provisions for a back-up system. **4-ALDF-1C-03**
- F.1.10 The facility has exits that are properly positioned, are clear from obstruction, and are distinctly and permanently marked to ensure the timely evacuations of detainees and staff in the event of fire or other emergency. **4-ALDF-1C-04**
- F.1.11 Fire drills are conducted (**NFPA Life Safety Code 101 Section 4.7**):
  - F.1.11.a Fire drills are conducted monthly or with sufficient frequency that observed fire drills demonstrate fire drill procedures are a matter of routine
  - F.1.11.b Fire drill locations and times are varied and unexpected
  - F.1.11.c Fire drills are documented and evaluated
- F.1.12 Use of padlocks and/or chains on cell doors and areas of assembly are prohibited.
- F.1.13 The use and storage of flammable, toxic, and caustic chemicals includes:
  - F.1.13.a Controlled access
  - F.1.13.b A current inventory
  - F.1.13.c Material Data Safety Sheets
  - F.1.13.d Personal Protective Equipment
  - F.1.13.e Staff and detainee safety training

## **F.2 Sanitation and Environmental Control**

- F.2.1 The facility is kept clean and in good repair. A housekeeping and maintenance plan addresses all facility areas and provides for daily housekeeping and regular maintenance by assigning specific duties and responsibilities to staff and detainees. **4-ALDF-1A-04**
- F.2.2 The facility complies with all applicable laws and regulations of the governing jurisdiction, and there is documentation by an independent, outside source that any past deficiencies noted in annual inspections have been corrected. The following inspections are implemented: **4-ALDF-1A-01**
  - F.2.2.a Weekly Sanitation inspection of all facility areas by a qualified department staff member;
  - F.2.2.b Comprehensive and thorough monthly inspection by a safety/sanitation specialist;
  - F.2.2.c An annual inspection by federal, state, and/or local sanitation and health officials.



- F.2.3 Areas of non-compliance identified during sanitation inspections are reported and corrective action measures are implemented.
- F.2.4 Vermin and pests are controlled through monthly inspections and treatment by a qualified pest control technician. **4-ALDF-4D-04**
- F.2.5 Smoking is not permitted in the facility. **4-ALDF-1A-21**
- F.2.6 Disposal of liquid, solid, and hazardous materials complies with applicable government regulations. **4-ALDF-1A-02**
- F.2.7 The facility's potable water source and supply, whether owned and operated by the public water department or the facility, is certified at least annually by an independent, outside source to be in compliance with jurisdictional laws and regulations. **4-ALDF-1A-07**
- F.2.8 A program exists to monitor environmental conditions of the facility. This program ensures:
- F.2.8.a Lighting throughout the facility is sufficient for the tasks performed. Lighting levels in detainee cells/rooms are at least 20 ft. candles in grooming and writing surface areas. **4-ALDF-1A-14**  
Temperature and humidity are mechanically raised or lowered to acceptable comfort levels. **4-ALDF-1A-20**
  - F.2.8.b A ventilation system supplies at least 15 cubic ft. per minutes of circulated air per occupant with a minimum of five cubic ft. per minute of outside air. Toilet rooms, and cells with toilets, have no less than four air changes. Air quantities are documented by a qualified technician not less than once every three years. **4-ALDF-1A-19**
  - F.2.8.c Noise levels in Detainee housing do not exceed 70 dBA (A scale) in daytime and 45 dBA (A scale) at night. Measurements are documented by a qualified, independent source and checked not less than every three years.
- F.2.9 Areas of non-compliance identified during environmental control monitoring are reported and corrective action measures are implemented.
- F.2.10 The number of detainees does not exceed the facility's rated bed capacity. **4-ALDF-1A-05**
- F.2.11 Detainee sleeping surfaces and mattresses are 12 inches off the floor. **4-ALDF-1A-11**
- F.2.12 Detainees are provided a place to store clothes and personal belongings. **4-ALDF-1A-11**

### **F.3 Clothing and Bedding**

- F.3.1 Facility clothing is properly fitted, climatically suitable, durable, and presentable. **4-ALDF-4B-03**

- F.3.2 Detainees are issued clean well-maintained clothing items in a sufficient quantity of each item, or provided an opportunity to exchange or have laundered, each item on a weekly equivalent basis:
- F.3.2.a Two outer garments (two shirts & pants, or two jumpsuits)
  - F.3.2.b Seven pairs of underwear
  - F.3.2.c Seven pairs of socks
- F.3.3 Detainees are issued one pair of facility footwear.
- F.3.4 Detainees are issued clean linens and towels in the following quantities and are provided the opportunity to exchange, or have laundered, these items each week:
- F.3.4.a Two sheets
  - F.3.4.b One pillowcase
  - F.3.4.c One towel
- F.3.5 Detainees are issued clean blankets in sufficient quantity to provide comfort under existing temperature controls. **4-ALDF-4B-02**
- F.3.6 Detainees are issued one mattress, not to include a mattress with integrated pillow. **4-ALDF-4B-02**
- F.3.7 The volunteer detainee workers are provided clothing appropriate for their work assignments.
- F.3.8 Detainee food service workers are permitted to exchange clothing daily. Other detainee workers are permitted to exchange clothing on a schedule appropriate to their work assignment.
- F.3.9 There is no delay in replacing clothing, linen, and bedding. **4-ALDF-4B-04**

