Volume 7 - Custody Operations Force Manual

• 7-01/000.00 Preamble to Force Manual - Custody Division Manual

It is the Sheriff's Department's responsibility to provide a safe custody environment for the inmates and a safe working environment for Sheriff's personnel. All employees shall view their professional duties in the context of safety for themselves, other employees, and the inmates.

All jail personnel should maintain a professional demeanor, according to each situation, keeping in mind the Department's Core Values. All Department members shall focus on upholding safety, respect and professionalism, even in situations where force is required. Our collective and individual goal is to prevent force through effective communication emphasizing safety, respect, and professionalism as emphasized in the Department's Core Values.

• 7-01/010.00 Force Prevention Principles

Department members shall only use that level of force which is objectively reasonable to uphold safety in the jails and force should be used as a last resort. Reasonable efforts, depending on each situation, should be made by jail personnel to de-escalate incidents by first using sound verbal communications when possible or the use of time and distance. When confronted with a situation in which force may be required, Department members must call a supervisor to the scene as soon as time and circumstances permit.

When force must be used, custody personnel shall endeavor to use restraint techniques when possible, and use only the level of force required for the situation. Force must be terminated as soon as possible consistent with maintaining control of the situation and must be de-escalated if resistance decreases.

Except in the most compelling of circumstances, personnel involved in a use of force or an interaction with a recalcitrant inmate, including participants, witnesses, and supervisors directing the force, shall not escort the inmate to the clinic, housing, a holding cell, etc., unless there are no other personnel reasonably available to escort the inmate.

When Department members witness force that they know is excessive, the member shall attempt, when feasible, and when it does not jeopardize the safety of the inmate or staff, to intervene in an effort to de-escalate, reduce, control or stop the force being used. Unreasonable force is prohibited.

Personnel have a duty to protect inmates and take the appropriate steps to intervene in inmate on inmate violence when it is reasonably safe to do so.

• 7-01/020.00 Authorized Use of Force

Department members are authorized to use the amount of force that is objectively reasonable to overcome resistance and shall only be used as a last resort. "Objectively reasonable" means that Department members shall evaluate each situation requiring the use of force in light of the known circumstances, including, but not limited to, the severity of the crime at issue, whether the suspect poses an immediate threat to the safety of the member or others, and whether the suspect is actively resisting, in determining the necessity for force and the appropriate level of force. If the level of resistance decreases and the incident de-escalates, the force must be terminated as soon as possible consistent with maintaining control of the situation.

Force may not be used as discipline, corporal punishment, or retaliation.

Department members retain the right to self-defense and have a duty to protect the lives of others. Department members may only use authorized weapons for which they have been trained to promote a safe and effective response to situations. If exigent circumstances exist, department members may use any available weapon or instrument to prevent imminent loss of life or serious bodily injury, if there are no reasonable alternatives.

• 7-01/030.00 Limitations on Force

Department members shall not use strikes, punches, or kicks, or use the types of force against a restrained inmate described in this policy, in response to passive resistance, active resistance, or mere verbal threats from an inmate. Department members may not use any type of force as a means of punishment or retaliation.

The reasonableness inquiry with respect to force is an objective one and applies to all force described in this policy. The focus of force evaluation shall be on whether the Department member's actions were objectively reasonable in light of the facts and circumstances confronting and known to the Department member at the time of the incident. Department members shall immediately reduce the types of force described in this policy as resistance decreases, and immediately discontinue using that force once a threat or resistance no longer exists.

Use of Force Terms Defined

- **Active Resistance:** Physical actions by the inmate who is not complying with verbal commands and is actively attempting to prevent control, but which do not constitute an assault (i.e., pulling away, pinning arms under the body, thrashing around, and/or body going rigid).
- **Imminent:** It is ready to take place, impending, likely to happen, or at the point of happening.
- **Passive Resistance:** The inmate is uncooperative and may be argumentative but is not a threat to the Department member or others. The following are some examples of uncooperative behavior: the inmate is not responding to verbal commands and may refuse to move by standing still, sitting down, laying down, going limp, or grabbing onto a fixed object.
- **Serious Injury:** A serious impairment of physical condition, including, but not limited to, the following: loss of consciousness; concussion; bone fracture; protracted loss or impairment of function of any bodily member or organ; a wound requiring extensive suturing; and serious disfigurement.

Strikes or Punches to the Face, Head, or Neck

Strikes or punches to the face, head, or neck are prohibited unless all of the following are satisfied:

1. the inmate is physically assaultive, and
2. there is an imminent danger of serious injury and/or death, and
3. other techniques would be ineffective.

Head strikes may never be employed in retaliation for conduct that has ceased to pose an imminent threat.

Circumstances Involving Spitting

Spitting may pose a significant health risk. Department members should take all reasonable precautions to avoid circumstances where they may be spat upon.

In the event an inmate is in the process of actually spitting at a Department member's face (e.g., the inmate is collecting saliva/mucus in their mouth or making sounds like they are doing so), head strikes are prohibited unless other techniques would be ineffective and the inmate's conduct poses an imminent danger of serious injury. Any head strike must cease immediately once the spitting is no longer in process or imminent.

Circumstances Involving Biting

Biting may pose a significant risk of injury. Department members should take all reasonable precautions to avoid circumstances where they may be bitten.

In the event an inmate is biting, or attempting to bite a Department member, a head strike may not be used if (1) the inmate has stopped biting, or (2) there is no reasonable opportunity to bite, or (3) the inmate's conduct poses no imminent danger of serious injury from biting.

Other Circumstances

Department members may not use a head strike in response to an inmate only taking a fighting stance.

Other effective techniques beside strikes or punches to the face, head, or neck might include strikes or punches to the body, takedowns, command presence, advisements, warnings, verbal persuasion, commands, delaying tactics, tactical repositioning, using physical barriers, creating distance, use of OC spray or Taser, requesting the presence of a sergeant, waiting for the sergeant to arrive, and waiting for additional Department members and resources to arrive.

Kicks

Department members are prohibited from kicking an inmate who is on the ground, unless (1) the inmate is physically assaultive, (2) there is an imminent danger or serious injury and/or death, and (3) other techniques would be ineffective.

Department members are prohibited from kicking a standing inmate anywhere above the knee unless (1) the inmate is physically assaultive, (2) there is an imminent danger of serious injury and/or death, and (3) other techniques would be ineffective.

Department members may kick a physically assaultive inmate below the knee if it is necessary to create distance and to prevent potential injury.

Other effective techniques beside kicks might include strikes or punches to the body, takedowns, command presence, advisements, warnings, verbal persuasion, commands, delaying tactics, tactical repositioning, using physical barriers, creating distance, use of OC spray or Taser, requesting the presence of a sergeant, waiting for the sergeant to arrive, and waiting for additional Department members and resources to arrive.

Use of Force Against Restrained Inmates

The following types of force on restrained inmates are prohibited unless (1) the inmate is physically assaultive or self-injurious, (2) there is an imminent danger of serious injury and/or death, and (3) other techniques to control the inmate would be ineffective:

- Strikes or punches (anywhere on the body)
- Use of the Taser
- Use of chemical agents

Other effective techniques to control the restrained inmate might include command presence, advisements, warnings, verbal persuasion, commands, delaying tactics, tactical repositioning, control holds, takedowns, using physical barriers, creating distance, requesting the presence of a sergeant, waiting for the sergeant to arrive, and waiting for additional Department members and resources to arrive.

If a physically assaultive inmate is restrained to a fixed object and presents an imminent threat of injury, Department members are to distance themselves from the assaultive conduct and request the presence of a sergeant rather than use the force options listed above, unless immediate intervention is required.

De-escalation

De-escalation is a core principle of sound tactical operations and Department members shall consider de-escalation to be part of tactical planning. The overall goal is to decrease the intensity of the situation by persuading an inmate to voluntarily comply, allow the Department member to use additional options other than force, or to mitigate the need to use a greater amount of force to safely resolve the situation. Whenever safe to do so, Department members shall use de-escalation techniques. De-escalation may include creating distance or using physical barriers and calling for additional resources. Department members shall also avoid tactics and approaches that unnecessarily escalate situations and increase the likelihood of a need to use force or a greater degree of force.

Deadly Force

The following types of force may only be used if a Department member can reasonably articulate that the circumstances justify the use of deadly force as defined in Penal Code section 835a(c)(1):

- Intentional head or neck strikes with an impact weapon.
- Intentionally causing an inmate's head to impact against a hard fixed object (e.g., concrete floor, wall, jail bars, etc.).
- Intentionally kicking an individual in the head or neck from a standing position while the individual is lying

on the ground/floor.

- Intentionally kneeing an individual in the head, causing their head to strike the ground, floor, or other hard, fixed object.
- Special weapons, electronic immobilization devices (TASERs), and chemical agents, including aerosol chemical agents used against an inmate known to be pregnant (refer to CDM section 7-02/010.00 Pregnant Inmates).

Carotid Restraint Holds and Choke Holds

Department members may not use carotid restraint holds or choke holds. Any use of a carotid restraint or choke hold will be investigated as Category 3 force with a mandatory Internal Affairs Bureau (IAB) rollout.

• 7-01/040.00 Planned Use of Force

Force that is used in response to an immediate threat to the safety of any Department member or another person, or when there is no time to plan or wait for assistance, is considered reactive force. All other force is considered planned force.

In accordance with CDM section 5-01/030.05, “Identification and Classification Symbols for Pregnant Inmates,” and for the purposes of this section, “pregnant inmate” means an inmate that is known to the Department to be pregnant. Inmates known to be pregnant will wear an [REDACTED TEXT] wristband loop along with the [REDACTED TEXT] sub-classification code displayed on the wristband. Their uniform consists of a [REDACTED TEXT] shirt with a [REDACTED TEXT] front side and a [REDACTED TEXT] back side, and [REDACTED TEXT] pants.

Planned force must be used when there is no immediate physical threat from the inmate, no immediate threat of the destruction of a substantial amount of property, no immediate threat of escape, or when waiting for assistance will not affect the safety of inmates or staff. Examples include inmates who exhibit prolonged passive resistance or inmate extractions.

When force is required, efforts shall be made to plan, supervise, and direct force in an effort to control confrontations in a calm and professional manner.

Personnel confronted with a situation in which force may be required shall request the presence of a sergeant or supervising line deputy as soon as time and circumstances permit.

When planned force occurs, there shall be a tactical plan approved by a shift supervisor that is predicated on preventing the use of force whenever possible. A sergeant shall be present during planned tactical operations to approve and direct the use of force.

If chemical agents are used during planned force, extraction teams should delay entry to give chemical agents sufficient time to gain the desired effect, but no longer than needed to gain compliance. Chemical agents, as well as any special weapons and electronic immobilization devices (TASERs), shall not be used against an inmate known to be pregnant, absent circumstances that justify the use of deadly force. In addition, personnel shall not intentionally expose an inmate known to be pregnant to chemical agents (refer to Custody Division Manual [CDM] sections 7-02/010.00, “Pregnant Inmates,” 7-05/000.00, “Chemical Agents,” and 7-05/010.00,

“Aerosol Chemical Agents.”)

During planned force, medical and mental health personnel shall be present or, if impractical or unsafe, staged nearby when feasible.

When time and circumstances permit, planned force shall also be video recorded. Refer to CDM section 7-06/010.00, “Video Recording Procedures,” for procedures regarding the recording of incidents with a portable video camera.

• 7-01/050.00 Inmate Extractions

Inmate extractions are accomplished through planned force situations where it becomes necessary to remove an inmate who refuses to exit a confined area. A “confined area” is defined as any cell or secured area inside a housing facility structure in which the inmate can be secured, isolated, and controlled.

The goals of an inmate extraction are to restore order, maintain the security of the facility, and safely remove inmates (when necessary) using only the force reasonable to accomplish the objective. An inmate extraction should be employed only if objectively reasonable efforts, that do not include use of force, are unsuccessful.

Inmate extraction teams shall maintain a high level of proficiency through training. Recurrent training for inmate extraction teams shall include:

- Use of force policies and related legal issues
- The use of special weapons and related policies
- The use of specialized equipment
- Various tactical options
- Team discipline and leadership
- Handling and negotiating with all inmates including those with special needs
- Collaborating with medical and mental health professionals to influence the most effective negotiation results

• 7-01/050.05 Inmate Extraction Procedures

For the purposes of these procedures, any area, including (but not limited to) dorms, dayrooms, and recreation areas, may be considered to be confined areas so long as the inmate can be safely contained there long enough for staff to summon a supervisor to the site and to safely plan a response to the situation. In a dormitory or other confined setting where additional inmates are present, it may be necessary for an extraction to be expedited in order to prevent a situation from escalating and involving additional inmates. In such instances, the supervisor may abbreviate the cool-down and negotiation period with the inmate to avoid the development of circumstances that may escalate the incident or cause the involvement or evacuation of additional inmates. (See the Immediate Extractions section below).

If, during the inmate extraction process, the inmate indicates a willingness to comply at any time, the team leader (sergeant) shall reassess the situation and tactically utilize means necessary to allow the inmate to

comply with instructions. If the inmate exits the confined area as the result of negotiations, or verbal commands only, the incident shall be documented in the Electronic Line Operations Tracking System (e-LOTS) as an “Inmate Extraction Averted?” under Project Type “Prevented-Use of Force.”

When simple instructions and requests fail to cause an inmate to exit a confined area, a supervisor, at the minimum rank of sergeant, shall be notified in all but life-threatening or exigent circumstances. The sergeant shall go to the confined area, ask other staff to stand far enough back to provide a level of privacy for the conversation, whenever possible, and reason with the inmate to comply with orders to avoid the necessity of force.

Prior to any use of force, inmates in mental health housing who do not present an obvious danger to themselves (or others) but refuse to exit their cells when requested to do so shall be given a “cooling off” period. The “cooling off” period shall be given to inmates in mental health housing after non-force related attempts of compliance have failed. A line supervisor or the watch commander shall again attempt to gain compliance without the use of force after the inmate has been given a reasonable amount of time to “cool off,” which shall include a request that Correctional Health Services (CHS) mental health personnel respond to the location to speak to the inmate. Mental health staff shall be permitted to make good faith efforts, including talking to the inmate with privacy (whenever possible) for a clinically significant period of time, to assess the inmate's condition and reason with the inmate to avoid the necessity for use of force.

If the sergeant is unsuccessful in gaining the inmate's cooperation, the watch commander and the inmate extraction team shall be notified and respond to the area. The watch commander shall go to the confined area, ask other staff to stand far enough back to provide a level of privacy for the conversation between the watch commander and the inmate (whenever possible), and attempt to reason with the inmate to comply with orders. Deputies who have been involved in the events or conflict with the inmate leading to the need for an extraction may not be part of the extraction team. If it is necessary to include involved deputies in an extraction team, the decision must be approved by the watch commander and must include a written explanation/justification in his/her report.

Throughout the entire process, best efforts should be used to videotape all negotiations with the involved inmate. In all but life-threatening or exigent circumstances, an inmate extraction shall not be accomplished without the physical presence of medical and mental health personnel.

In the event of an extraction, the "Watch Commander's Extraction Checklist" (SH-J-456) shall be used as a guideline from the onset of the event. Department force reporting procedures as outlined in Custody Division Manual (CDM) section 7-06/000.00, "Use of Force Reporting Procedures," shall also apply.

COURT REMOVAL ORDERS AND SUBPOENAS

In the event the extraction is based upon a court removal order or subpoena, the watch commander shall contact the judge of the concerned court. The judge shall be advised that force may be necessary to extract the inmate from a confined area to ensure the court appearance. The judge will be offered an opportunity to enforce, rescind, or delay the removal order. If the judge orders the inmate to appear in court, the inmate shall be extracted on the verbal order of the court. Authorization for the removal from the judge may be relayed and accepted via the court clerk or bailiff. Following the verbal order, the judge will send a facsimile of a minute order requiring the inmate's appearance in court to the unit commander of the concerned facility. In the event the judge of the concerned court is not available, the watch commander shall make every effort to contact the presiding judge of the court and follow the same procedures. A record of all contacts between custody

facilities and courts along with copies of the minute orders shall be included in any subsequent use of force documentation.

EXTRACTIONS WHEN PARAMEDICS ARE ON-SCENE

In the event paramedics are on-scene to transport an inmate to a County or private hospital for treatment and the inmate refuses to exit their cell, watch commanders shall obtain from CHS information on the inmate's life threatening or emergent medical circumstance which necessitates an extraction. The information, as well as the name of the CHS personnel informant, shall be documented in the "Watch Commander's Extraction Checklist" (SH-J-456). The watch commander shall then adhere to immediate extraction procedures.

If on-scene paramedics determine the inmate does not necessitate immediate transport for treatment via ambulance or CHS does not provide information on the inmate's medical condition necessitating an immediate extraction, the watch commander shall adhere to controlled extraction procedures. The inmate's subsequent transportation to the appropriate medical facility shall be coordinated by the watch commander and CHS personnel.

IMMEDIATE EXTRACTIONS

In life-threatening circumstances, staff shall not wait for a supervisor unless they lack the staff or experience to conduct the extraction. The watch commander or on-site supervisor may authorize staff to conduct an immediate extraction when there is a life-threatening or exigent circumstance such as when the behavior of an inmate constitutes an immediate and serious threat to the safety of that inmate, staff, visitors, or other inmates (e.g., inciting behavior, assaults, and/or suicide attempts) or to the institution (e.g., controlling disturbances, including the massive destruction of property or jeopardizing institutional security). Nothing in this policy precludes personnel from entering any confined area to execute the rescue of an inmate in the event of exigent or life-threatening circumstances. However, any such actions by staff must be clearly articulable and the watch commander, on-site supervisor, or staff must document the life-threatening or exigent circumstance. Additionally, staff must ensure radio communication of the emergency and that sufficient personnel are present to safely execute the removal. Should circumstances permit, supervisors are encouraged to request the presence of medical and/or mental health personnel.

CONTROLLED EXTRACTIONS

Controlled extractions occur in situations where there is no immediate threat to loss of life or institutional security. Controlled extractions may only be authorized by the watch commander and are prompted by circumstances that create safety, security, or operational concerns (i.e., requests by CHS personnel for non-emergent treatment, court orders, or violations of jail rules, which require the inmate to be transferred to a disciplinary module). In no case shall any of these measures regarding extraction, or any kind of use of force (including the use of chemical agents), be used to punish an inmate for refusing to comply. Refer to CDM section 5-12/005.05, "Anti-Retaliation Policy."

The unit commander shall be notified of all controlled extractions prior to the commencement of the extraction. In the event the unit commander is not available, the inmate extraction may proceed at the watch commander's discretion. The attempt to notify the unit commander shall be documented as noted in the "Watch Commander's Extraction Checklist."

Watch Commander Responsibilities

Once it is determined that a controlled extraction may be necessary, the watch commander shall be notified and shall:

- Respond to the location and assume the role of incident commander
- Confer with the team leader to ensure the criteria is met for an inmate extraction
- Ensure a scribe has been assigned to document the course of events
- Ensure best efforts are made to videotape the entire extraction process, including all contact with the inmate, all negotiations, the extraction rehearsals, and any subsequent interviews with the inmates
- Review the “Watch Commander's Extraction Checklist”
- Notify the unit commander
- Consult with CHS personnel and clergy (as necessary), allowing them an opportunity to communicate with the inmate(s) in an attempt to resolve the situation. When possible, ask staff to stand far enough back to provide a level of privacy for the conversation between the inmate and CHS personnel and clergy
- Plan the extraction and tactics to be used with the team leader
- Meet personally with the inmate; ask staff to stand far enough back to provide a level of privacy for the conversation, whenever possible. Consult with medical and mental health staff after their assessment of the inmate’s current mental and/or physical condition. Determine the appropriateness of utilizing chemical agents and/or special weapons based on any existing medical and/or mental conditions or known pregnancy
    - In accordance with Penal Code 4023.8(h), absent circumstances that justify the use of deadly force, special weapons, electronic immobilization devices (TASERs), and chemical agents, including aerosol chemical agents, shall not be used against an inmate known to be pregnant. In addition, personnel shall not intentionally expose an inmate known to be pregnant to chemical agents. Absent exigent circumstances requiring immediate use of chemical agents, personnel shall request pregnant inmates move from areas where unintentional exposure to the chemical agents may be reasonably foreseeable. Any refusal by a pregnant inmate shall be video recorded and medical personnel shall be summoned to the location.
- Approve the plan (incorporating information provided by medical and mental health staff) and standby during team and supporting personnel (e.g., safety officers, medical staff) briefing, deployment, and completion of the extraction
- Ensure the Safety Officer (second team leader or additional sergeant) is on-scene and directing medical personnel to the extracted inmate
- Ensure the inmate is immediately escorted to medical personnel by a supervisor and the appropriate number of personnel who were not directly involved with the extraction
- Obtain visual documentation of all injuries. Each inmate shall be questioned relative to his/her injuries on the video recording
- Specifically identify in the “Supervisor’s Report on Use of Force” (SH-R-438) those inmates who were injured, and the nature and extent of their injuries
- Document the decision factors that led to the utilization of the extraction team, their methods, and the tactical equipment employed
- Ensure that extractions initiated in response to information provided by medical or mental health staff are fully documented in the “Supervisor’s Report on Use of Force” (SH-R-438) and “Watch Commander’s Extraction Checklist” (SH-J-456) as appropriate.