## **F.4 Detainee Hygiene**

- F.4.1 Detainees have access to toilets and washbasins with temperature controlled hot and cold running water 24 hours per day and are able to use toilet facilities without staff assistance when they are confined in their cells/sleeping areas. **4-ALDF-4B-08**
- F.4.2 Detainees have access to operable showers with temperature controlled hot and cold running water. **4-ALDF-4B-09**
- F.4.3 Water for showers is thermostatically controlled to temperatures ranging from 100 degrees to 120 degrees Fahrenheit to ensure the safety of Detainees and to promote hygienic practices. **4-ALDF-4B-09**
- F.4.4 Articles for maintaining proper personal hygiene are available to all Detainees. **4-ALDF-4B-06**
- F.4.5 Detainees have access to hair care services. Hair care tools and equipment are cleaned and disinfected. **4-ALDF-4B-07**

## F.5 Emergency Power and Communication

- F.5.1 Essential lighting and life sustaining functions are maintained inside the facility and have the ability to operate in an emergency. **4-ALDF-1C-12**
- F.5.2 Preventative maintenance is guided by a plan, which provides for emergency repair or replacement. **4-ALDF-1C-13**
- F.5.3 Safety and security equipment is repaired or replaced immediately by qualified personnel. **4-ALDF-1C-14**
- F.5.4 Emergency equipment and systems are tested at least quarterly. Power generators are inspected weekly and load tested quarterly at a minimum, or in accordance with the manufacturer's recommendations and instruction manual. **4-ALDF-1C-15**

## SECTION G: SERVICES AND PROGRAMS

### G.1 Classification and Housing

- G.1.1 There is a formal classification process that starts at admission, for managing and separating detainees, and administering the facility. **4-ALDF-2A-30**
- G.1.2 The classification process ensures detainees are housed in the least restrictive setting necessary to ensure their own safety, as well as the safety of staff, other detainees, other detainees, and the public. **DOJ-Restrictive Housing Report**
- G.1.3 The classification process uses verifiable and documented data about detainees. **4-ALDF-2A-30**
- G.1.4 The classification system is used to separate detainees into groups that reduce the probability of assault and disruptive behavior. **4-ALDF-2A-30**
- G.1.5 Classification systems identify the most common reasons that detainees request protective housing (e.g., prior cooperation with law enforcement, conviction for sex offense, gang affiliation, and sex or gender identification) and identify procedures for safely housing these detainees outside restrictive housing units. **DOJ-Restrictive Housing Report**
- G.1.6 At a minimum, the classification system evaluates the following (**4-ALDF-2A-30; 4-ALDF-4D-22-3; 4-ALDF-4D-22-4**):
  - G.1.6.a Mental and emotional stability
  - G.1.6.b Escape history
  - G.1.6.c History of assaultive behavior
  - G.1.6.d Risk of sexual victimization
  - G.1.6.e Medical status

- G.1.6.f Age
- G.1.6.g Need to keep separate
- G.1.7 The initial classification is completed prior to reassignment from intake and short-term holding. **4-ALDF-2A-25**
- G.1.8 The detainee classification process ensures review of detainee status, and revision of detainee status as needed in response to changes in detainee behavior or circumstances. **4-ALDF-2A-31**
- G.1.9 Detainee housing assignments are based on age, gender, legal status, custody needs, special problems and needs, behavior. **4-ALDF-2A-32**

## **G.2 Access to the Courts and Legal Materials**

- G.2.1 The right of detainees to have access to courts is ensured. **4-ALDF-6A-01**
- G.2.2 Detainee access to counsel is ensured. Detainees are assisted in making confidential contact with attorneys and their authorized representatives. Such contact includes, but is not limited to **(4-ALDF-6A-02)**:
  - G.2.2.a Telephone communications
  - G.2.2.b Uncensored correspondence
  - G.2.2.c Visits
- G.2.3 Detainees have access to a law library if there is not adequate free legal assistance to assist them with criminal, civil, and administrative legal matters. Detainees have access to legal materials to facilitate the preparation of documents. **4-ALDF-6A-03**

## **G.3 Mail**

- G.3.1 Detainees are allowed to send and receive mail. When the detainee bears the mailing cost, there is no limit in the volume of letters he/she can send or receive or on the length, language, content, or source of mail publications, except when there is a reasonable belief that limitations are necessary to protect public safety or maintain facility order and security. **4-ALDF-5B-05**
- G.3.2 Indigent detainees receive a specified postage allowance to maintain community ties, and necessary postage for privileged correspondence. **4-ALDF-5B-06**
- G.3.3 Detainees are permitted to send sealed letters to a specified class of persons and organizations, including but not limited to the following: courts, counsel, officials of the confining authority, state and local chief executive officers, administrators of grievance systems, and members of the paroling authority. Staff in the presence of the detainee, may be allowed to inspect outgoing privileged mail for contraband before it is sealed. Mail to detainees from this specified class of persons and organizations may be opened only to inspect for contraband and only in the presence of the detainee, unless waived in

writing, or in circumstances, which may indicate contamination or a security threat. **4-ALDF-5B-09**

G.3.4 All incoming and outgoing non-privileged mail is inspected for contraband.