In situations involving anticipated extractions of inmates in multiple cells or of an entire row, the watch commander shall carefully evaluate all circumstances prior to authorizing the extraction team's deployment. Multiple inmate extractions require the notification of the unit commander~~,~~ or higher, prior to the operation (unless there is an immediate risk of loss of life or an extreme threat to institutional security).

Medical/Mental Health/Clergy Intervention

A controlled extraction shall not be accomplished without the physical presence of medical and mental health personnel. The medical and mental health staff shall be permitted to undertake good faith efforts (absent dangerous or life-threatening circumstances) to gain voluntary cooperation prior to extracting the inmate. When available, clergy staff shall be summoned to assist with the negotiations.

When tactically appropriate, the extraction team shall stand far enough back to provide a level of privacy between the inmate and mental health staff. Mental health staff shall be permitted to make good faith efforts, including talking to the inmate with privacy, whenever possible, for a clinically significant period of time, to assess the inmate's condition and reason with the inmate to avoid the necessity for use of force.

At no time shall custody staff place undue pressure on medical, mental health staff or clergy to conclude their efforts to gain the inmate’s compliance, absent dangerous or life-threatening circumstances. If attempts by medical, mental health staff, and clergy fail to elicit cooperation from the inmate, the watch commander shall continue to coordinate a best practice response through consultation with medical and mental health staff. In cases involving mentally ill inmates, the watch commander shall confer with medical and mental health staff to ensure good faith efforts have been exhausted prior to initiating a tactical response. Throughout the entire process, best efforts shall be made to videotape all negotiations between the involved inmate(s) and mental health and medical personnel.

If a medical or mental health staff member requests an extraction be conducted for medical or psychiatric purposes, and the clinician determines that the inmate's medical/mental health needs preclude any waiting or cool-down period, that individual shall personally direct the request to the watch commander, who shall be on-scene. The originating CHS staff member shall be given an opportunity to gain compliance from the inmate; they shall evaluate the need for the inmate extraction and determine if their original order is necessary. An alternate CHS staff member shall be notified if the originating individual is unavailable. Requests shall include information regarding the inmate's clinical history and condition and shall be completely documented.

Use of Chemical Agents During Inmate Extractions

After reasonable efforts to gain the inmate’s compliance have been exhausted, and no medical or mental health issues have been identified to preclude its use, chemical agents shall generally be considered as the initial tools of choice in extractions and shall, when feasible, be employed before any other weapons are used. When confronted with a passive resistive inmate and if appropriate, the use of control and restraint techniques should be considered prior to that of chemical agents. The inmate’s prior behavior and/or history of violence should be taken into consideration prior to making entry. In cases involving a mentally ill inmate, the watch commander shall seek the advice of mental health and medical personnel on the viability of utilizing chemical agents based on their assessment of the inmate’s current mental and physical condition.

Chemical agents shall not be used in extractions of inmates known to be pregnant.

Barring life-threatening or exigent circumstances, the watch commander shall ensure that prior to the

deployment of any chemical agents, medical personnel be available and prepared to provide decontamination treatment to the affected inmate(s).

In all cases where chemical agents are deployed, personnel should adhere to the guidelines recommended by the manufacturer as referenced in Departmental training. In addition, extraction teams should delay entry to give chemical agents sufficient time to gain the desired effect, but no longer than needed to gain compliance. The goal is to remove the inmate from the confined area without physical contact by extraction team members, if possible, thus reducing the risk of injury to staff and inmates. Repeated applications should not occur until there has been sufficient time for prior applications to have an effect, and additional attempts by the team leader have been made to gain his/her compliance.

Custody personnel shall consider other options if an inmate is obviously mentally disabled and cannot conform their behavior to commands or when the initial application of chemical agents has failed to gain compliance or has not shown any effect.

Best efforts shall be made to capture every application of a chemical agent during an inmate extraction on videotape. Before choosing and using a chemical agent in a particular area, the watch commander shall ensure that implementation is appropriate and will not knowingly result in air duct transfer.

Circumstances permitting, the affected inmate(s) should be provided decontamination treatment prior to placing a spit mask or other type barrier over their head. Under all circumstances, the affected inmate(s) shall be provided decontamination treatment at the earliest opportunity. Personnel shall monitor the involved inmate(s) at all times for signs of medical or mental health distress until the inmate has been fully evaluated by CHS personnel.

• 7-01/050.10 Inmate Extraction Teams

Inmate extractions are tactical operations and should only be exercised when all peaceful solutions have been exhausted.

Inmate extraction teams shall be selected by each facility Captain. Facility Captains shall consider the following qualities when selecting extraction team members:

- Maturity;
- Physical ability;
- Communication skills;
- Work history.

Additionally, Custody Training and Standards Bureau staff shall evaluate personnel during formal extraction training and provide feedback to unit commanders for extraction team selection purposes, based on personnel performance.

• 7-01/050.15 Use of Special Weapons During Inmate Extractions

The watch commander may authorize the use of any weapon as indicated in Custody Division Manual

Section 7-08/010.00 "Authorized Special Weapons." The use of direct-fire special weapons during extractions shall be used only after all other options have been unsuccessful, or are impractical, and then only under the following conditions with the watch commander's prior approval:

- 40 MM Specialty Impact Munitions (40F—"Foam Baton," 40B—"Stinger"): use of impact munitions shall be limited to situations wherein an inmate is suspected of being armed with a weapon that could be utilized to cause serious bodily injury, or when the inmate's actions clearly demonstrate the intent to engage in an assault against the extraction team or other inmate. Impact munitions shall not be used against passive resisters.
- 40 MM "eXact iMpact" Round: use of these weapons shall be limited to situations wherein an inmate is known to be armed with a deadly weapon or object that could be utilized to inflict serious bodily injury, or to overcome the inmate's use of deadly force or other assault that could result in serious bodily injury or death. Further, it shall be used only as a last resort, when no other less-lethal means, including the "Stinger" round, can reasonably be employed to neutralize the threat.
- 40 MM "Muzzle Blast" Munitions (Oleoresin Capsicum—"OC," Chlorobenzylidene Malononitrile—"CS"): may be used for delivery of chemical agents during an inmate extraction as defined by Custody Division Manual 7-01/050.05 "Inmate Extraction Procedures."

The use of 40 MM munitions ("Foam Baton," "Stinger," "eXact iMpact," and "Muzzle Blast" rounds) shall not be used against an inmate or group of inmates as merely a diversionary tactic.

Strict control shall be maintained with the ultimate responsibility for the use of these weapons resting with the unit commander. Within this responsibility, the unit commander must ensure that watch commanders are cognizant of all Departmental orders and regulations pertaining to their use, and that the manufacturer's guidelines are followed.

• 7-02/000.00 Planned Use of Force for Inmates with Special Needs

If a situation arises involving inmates with known or suspected special needs (i.e. medical, mental health, or physically disabled), when time and circumstances permit, the appropriate medical or mental health personnel shall be requested to respond to the location in an attempt to resolve the situation without force.

In situations where chemical agents have been applied, custody personnel shall consider other options if an inmate is obviously mentally disabled and cannot conform their behavior to commands or when the initial application of chemical agents has failed to gain compliance or shown any effect.

• 7-02/010.00 Pregnant Inmates

For the purposes of this section, "inmate" means an adult or juvenile who is incarcerated in any station jail, court lock-up, or custody facility.

In accordance with CDM section 5-01/030.05, “Identification and Classification Symbols for Pregnant Inmates,” and for the purposes of this section, “pregnant inmate” means an inmate that is known to the

Department to be pregnant. Inmates known to be pregnant will wear an orange wristband loop along with the K-8 sub-classification code displayed on the wristband. Their uniform consists of a dual-color shirt with a light blue front side and a white back side, and white pants.

Pursuant to California Penal Code sections 3407, 3408(l), 3408(h), 4023.8(h), and Title 15, section 1058.5, the following shall be adhered to.

USE OF FORCE INVOLVING PREGNANT INMATES

- Absent circumstances that justify the use of deadly force, special weapons, electronic immobilization devices (TASERs), and chemical agents, including aerosol chemical agents, shall not be used against an inmate known to be pregnant.
- In addition, personnel shall not intentionally expose an inmate known to be pregnant to chemical agents. Absent exigent circumstances requiring immediate use of chemical agents, personnel shall request of pregnant inmates they vacate areas where unintentional exposure to the chemical agents may be reasonably foreseeable and assist them to a designated secure location. Any refusal by a pregnant inmate to vacate shall be video recorded by a supervisor with the rank of sergeant or higher, and medical personnel shall be summoned to the location.

USE OF RESTRAINTS ON PREGNANT INMATES

- Inmates known to be pregnant shall not be placed in the safety chair or WRAP restraint.
- Inmates known to be pregnant shall not handcuffed to the rear during transportation in the WRAP CART.
- Waist chains shall not be used to restrain a pregnant inmate around the waist, but may be utilized, as a single-wrist restraint or in conjunction with handcuffs, to extend a restrained pregnant inmate’s freedom of movement.
- All pregnant inmates shall only be handcuffed individually and with their hands in front of their bodies. Pregnant inmates shall not be handcuffed to other inmates at any time.
- A pregnant inmate in labor, during delivery, or in recovery after delivery, shall not be restrained by the waist, wrists, or ankles unless the inmate poses an immediate threat of great bodily injury or death to herself, her fetus, or others. Custody personnel shall, when feasible, obtain permission from their respective watch commander before applying restraints to a pregnant inmate in labor. If the inmate has been transported to Los Angeles County + USC Medical Center (LCMC), approval may be obtained from the LCMC watch commander. Any use of force investigation shall be completed and reviewed by the transporting custody facility.
- A "RIPP Hobble Restraint" or other leg restraint devices, other than leg irons, may only be used on a pregnant inmate if the inmate poses an immediate threat of great bodily injury or death to herself, her fetus, or others. The restraint devices should be used with caution and in the presence of a supervisor when possible. Leg restraint devices should only be used when the pregnant inmate is laying, seated, or being transported on a gurney. A pregnant inmate shall never be asked to walk after a leg restraint or "RIPP Hobble Restraint" has been applied. The restraint shall be applied for the least amount of time practical. Application of leg restraint devices shall be followed immediately by a medical assessment.
- Restraints shall be removed when a medical professional, who is currently responsible for the medical care of a pregnant inmate during a medical emergency, labor, delivery, or recovery after delivery, determines ~~that~~ the removal of restraints is medically necessary.
- The length of the recovery after delivery will be determined on a case-by-case basis by the medical professional who is currently responsible for the medical care of the inmate.

- This section shall not be interpreted to require restraints in a case where restraints are not required pursuant to a statute, regulation, or correctional facility policy.

As soon as practically possible, the facility watch commander shall be notified any time a pregnant inmate has been restrained during labor. The details of the incident shall be documented in a Chief's Memorandum and include:

- Reason for the restraints.
- Reason which summoned the inmate's need for medical attention.
- Measures taken to deescalate the situation.
- Force used (if any) and the number of deputies involved to put the inmate in restraints.
- Description of when a supervisor was notified and the actions taken by the supervisor.
- Amount of time the inmate remained in restraints.

MEDICALLY ORDERED RESTRAINT DEVICES

Medically ordered restraint devices shall only be used on pregnant inmates or inmates suspected of being pregnant at the direction of medical and/or mental health personnel. A nurse, psychiatrist, or physician shall be present for the placement of the medically ordered restraint devices.

Medical personnel shall assess the inmate's condition and position~~,~~ once the restraints have been applied.

INTAKE AND HOUSING PROCEDURES FOR INMATES WHO ARE PREGNANT OR SUSPECTED TO BE PREGNANT

Upon arrival at a custody housing facility, female inmates shall be screened by medical personnel, and if requested, provided a pregnancy examination. Inmates who are deemed by medical staff to be pregnant shall receive the following considerations:

- Medical staff shall have all confirmed pregnant inmates sign "Pregnant Inmate Acknowledgement Form" (SH-J-451). A copy of the form shall be provided to the inmate and the original copy shall be kept in the inmate's medical record.
- All confirmed pregnant inmates shall be classified in accordance with Custody Division Manual (CDM) section 5-01/030.00, "Identification and Classification Symbols for Special Handling Inmates," and CDM section 5-01/030.05, "Identification and Classification for Pregnant Inmates."
- A balanced, nutritious diet approved by a doctor.
- Prenatal and postpartum information and healthcare, including, but not limited to, access to necessary vitamins as recommended by a doctor (CHS policy section M203.03 outlines medical screening time intervals).
- Information pertaining to childbirth education and infant care.
- Indicated dental care;
- Advisement, orally or in writing, of the standards and policies governing pregnant inmates, including, but not limited to, the provisions of this policy, any relevant regulations, and Penal Code section 3407.

Custody staff shall collaborate with medical and/or mental health staff to ensure inmates who are pregnant, post-partum, had a miscarriage or terminated pregnancy are placed in an appropriate housing location that is conducive to their access to necessary prenatal/medical care.

• 7-02/020.00 Handling Insubordinate, Recalcitrant, Hostile, or Aggressive Inmates

The following procedures are to be used in conjunction with all current use of force policies as well as all other applicable policies, procedures, and guidelines. Department members shall take necessary and reasonable actions to defend themselves and control the inmate(s) when confronted with an immediate threat to their safety, the safety of other personnel, or the safety of other inmates.

An insubordinate or recalcitrant inmate shall be defined as any inmate who displays any of the following characteristics:

- Is continually verbally defiant
- Is uncooperative to verbal commands given by personnel
- Displays aggressive, assaultive, hostile, or violent behavior toward personnel or other inmates
- Passively resists the efforts of personnel by ignoring commands or not acknowledging their presence

Personnel encountering an insubordinate or recalcitrant inmate shall be guided by the following:

- Except when there is an imminent threat of physical harm or the need for immediate intervention, personnel shall request the presence of appropriate back-up and a sergeant or supervising line deputy, prior to handling any recalcitrant inmate
- In the instance of an immediate threat of physical harm or the need for immediate intervention, including inmate-on-inmate violence, custody personnel shall take appropriate action, which may include the use of force
- Personnel should not make an attempt to enter a cell, dayroom, holding area or confined space to contact or remove an uncooperative, aggressive, hostile or armed inmate unless an immediate threat of physical harm is present. A sergeant shall develop a planned tactical approach to the situation that will reduce the possibility of physical confrontation or injuries
- When confronting an inmate with a weapon, or an object being used as a weapon, custody personnel should make an effort to maintain distance and avoid any force that would subject personnel to come into physical contact with the inmate unless the safety of an inmate or staff member is in jeopardy or other factors dictate immediate action
- When the inmate is, or appears to be mentally ill, personnel shall request a sergeant and a mental health professional to respond unless there is an immediate threat of physical harm
- Should the need arise to confront and/or handcuff a recalcitrant, hostile or aggressive inmate, they shall be searched and kept in normal traffic areas and not be taken to secluded areas (e.g. cells, recreation yards, dayrooms, or laundry rooms), without the direction of a supervisor
- Inmates who continue to be uncooperative and/or combative shall be escorted by a sergeant and two custodial personnel, to include at least one deputy. The movement shall be video recorded in order to safeguard personnel against potential future litigation

- Personnel involved in an incident/altercation with an insubordinate, recalcitrant, uncooperative, or combative inmate shall not be part of the escorting team

• 7-02/025.00 Reporting Prevented Uses of Force

A prevented use of force occurs any time personnel are able to employ effective de-escalation techniques in order to gain compliance from inmates deemed recalcitrant or who are the subject of an inmate extraction or other planned use of force. If custody personnel have successfully de-escalated an incident, they shall, at the direction of a supervisor, document the incident on the Prevented Use of Force Notification Form (SH-J-634) and submit the completed form to the on-scene supervisor. The supervisor shall verify the form and may enter it into the electronic Use of Force Tracking system, if feasible, or submit it to the facility's operations office, where it shall be entered into the electronic Use of Force Tracking system by designated personnel.

• 7-02/030.00 Jail Mental Health Evaluation Team (JMET)

Jail Mental Health Evaluation Team (JMET) is a team of mental health professionals and deputies who address the mental health needs of general population inmates within the custody of the Los Angeles County Sheriff's Department. The primary responsibility of JMET is to locate inmates who may be in need of mental health intervention. JMET personnel also conduct follow up of inmates housed in general population who may be at risk for decompensation.

All inmates in the general population shall have access to mental health services. Custody personnel or Correctional Health Services (CHS) personnel may request evaluations. During routine working hours access to mental health services for general population inmates will be coordinated by JMET personnel.

JMET is comprised of three teams. All teams are available during AM and PM shift hours, daily. Deputies assigned to JMET may work individually or with DMH personnel (clinician or psychiatrist). The teams are responsible for each facility as follows:

- NORTH - every facility within the Pitchess Detention Center
- SOUTH - Twin Towers Correctional Facility (TTCF) and Men's Central Jail
- CRDF - Century Regional Detention Facility

Command and Control

Sworn members of the JMET are based at the Custody Compliance and Sustainability Bureau (CCSB), and work under the command of the CCSB captain. JMET personnel report to the CCSB JMET sergeant.

In addition to required notifications to facility supervisors, JMET personnel shall contact a JMET sergeant after significant incidents including use of force by or injury to JMET personnel.

JMET Duties

JMET personnel shall make weekly cell-by-cell rounds in all restricted non-mental health housing modules (e.g., administrative segregation, discipline) in an attempt to locate inmates with mental health needs who

were not identified during screening or who have decompensated.

JMET shall be notified of inmates transferred to discipline housing from non-mental health housing whose movement history indicates prior housing in a High Observation Housing (HOH) module. JMET personnel shall conduct an assessment of the mental health status of these inmates when conducting their cell-by-cell rounds. Refer to Custody Division Manual (CDM) section 5-09/080.00, "Location of Discipline."

In conducting the rounds, either the JMET clinician, JMET deputy, or the inmate may request an out-of-cell interview. This request will be granted unless there is a clear and articulable security concern that would prohibit such an interview.

Reclassification of K-10 Inmates

In the event an inmate reclassified from [REDACTED TEXT] status is involved in a force incident while being rehoused, the floor sergeant shall contact JMET. Any such inmate must be interviewed by JMET personnel in order to determine if a referral to a clinician is appropriate.

The jail liaison shall contact JMET in the event an inmate is involved in an incident requiring the inmate be evaluated for reclassification as a [REDACTED TEXT] within five days of previously being removed from [REDACTED TEXT] housing. Any such inmate must be interviewed by JMET personnel after being re-housed in order to determine if a referral to a clinician is appropriate.

Crisis Situations

During normal working hours, in the absence of, or in addition to, appropriate medical and mental health care, JMET shall be available to watch commanders to respond to crisis and/or tactical situations. Watch commanders may consider the use of JMET in situations including, but not limited to:

- Barricade situations
- Suicidal ideation
- Exhibition of bizarre behavior
- Hunger strike
- Threatening others

In these circumstances, JMET may act as consultants, or may be used to communicate with the inmate in an effort to defuse a situation.