G.3.5 Excluding weekends and holidays or emergency situations, incoming and outgoing letters are held for no more than 24-hours, and packages are held for not more than 48-hours. **4-ALDF-5B-10**

## G.4 Telephones

G.4.1 Detainees are provided with access to telephones. **4-ALDF-5B-11**

G.4.2 Detainees with hearing and/or speech disabilities, and detainees who wish to communicate with parties, who have such disabilities, are afforded access to a telecommunications device for the deaf (TDD), or comparable equipment. Telephones with volume control are also made available to detainees with a hearing impairment. **4-ALDF-5B-11**

G.4.3 Staff ensures detainee telephones are operable.

G.4.4 Detainee telephone restrictions are documented.

## G.5 Religious Programs

G.5.1 Detainees have the opportunity to participate in practices of their religious faith that are deemed essential by the faith's judicatory, limited only by documentation showing a threat to the safety of persons involved in such activity itself or disruption of order in the facility. **4-ALDF-5C-17**

G.5.2 There is a chaplain with the minimum qualifications of clinical pastoral education or equivalent specialized training, and endorsement by the appropriate religious-certifying body. The chaplain assures equal status and protection for all religions. **4-ALDF-5C-19**

G.5.3 The chaplain, in cooperation with the facility administrator and/or designee, plans, directs, and supervises all aspects of the religious program, including approval and training of both lay and clergy volunteers from faiths represented in the detainee population. **4-ALDF-5C-20**

G.5.4 The chaplain and religious coordinator have physical access to all areas of the facility to minister to Detainees. **4-ALDF-5C-21**

G.5.5 When a religious leader of a detainee's faith is not represented through the chaplaincy staff or volunteers, the religious coordinator and chaplain assist the detainee in contacting such a person. That person must have the appropriate credentials from the faith's judiciary and may minister to the detainee under the supervision of the religious coordinator or chaplain. **4-ALDF-5C-22**

G.5.6 The facility provides space and equipment adequate for conducting and administering religious programs. **4-ALDF-5C-23**

## G.6 Recreation

- G.6.1 Detainees have access to exercise opportunities and equipment, including at least one-hour daily of physical exercise outside the cell and outdoors, when weather permits. (Access to the housing unit's dayroom does not satisfy the standard's requirement.) **4-ALDF-5C-01**
- G.6.2 Detainees have opportunities to participate in leisure-time activities outside their respective cell or living room on a daily basis. **4-ALDF-5C-02**

## G.7 Visitation

- G.7.1 The facility has a detainee visitation program to facilitate the maintaining of family and community ties.
- G.7.2 Sufficient space is provided for: **4-ALDF 5B-01**
- G.7.2.a Detainee visiting;
  - G.7.2.b Screening and searching of detainees and visitors;
  - G.7.2.c Storage of visitor's coats, handbags, and other personal items not allowed into the visiting area.
- G.7.3 The number of visitors a detainee may receive and the length of visits are limited only by the facility's schedule, space, and personal constraints or when there are substantial reasons to justify such limitations. **4-ALDF 5B-02**
- G.7.4 Conditions under which visits may be denied are defined in writing. **4-ALDF 5B-02**
- G.7.5 Special visits are provided. **4-ALDF-5B-03**
- G.7.6 Visitors identify themselves and register on entry into the facility. The circumstances under which visitors are searched are described in writing. **4-ALDF-5B-04**

## G.8 Work Programs

- G.8.1 The facility has a detainee work assignment program. **4-ALDF-5C-06**
- G.8.2 Detainee working conditions comply with all applicable federal, state, or local work safety laws and regulations. **4-ALDF-5C-11**
- G.8.3 Detainee work assignments do not compromise the security of the facility.
- G.8.4 Detainees work under the direction of staff and not under other detainees.
- G.8.5 Pretrial and un-sentenced detainees are not required to work except to do personal housekeeping and to clean their housing area. **4-ALDF-5C-08**
- G.8.6 Detainees are allowed to volunteer for work assignments. A work/volunteer agreement document is on file for all detainees participating in non-routine housekeeping and sanitation work assignments. **4-ALDF-5C-08**
- G.8.7 Detainees are compensated for work performed. **4-ALDF-5C-12**

## G.9 Grievance Program

- G.9.1 A grievance procedure is made available to all detainees and includes at least one level of appeal. **4-ALDF-6B-01**
- G.9.2 Grievance forms are readily available and easily accessible to detainees.
- G.9.3 Detainee grievances are tracked in a system that records at a minimum the basis and disposition of each complaint.
- G.9.4 Detainee's grievance forms provide the opportunity for detainees to retain a copy of the grievance filed.