JMET Referrals

When personnel encounter an inmate who exhibits a need for non-urgent mental health care, or may need the non-urgent attention of a mental health clinician, JMET shall be notified via referral. Personnel at each facility shall submit a "JMET Referral Request" through the electronic Uniform Daily Activity Log (e-UDAL), which sends the request via e-mail addressed to JMET personnel. Custody personnel shall document referrals before the end of their shift. Upon receiving a "JMET Referral Request," JMET personnel shall review the referrals and interview the inmates to assess their mental health needs.

If an inmate exhibits urgent or emergent behavior, custody personnel shall take emergent action. Custody

personnel shall utilize the Behavior Observation and Mental Health Referral (BOMHR) form (SH-J-407). Refer to CDM section 4-05/000.00, Behavioral Observation and Mental Health Referral Reports.

Correctional Health Services

JMET referrals should be brought to the originating facility's clinic for evaluation prior to transfer to a new facility for housing, unless otherwise indicated on a BOMHR form. Correctional Health Services (CHS) personnel will prioritize these referrals. These inmates shall be medically assessed to determine if they are appropriate for transfer to mental health housing at TTCF or CRDF. A clinician shall recommend the appropriate housing location at TTCF or CRDF based on their initial assessment of the inmate. The watch commander, in conjunction with CHS personnel, shall make the final determination for immediate or routine transportation of the inmate. Alternate transportation shall be arranged if the inmate's condition decompensates or warrants any urgency as determined by JMET.

It is the intent of this policy that inmates referred to mental health housing by JMET receive a medical assessment prior to their transport to TTCF or CRDF, unless otherwise indicated on a BOMHR form. However, no inmate shall be unduly delayed in this process. If the watch commander of the originating facility determines that a medical evaluation will cause an unnecessary delay in the movement of the inmate, the watch commander may authorize the immediate transport of the inmate to the IRC or CRDF main clinic, where a medical assessment shall occur. The name of the watch commander giving the authorization shall be noted on the BOMHR form.

For non-urgent mental health referrals, the medical section of the original BOMHR form shall be completed and identified as a JMET referral. The words "JMET Referral" shall be stamped or handwritten across the top with the recommended housing location clearly visible in the upper right hand corner.

Transporting Deputy

Transportation of the inmate to TTCF or CRDF mental health housing shall be provided by the facility from which the inmate is being transported. Refer to CDM 4-05/000.00, "Behavioral Observation and Mental Health Referral Reports."

Confidentiality

JMET personnel shall maintain the confidentiality of all JMET referrals pursuant to law. Additionally, all JMET members shall have a signed Oath of Confidentiality on file at CCSB. This oath mandates that an inmate's mental health history as well as current information obtained from a JMET contact is considered confidential.

• 7-03/000.00 General Principles of Security Restraints and Handcuffing Inmates

The general principles governing the use of restraints are as follows:

- Restraints are either security restraints or medically ordered restraints
- Restraints shall not be used to punish inmates
- Restraint devices shall only be used when there is a potential threat of physical harm, destruction of

property, escape, or to escort or transport inmates

- Caution shall be used to guard against the risk of medical distress
- Restraints shall never be placed on the head, nose, or neck of an inmate or in any other manner that may interfere with breathing or blood flow
- In-cell security restraints shall not be used except in emergency circumstances and for the shortest period of time necessary
- Inmates shall not be restrained to fixed objects unless the object is designed or is commonly used for that purpose, and only used for the shortest period of time necessary
- It is the responsibility of Department members approving or applying restraints (other than restraints used to escort or transport inmates) to ensure that there is frequent, detailed, and documented monitoring of the condition of the inmate(s) in restraints (refer to CDM section 7-03/000.10 "Security Restraints and Separation/Isolation of Inmates")
- The longer the restraints are applied, the greater the risk of medical distress; therefore, medical assistance shall be summoned immediately whenever an inmate appears to be experiencing medical distress or complains of difficulty breathing
- Carotid restraints are prohibited unless the inmate's conduct is high risk assaultive or creates a risk of serious bodily injury to personnel, themselves, or others

Department members shall avoid, to the extent possible under the circumstances, placing their weight on an inmate’s back or shoulders in a way that impairs the inmate's breathing. Once an inmate is controlled, they should be placed in a recovery position (on their side, to allow the mouth to drain, and with limbs bent to prevent the inmate from rolling onto their stomach) or in a seated position to minimize breathing problems and the risk of medical distress. If practical, inmates placed on a gurney or stretcher should be placed in the recovery position.

HANDCUFFING INMATES

Custody Operations personnel shall handcuff inmates only when it is reasonable, necessary, and in conformance with Manual of Policy and Procedures (MPP) sections 3-01/110.23, "Handcuffing Prisoners" and 3-03/240.00, "Handcuffs and Cases."

It is considered advisable to use handcuffs when:

- Transporting an inmate in public or from one facility to another
- An inmate is violent or gives an indication of belligerence. Custody personnel shall act in accordance with CDM section 7-02/020.00, "Handling Insubordinate, Recalcitrant, Hostile, or Aggressive Inmates" when confronted by an inmate(s) acting in this manner
- An inmate may cause injury to himself or others.

When handcuffs are used:

- The handcuffs shall be of a type specified by the Department
- Inmates shall be handcuffed with hands behind their backs when feasible, with the exception of pregnant inmates
- Pregnant inmates shall only be restrained with handcuffs in accordance with Penal Code section 3407 and CDM section 7-02/010.00, "Pregnant Inmates"

- A female inmate shall not be cuffed to a male inmate except in an emergency. Once the emergency no longer exists, the female and male inmate will no longer be handcuffed together
- Handcuffs shall be double locked. If a situation exists whereby double locking cannot be reasonably accomplished, the handcuffs will be double locked after the situation no longer exists.

• 7-03/000.05 Fixed Restraints

Fixed restraints are the application of any handcuffs, shackles or transportation chain permanently or temporarily affixed to an immovable object (e.g. tables, chairs, benches, stools, rail, ring or bolt, etc.), which are designed to limit the movement of an inmate within a custodial environment. The utilization of fixed restraints is a security tactic intended to provide additional safety for all inmates and staff. The use of fixed restraints outside of a custody facility (e.g., hospitals or a dialysis clinic), shall be governed by Custody Division Manual (CDM) section 5-03/100.00, "Inmate Detention at Hospitals."

Fixed restraints shall never be used as a form of punishment and shall only be used in the least restrictive means and for the shortest period of time necessary to provide safety.

Inmates in fixed restraints shall be placed in a location in direct and unobstructed visual observation of custody personnel. Inmates shall not be placed in fixed restraints in an area that jeopardizes the safety and security of the inmate or custody personnel. Custody personnel shall refer to CDM section 7-03/000.10, "Security Restraints and Separation/Isolation of Inmates" for procedures regarding inmates who are placed in areas with an obstructed view or the separation and/or isolation of an inmate.

When possible, the application of fixed restraints should occur in areas where fixed video surveillance (CCTV) is available. Where CCTV is unavailable, a video camera shall be used to document fixed restraint protocols once an inmate is restrained in excess of three (3) hours.

When any inmate is placed in fixed restraints, the supervising sergeant for that location shall be notified promptly and provided with the location and the reason the inmate was placed in fixed restraints. If the inmate appears to be in a mental health crisis, custody staff will immediately refer the inmate to Correctional Health Services (CHS) mental health personnel.

As soon as practicable, but no later than fifteen (15) minutes after the application of the fixed restraint, Department personnel shall initiate documentation of the inmate's monitoring in the Fixed Restraint Log (SH-J-475). At least once every fifteen (15) minutes and until the inmate is removed from the fixed restraint, personnel shall conduct and document a safety check of the inmate, during which they shall verify that the restraint is not causing undue pain, injury, or an obvious medical problem.

In addition, the name of the sergeant who approved the fixed restraints, the reason(s) for the application, the time the fixed restraints were applied, and all activities (e.g. restroom breaks, meals, medical or psychological evaluations, clergy visits, etc.) and times the inmate participated in each activity shall be documented in the housing location's (or nearest location) electronic or paper version of the electronic Uniform Daily Activity Log (e-UDAL/UDAL).

The responsible sergeant shall evaluate the application of fixed restraints and approve their continued use, if

reasonable. At least once every hour, a sergeant shall conduct an inmate safety check of all inmates in fixed restraints in areas under their supervision. During this check, the sergeant shall reassess whether or not each inmate needs to remain in fixed restraints and ensure each inmate has been provided access to toilet facilities and drinking water. If regularly scheduled meals are being served, they shall be offered to the inmate in conjunction with this hourly check. After four (4) hours, the watch commander shall be notified and respond to the location of the inmate(s) to evaluate the application of fixed restraints and approve their continued use. The watch commander shall conduct an inmate safety check, similar to that of the sergeant, at least once every four (4) hours.

The responsible sergeant shall ensure a medical evaluation is conducted by medical personnel at least once every two (2) hours. Any refusals for medical evaluation shall be made by the inmate directly to medical personnel. The refusal shall be documented by the sergeant in the e-UDAL and by medical personnel in the inmate's EMR (Electronic Medical Record).

Unless the inmate is recalcitrant and the transfer of restraints cannot be accomplished safely, fixed restraints shall be alternated once an hour from one arm/leg to the other, so not to affect the inmate's range of motion. If the hourly fixed restraint alternation is not accomplished, the responsible sergeant shall be notified.

When an inmate in fixed restraints becomes recalcitrant, a sergeant shall be notified immediately. The sergeant shall respond to the location and handle the inmate as described in CDM section 7-02/020.00, "Handling Insubordinate, Recalcitrant, Hostile, or Aggressive Inmates." Custody personnel shall not remove fixed restraints from a recalcitrant inmate except at the direction of a supervisor of the rank of sergeant (or higher).

Exceptions to the procedures outlined may be made when fixed restraints are utilized during routine procedures (e.g., IRC clinic and inmate visiting), when used in conjunction with security treatment chairs for the purposes of out-of-cell programming for highly dangerous inmates, when used in High Observation Housing (HOH) or Moderate Observation Housing (MOH) areas, or for inmates awaiting housing in the Correctional Treatment Center (CTC). These exceptions must be clearly outlined in the facility's unit order. Refer also to CDM section, 7-03/000.15, "Security Restraints in Mental Health Housing."

If an inmate remains in fixed restraints in excess of six (6) hours, notification and consultation shall be made with the facility's unit commander and documented in the Watch Commander's Log.

If an inmate remains in fixed restraints in excess of eight (8) hours, notification and consultation shall be made with the facility's commander and documented in the Watch Commander's Log.

Unless determined to be part of a use of force package, completed copies of the Fixed Restraint Log shall be submitted to the respective facility operations staff, who shall ensure the forms are retained in accordance with CDM section 4-13/000.00, "Retention of Records," and are available for subsequent review and/or audits as appropriate.

• 7-03/000.10 Security Restraints and Separation/Isolation of Inmates

For the purposes of this policy, a "security restraint" includes handcuffs, waist chains, Safety Chairs, and/or fixed restraints. Temporary separation and/or isolation includes any area that is not in unobstructed visual observation of custody personnel. Unobstructed visual observation means continuous but not necessarily uninterrupted observation within a reasonable physical distance of the inmate(s). While maintaining unobstructed visual observation, custody personnel are permitted to perform other routine tasks if the at-risk inmate(s) remain in view with clear sight lines.

In the event an inmate is placed in security restraints while temporarily separated and/or isolated, or refuses to have security restraints removed while temporarily separated and/or isolated, the procedures and notifications outlined in CDM section 7-03/000.05 "Fixed Restraints" shall be followed in addition to the following:

- The inmate shall not be placed in a cell or isolated area with any other inmates who are not in security restraints
- If the sergeant determines that the behavior of the inmate dictates that they shall remain in security restraints or if the inmate refused to have the security restraints removed, the handling sergeant shall direct custody personnel to conduct inmate safety checks every fifteen (15) minutes. The safety checks shall be documented with the handheld Title 15 barcode scanners. If the Title 15 scanner is not operational or if the area/cell being checked does not contain a bar code, a manual entry stating that an inmate safety check has been completed and the time the handcuffs or waist chain were placed on the inmate shall be documented in the "Additional Information" section of the electronic Uniform Daily Activity Log (e-UDAL)
- The sergeant shall notify the watch commander at the completion of their initial assessment of the inmate
- Custody personnel conducting the inmate safety checks every fifteen (15) minutes shall look at the inmate to determine if the inmate is in any type of physical distress (e.g. not breathing, skin discoloration, abrasions or bleeding around any area where the restraints were applied, or any other symptom which would require medical assistance). If the inmate appears to be in medical distress, custody personnel shall summon medical personnel immediately
- An inmate who is restrained and temporarily isolated shall be provided the opportunity to use toilet facilities, consume scheduled meals, and be given access to drinking water. The sergeant shall be present if the security restraints are removed for the purposes of providing the inmate with access to toilet facilities, drinking water, or regularly scheduled meals. The sergeant shall document these actions in the housing location's e-UDAL
- If the sergeant determines that due to the inmate's behavior, the continued use of security restraints is necessary, the sergeant shall continue to evaluate the inmate at least once every hour. The sergeant shall document these evaluations in the housing location's UDAL
- If the sergeant determines the security restraints are no longer necessary or the inmate complies with the removal of the security restraints, the sergeant shall order the removal of the restraints in their presence. The time the security restraints were removed and the reason(s) why they were removed shall be documented in the housing location's e-UDAL
- If the inmate remains in security restraints for a period of more than one (1) hour from the initial notification to the watch commander, and the sergeant has determined that the security restraints should not be removed, the sergeant shall consult with the watch commander. The watch commander shall personally evaluate the behavior of the inmate and determine the next course of action

- The watch commander should consider implementing the inmate extraction procedures for inmates who continue to refuse to have security restraints removed after one (1) hour of being temporarily separated/isolated (refer to CDM section 7-01/050.05 "Inmate Extraction Procedures")
- If the watch commander determines that the security restraints should not be removed, the watch commander shall ensure that the following inmate safety checks are completed by the following personnel:

Custody personnel	Once per 15 minutes
Sergeant	Once per hour
Watch commander	Once per four (4) hours

- Supervisors conducting these checks shall continue to reassess the need for the inmate to remain handcuffed or waist chained and ensure they are provided the opportunity to use toilet facilities, consume scheduled meals, and given access to drinking water. All supervisory inmate safety checks shall be documented with a portable video camera. For use of a portable video camera and retention period of recordings, refer to CDM section 7-06/010.00 "Video Recording Procedures."
- The responsible sergeant shall ensure that a medical evaluation is conducted by medical personnel at least once every two (2) hours. Any refusals for medical evaluation shall be made by the inmate directly to medical personnel. The refusal shall be documented by the sergeant in the e-UDAL and by medical personnel in the inmate's EMR (Electronic Medical Record)

If an inmate remains in security restraints while being separated/isolated, in excess of six (6) hours, notification and consultation shall be made with the facility's unit commander and documented in the Watch Commander's Log.

If an inmate remains in security restraints while being separated/isolated, in excess of eight (8) hours, notification and consultation shall be made with the facility's commander and documented in the Watch Commander's Log.

• 7-03/000.15 Security Restraints in Mental Health Housing

Security Restraints in High Observation Housing (HOH), Moderate Observation Housing (MOH), and for inmates awaiting housing assignment in the Correctional Treatment Center (CTC), will not be used as an alternative to mental health treatment and will be used only when necessary to ensure safety. Security restraints will not be used to punish inmates. Custody personnel assigned to HOH and MOH will consider a range of security restraint devices and utilize the least restrictive option, for the least amount of time necessary to provide safety in these areas. When fixed restraints are used in HOH, MOH, or for inmates awaiting placement in CTC, custody personnel will maintain unobstructed visual observation of the inmate. Unobstructed visual observation means continuous but not necessarily uninterrupted observation within a reasonable physical distance of the inmate(s). While maintaining unobstructed visual observation, custody personnel are permitted to perform other routine tasks if the at-risk inmate(s) remain in view with clear sight lines.

When an HOH or MOH inmate in security restraints becomes recalcitrant, a sergeant shall be notified immediately. The sergeant shall respond to the location and handle the inmate as described in Custody Division Manual (CDM) section 7-02/020.00 "Handling Insubordinate, Recalcitrant, Hostile, or Aggressive Inmates." Custody personnel shall not remove fixed restraints from a recalcitrant inmate except at the direction of a supervisor of the rank of sergeant (or higher). If the inmate appears to be in mental health crisis, custody staff will immediately refer the inmate to Department of Mental Health (DMH) personnel.

• 7-03/010.00 Waist Chain Procedures

Certain inmates within custody facilities require an increased level of security during movement in order to provide for the safety of the concerned inmate, other inmates, and custody personnel. In cases where additional control measures are required, inmates may be placed into single-person waist chain restraints.

Waist chain restraints include, but are not limited to, the following:

- Single-person waist chain;
- Four-person Court Services Transportation (CST) type handcuff chain systems;
- "Three cuff" handcuff chain systems;
- High security "handcuff cover" restraint systems.

Four-person CST type handcuff chain systems chain together multiple inmates in individual waist chain restraints. The "three cuff" handcuff chain systems are routinely used for the transportation of inmates that require an additional level of security. This includes internal facility movement as well as transportation to and from courts or other custody facilities.

Note: the multi-person "cable chain" system shall not be used as a single-person chaining system.

When using single-person waist chain restraint systems, the following shall apply:

- Personnel shall not apply handcuff cover restraint systems unless they have received the appropriate training;
- Waist chains shall only be applied in a manner consistent with Department-approved policy and training;
- The need to use any type of single-person waist chain restraint system shall be the decision of the handling personnel;
- Use of single-person waist chain restraint systems shall be based upon articulable facts justifying the need for additional security;
- Inmates restrained in single-man waist chain systems shall not be left unattended with any inmate not similarly restrained;

- In the event that an inmate is secured to a fixed object, custody personnel shall follow procedures as outlined in Custody Division Manual (CDM) section 7-03/000.05, "Fixed Restraints and Handcuffing Inmates"
- Single-person waist chain restraint system shall not be used as a disciplinary device under any circumstances;
- If the inmate appears to be in mental health crisis, custody staff will immediately refer the inmate to Jail Mental Health (JMH) personnel;
- All Department use of force and reporting policies apply.

MENTAL HEALTH HOUSING

Security Restraints in High Observation Housing (HOH) and Moderate Observation Housing (MOH) will not be used as an alternative to mental health treatment and will be used only when necessary to ensure safety. Personnel assigned to HOH and MOH will consider a range of security restraint devices and utilize the least restrictive option, for the least amount of time, necessary to provide safety in these areas.

[REDACTED TEXT]

In addition to previously stated guidelines, the following shall apply to the use of handcuff cover restraint systems:

- **Whenever possible, handcuff cover restraint systems shall be applied via the food tray slot while the inmate is secured inside the cell;**
- **The leg chain shall be applied prior to transportation;**
- **Handcuff cover restraint systems shall remain on the inmate from the time they leave the housing location, until they return or arrive at their new housing location, unless exigent circumstances exist, or personnel receive prior authorization to remove the handcuff cover system from personnel of the rank of supervising line deputy or above;**
- **Use of a handcuff cover restraint system does not eliminate Title 15 requirements. Inmates must be given reasonable opportunities to use toilet facilities, and provisions must be made for the consumption of meals.**

INVENTORY OF WAIST CHAIN RESTRAINTS

Unit commanders shall develop orders regarding the control of waist chain restraint inventories. This inventorying shall include daily counts in the electronic Uniform Daily Activity Log (e-UDAL).Unit commanders shall determine the number of each device necessary for facility operations, and are responsible for replacing missing or damaged items. All devices shall be marked to indicate unit of origin (i.e. CST, Inmate Reception Center [IRC], Men's Central Jail [MCJ], etc.). Unit commanders shall ensure, through constant inspection, waist chain restraint devices belonging to other units are returned as expeditiously as possible to maintain inventories at all units.

Annual command inspections shall include audits of waist chain restraint inventories and maintenance.

CLEANING AND MAINTENANCE INSPECTIONS OF WAIST CHAINS

Each unit commander shall develop unit orders regarding the cleaning, inspection, and sterilization of waist chains and restraint devices at the end of each shift. Inspections are required daily and weekly to ensure operability, maintenance, and cleanliness.

Required cleaning shall be conducted using an approved anti-bacterial solution which states it kills multiple pathogens, including methicillin resistant staphylococcus aureus (MRSA), for affectability.

The unit order shall ensure that the cleaning/sterilization and inspection of waist chains and restraint devices are documented in an approved log and maintained for a minimum of two (2) years per CDM 4-13/000.00 "Retention of Records."

• 7-03/030.00 Medically Ordered Restraint Devices

The use of medically ordered restraint devices shall be determined by medical or mental health staff. Medically ordered restraint devices shall only be used on inmates who pose a serious threat to themselves or others or the use is necessary to provide medical care as determined by medical staff. Under no circumstances should custody personnel request that medical staff medicate an inmate for security purposes. Medically ordered restraint devices are used to immobilize an inmate’s extremities and prevent them from being ambulatory. Restraint devices shall not be used under any circumstances as punishment. Caution shall be exercised when using restraint devices, to guard against the risk of any medical distress or asphyxia. The longer the procedure or device is used the greater the risk for an adverse outcome, including asphyxia. A mental health professional shall be present to document and monitor the condition of the inmate being placed under medical restraints. Refer to Correctional Treatment Center (CTC) policy and Procedure Manual, Mental Health Unit 2-1f, "Restraint and or Seclusion."

This section does not apply to the use of handcuffs, shackles, fixed restraints, safety chairs, or other restraint devices when used to restrain inmates for security reasons pursuant to Title 15, Minimum Standards for Local Detention Facilities, section 1058 “Use of Restraint Devices.” Refer to Custody Division Manual (CDM) section 7-03/040.00 “Safety Chair” for policy and procedures pertaining to the safety chair.

Examples of medically ordered restraint devices include, but are not limited to:

- 3 and 4 point restraint systems
- Soft ties
- Padded belts
- Restraint boards

Prior to force being directed by any Department supervisor in the application of a restraint device, all reasonable and appropriate alternatives shall be considered in an effort to solicit cooperation. This may include counseling the inmate regarding the need for restraints. If in the course of applying restraints, any resistance is encountered, the use of force shall be reasonable and reported pursuant to Manual of Policy and Procedures (MPP) section 3-10/100.00, “Use of Force Reporting Procedures.”

Only restraints specifically manufactured for the purpose of safely restraining persons shall be used as medically ordered restraint devices. Restraint devices shall not be modified from their original specifications unless done so by the manufacturer. All restraint devices shall have the prior approval of the respective Custody Services Division chief.

Only trained personnel shall be authorized to perform or assist in the placement or removal of restraint devices. The concerned facility's training unit shall maintain a record of custody personnel trained in the use of each restraint device. The entire restraint procedure shall be video recorded and a sergeant trained in the use of restraints shall be present during the entire restraint procedure.

Any incident requiring the use of restraints shall be recorded in the Watch Commander's Log. The watch commander shall provide a memorandum to the unit commander which shall include the following information:

- Location, date and time of occurrence
- Inmate's name and booking number
- Personnel involved
- Reason for the use of the restraint device
- Condition of the inmate before and after release from the restraint device
- Name of the medical or mental health provider ordering restraints and the reason
- Name of the mental health clinician or psychiatric nurse who was present to document and monitor the condition of the inmate during the application of medical restraints
- The area where the inmate was housed prior to being placed into restraints
- The classification of the inmate (mentally ill, homosexual, general population, etc.)
- Any other significant information related to the inmate's health
- How long the inmate was in the restraint device

The video recording and all appropriate paper work shall be maintained at the concerned facility for four (4) years. If the inmate is injured as a result of applying the restraints, or if there is a significant risk management factor or a lawsuit is filed, all documentation shall be maintained for ten years.

Restraining Pregnant Inmates

If a pregnant inmate requires restraints, restraints shall only be applied in accordance with CDM section 7-02/010.00, "Pregnant Inmates."

Multi-point Restraints

The use of multi-point restraints is a medical procedure and their use shall only be authorized by Correctional Health Services (CHS), or with the approval of a Department of Mental Health (DMH) licensed psychiatrist who has performed an individualized assessment and an appropriate Forensic Inpatient order. Medical restraints shall only be used in the CTC. Whenever an inmate is placed into such restraints, CHS personnel and a Department supervisor, at the permanent rank of sergeant or above, shall be present. Additionally, custody personnel shall notify a DMH professional to be present to document and monitor the condition of the inmate being placed in medical restraints. The supervisor shall monitor the movement of the inmate from their housing location to the designated area for application of restraints, and remain while the restraints are being applied. Movement of the inmate to CTC shall not be unnecessarily delayed. Refer to

CTC Policy and Procedure Manual, Mental Health Unit 2-1f.

Immediately upon application of multi-point restraints, medical staff shall evaluate the inmate. If the medical evaluation indicates that restraints place the inmate's health at risk, the restraints shall be removed. Immediate removal of restraints without the direction of medical personnel may also occur in emergencies including, but not limited to:

- Emergency evacuations (e.g., fire, earthquake, etc.)
- Cessation of breathing,
- Cardiac arrest

Any inmate who is subjected to a multi-point restraint (or who is otherwise restrained in a supine position for an extended period of time) shall be observed continuously so that if the inmate is on his or her back, the inmate does not vomit and asphyxiate, and if on his or her stomach, does not stop breathing because of his or her body weight compressing the chest. CHS personnel shall be called to the scene at the first sign of such distress.

Multi-point restraints may only be used until determined by a medical or mental health provider that the restraints are no longer indicated. The continued use of the multi-point restraint shall be assessed by medical or mental health staff at least every hour to determine if the continued use is clinically indicated.

In every exigent circumstance where restraints are removed without medical concurrence, the watch commander shall be notified immediately.

Application of Medically Ordered Restraints

Custody personnel shall assist in the placement and removal of restraints at the request of the medical or mental health staff. Application of restraints is a tactical event, which requires pre-planning on the part of the sergeant and requires strong command and control. The sergeant shall supervise and manage the custodial personnel in the application of restraints. Prior to applying medically ordered restraints, the sergeant shall review the order for restraints. If more than one (1) hour has elapsed since the order was given the sergeant shall request a reevaluation of the need for restraints, based upon the inmate's current condition. The sergeant shall then advise the inmate of the reason for the intended application of restraints and attempt to gain the inmate's cooperation with the application of the restraints. The sergeant shall ensure that sufficient personnel, trained in the application of restraints, are present, and that all assisting personnel are thoroughly briefed regarding their individual duties and responsibilities in applying the restraints. Under most circumstances at least one custodial personnel per limb shall be assigned to restrain the inmate. When the specific individual limb restraint takes place, two personnel shall be used during that portion of the procedure; one to constrain the limb, the other to apply the restraint. Deviation from this procedure may only occur under exigent circumstances.

When applying restraints, custodial personnel must be cognizant of the inmate's physical condition. Personnel must consider that preexisting medical or mental health conditions may exist. The application of pressure upon the neck, throat, chest, diaphragm, or abdomen of the inmate, or any control technique that impairs the inmates ability to breathe, shall be avoided in all but the most compelling of circumstances. The sergeant shall ensure that the inmate has unrestricted breathing during and after the application of restraints. The sergeant shall diligently monitor personnel to assure that the control techniques being used comply with this section. All personnel have a duty to terminate the procedure if it places personnel or the inmate in unreasonable risk for a

serious injury or if it causes medical distress for the inmate. If during the application of restraints, an inmate says he or she is having difficulty breathing, the application of restraints shall stop and medical staff shall immediately assess the inmate's condition.

All restraining procedures shall be videotaped, uninterrupted, including:

- Transport of the inmate to the CHS medical clinic or the infirmary
- All conversations between the sergeant and the inmate
- Placement of the restraints on the inmate
- CHS personnel's assessment of the inmate's medical condition and comfort immediately after the restraints have been applied

The un-resisted placement of an inmate into restraints does not necessarily constitute a use of reportable force. For reporting requirements and exceptions refer to CDM section 7-06/000.00, "Use of Force Reporting Procedures."

Monitoring Restrained Inmates

An inmate placed in restraints shall be housed separately from all other inmates. Custody personnel and CHS personnel are responsible for conducting and documenting safety checks of all inmates placed in restraints, consisting of a direct visual observation check to ensure that the inmate is breathing and the inmate is not in undue pain. In addition, custody and medical personnel shall ensure that the restraints are not creating injury or obvious medical problem to the inmate. Safety checks are conducted at least twice during every thirty (30) minute period approximately fifteen (15) minutes apart. DMH personnel may require additional safety checks for mentally ill inmates who are placed in restraints. Safety checks shall be documented on a safety check log.

• 7-03/040.00 Safety Chair

Unit commanders shall ensure that procedures related to the use of the Safety Chair conform to the policies of the Custody Division Manual (CDM).

The Safety Chair is intended to be used for short term security, temporary control and transportation of an inmate who has been identified as violent, self-destructive, or a high security risk. Safety Chairs shall never be used as punishment, harassment, or for the sole purpose of knowingly causing harm to an inmate. This is not a medically ordered restraint device but rather a security restraint device as noted in the California Code of Regulations, Title 15 section 1058, "Use of Restraint Devices."

Only the "Safety Restraint Chair, Inc." brand Safety Chair shall be used unless the unit commander receives the prior approval of the respective Custody Services Division chief. The Safety Chair shall not be modified from the original specifications unless done so by the manufacturer.

Only trained personnel shall be authorized to perform, assist, or supervise the placement or removal of an inmate in the Safety Chair. The concerned facility's training unit shall maintain a record of custody personnel trained in the use of the Safety Chair.

USE OF THE SAFETY CHAIR

The Safety Chair shall only be used when other less restrictive alternatives have failed, or it is apparent the less restrictive alternative will be ineffective in controlling the inmate. Absent exigent circumstances, authorization from the on-duty watch commander is required prior to the use of the Safety Chair, and a supervisor at the permanent rank of sergeant or above shall be present during the inmate's placement in the chair. The use of the Safety Chair shall be documented in the Watch Commander's Log.

If reportable force is used to place the inmate in the Safety Chair or if the inmate struggles against the chair restraints or complains of pain, medical personnel shall examine the inmate as soon as the inmate is placed in the Safety Chair and perform a check of the inmate's vital signs every hour while the inmate is secured in the Safety Chair. This medical evaluation as to whether the inmate shall remain in the Safety Chair shall take precedence over the custody evaluation. All Department policies regarding injuries sustained by inmates and use of force procedures shall remain in effect. Pregnant inmates shall not be placed in the Safety Chair. Personnel should ensure that all of the inmate's personal property, excluding jail clothing, has been removed (e.g. jewelry, glasses, shoes, boots, socks, etc.). Whenever possible, the cooperation of the inmate shall be sought in order to seat them in the Safety Chair on their own.

MONITORING INMATES SECURED IN THE SAFETY CHAIR

The following criteria shall apply in each incident when an inmate is secured in the Safety Chair:

- The inmate shall remain in continual, direct visual contact at all times by the designated custody personnel
- At least twice every thirty (30) minutes, approximately fifteen (15) minutes apart, custody personnel shall check the inmate and document any comments regarding the health and physical condition of the inmate. All components shall be physically checked to ensure they are properly secured and present no obvious physical signs of circulatory restrictions to the inmate’s extremities
- The maximum time an inmate shall be secured in the Safety Chair is two (2) hours, unless exigent circumstances require the need to keep the inmate secured in the Safety Chair. Approval shall be obtained from a supervisor at the permanent rank of lieutenant or above, or on-duty watch commander, in consultation with medical staff, for any extension past the two (2) hours and every two (2) hour period thereafter. The reason for the extension shall be noted in the Inmate Safety Chair Security Check Log (SH-R-637)
- The medical opinion as to whether the inmate shall remain in the Safety Chair shall take precedence over the custody evaluation
- All observations and actions taken shall be documented on the Inmate Safety Chair Security Check Log (SH-R-637)
- If observations indicate that the inmate is and has been calm for a minimum of thirty (30) minutes, a supervisor at the permanent rank of sergeant or above shall be summoned to observe the inmate and make the determination if the inmate should be removed from the Safety Chair
- Medical assistance shall be summoned immediately whenever an inmate appears to be experiencing medical distress or complains of difficulty breathing.

If an inmate is held in the Safety Chair for a two (2) hour period, then it is required that the inmate be removed from the Safety Chair for a minimum of thirty (30) minutes prior to any subsequent application (unless exigent circumstances apply as noted above). Inmates secured in the Safety Chair shall not be denied food, water or

beverages, prescribed medications, or access to a bathroom unless there is substantial cause to do so and the watch commander has been notified and has obtained the concurrence of available medical staff.

USE OF THE SAFETY CHAIR DURING EXTRACTIONS

The Safety Chair should be considered a viable tool in controlling an inmate who is displaying or has the potential for, violent, hostile, or combative behavior post-extraction. When planning a controlled extraction, it is recommended custody personnel use a Safety Chair during the extraction rehearsal in case the use of a Safety Chair becomes necessary. It is the responsibility of the supervisor to ensure the entire procedure is video recorded. Without exception, all inmates placed in a Safety Chair shall be expedited to their final destination.

MEDICAL EVALUATION WHEN RELEASED FROM THE SAFETY CHAIR

Inmates that complain of pain or have any visible signs of injury shall be medically evaluated immediately upon release from the Safety Chair.

Should the inmate's continuous uncooperative, violent, or self-destructive behavior result in the inmate's placement in the Safety Chair for a period of time exceeding eight (8) hours, the watch commander shall consult with healthcare staff for their assessment of any potential healthcare concerns, and determine whether the inmate can be safely removed from the Safety Chair. If this assessment indicates the inmate cannot be safely removed from the Safety Chair, the inmate shall be provided appropriate medical care as determined by healthcare staff.

USE OF THE SAFETY CHAIR FOR SHORT-TERM SECURE MOVEMENT WITHIN THE FACILITY

When utilizing the Safety Chair for security reasons during short-term secured movement/escort within the facility, the provisions in Title 15, section 1058 do not apply. The following procedures will apply and conform to the policies of the CDM.

- The inmate shall remain in direct and unobstructed visual observation by the supervising sergeant and designated custody personnel.
- The inmate's safety and physical condition shall be monitored continuously by designated custody personnel throughout the movement/escort.
- If during the placement of the inmate in the Safety Chair, the inmate struggles against the chair restraints, has any visible signs of injury, or complains of pain, they shall be medically evaluated immediately after being secured in the Safety Chair.
- The use of the Safety Chair for security reasons during short-term movement within the facility does not require documentation in the Inmate Safety Chair Security Check Log (SH-R-637). In these cases, use of the Safety Chair shall be documented in the electronic Line Operations Tracking System (e-LOTS) under Project Type "Misc.", with a project description of "Use of the Safety Chair, Short-Term Secured Movement."

REPORTING USE OF FORCE

The un-resisted placement of an inmate into the Safety Chair may not necessarily constitute a use of

reportable force. However, if in the course of applying restraints, the inmate struggles or resists in any way, it does constitute a use of force and must be reported pursuant to CDM section 7-06/000.00, "Use of Force Reporting Procedures."

In all instances that the Safety Chair is utilized for safety reasons as noted in Title 15, section 1058, or when used in transporting an inmate outside of the custody facility, a reference number shall be drawn, and an Inmate Safety Chair Security Check Log (SH-R-637) shall be completed. A copy of the form shall be forwarded to the statistical coordinator for entry into the electronic Use of Force Tracking System.

The video recording and all appropriate paper work shall be maintained at the concerned facility for four (4) years. If the inmate is injured as a result of utilizing the Safety Chair, or if there is a significant risk management factor or a lawsuit is filed, all documentation shall be maintained indefinitely.

• 7-03/050.00 WRAP Restraint

7-03/050.00 WRAP RESTRAINT

The WRAP restraint device (manufactured by Safe Restraints, Inc.) is a Department approved security restraint device authorized for use within the Custody Services Division. The WRAP restraint device immobilizes the body and restricts the inmate's ability to kick. The WRAP restraint device restrains the inmate in an upright position and puts the inmate in a position for transport or movement.

The WRAP restraint device consists of a locking shoulder harness, a leg restraint portion with embedded padded rods, and a three-inch-wide ankle strap. The WRAP restraint is not a medically ordered restraint device, but rather a security restraint device as noted in Title 15, section 1058, “Use of Restraint Devices.”

Only trained personnel shall be authorized to perform, assist, or directly supervise the placement or removal of the WRAP restraint. The respective facility’s training unit shall maintain a record of custody personnel trained in the use of the WRAP restraint. The WRAP restraint shall never be used as punishment, harassment, or for the purpose of knowingly causing harm to an inmate.

When the WRAP restraint will be used during a planned use of force, medical and mental health personnel shall be present or, if impractical or unsafe, staged nearby when feasible, to determine whether it is safe to use the WRAP restraint based on the inmate's present physical or mental condition. See Custody Division Manual (CDM) section 7-01/040.00, “Planned Use of Force.”

Personnel shall consider less restrictive methods of restraining the inmate (e.g., the use of the WRAP CART alone, and/or a hobble restraint). The WRAP restraint shall only be used when it is apparent that other techniques to control the inmate would be ineffective.

USE OF THE WRAP RESTRAINT

The WRAP restraint device may only be used on inmates who pose an immediate threat to themselves or others when the circumstances reasonably perceived by personnel at the time indicate the WRAP restraint application is necessary to control the inmate. An immediate threat is present when:

- an inmate is violent or is physically resisting; or
- an inmate has demonstrated, by words or actions, an intent to be violent or to physically resist, and, based on the totality of the circumstances, reasonably appears presently capable of causing physical harm to themselves, custody staff, or others if the WRAP restraint is not applied.

Absent emergency circumstances, use of the WRAP restraint shall be verbally authorized by the on-duty watch commander, placement in the WRAP restraint shall be video recorded, and a supervisor at the permanent rank of sergeant or above shall be present during the inmate's placement in the WRAP restraint.

When preparing to use the WRAP restraint, if circumstances permit and it is reasonably safe and feasible to do so, while waiting for the WRAP restraint to arrive at the scene or to be fully deployed, the inmate should be placed on their side to minimize breathing problems and the risk of medical distress or positional asphyxia. The WRAP restraint shall not be used if a neck or back injury is reasonably suspected.

When an inmate is placed in the WRAP restraint, and until the inmate is removed from the WRAP restraint, the inmate shall remain under in-person, direct visual observation at all times by the supervising sergeant or custody personnel designated by the supervising sergeant. The cinching straps of the shoulder harness shall never be tightened to the point it restricts the inmate's ability to breathe. All components of the WRAP restraint shall be physically checked to ensure they are properly secured and present no obvious signs of circulatory restrictions to the inmate's extremities. Personnel shall not apply pressure directly to the inmate's head or neck while applying the WRAP restraint. Additionally, personnel shall not use unreasonable pressure on the inmate's back or shoulders when applying the WRAP restraint. Every effort will be made to minimize the amount of time that the inmate is restrained.

An inmate in the WRAP restraint (with the locking shoulder harness attached) may be moved by means of a shuffle step. To accomplish this when safe to do so, personnel may loosen the ankle strap to allow some leg movement below the knees and loosen the tether to the shoulder harness. Personnel can then assist the inmate into a standing position and allow the inmate to shuffle step to or from a vehicle or holding cell. If personnel use this method, they are to provide appropriate support to the inmate to prevent a fall and possible injury.

The WRAP restraint shall not be used on inmates who are known to be pregnant.

Personnel shall not use a spit mask in conjunction with the WRAP restraint unless the inmate is actively spitting, verbally threatening to spit, or there are clear signs they intend to spit (i.e., the inmate is collecting saliva/mucus in their mouth or making sounds like they are gathering saliva/mucus), and all other conditions in the spit mask policy (CDM 7-04/010.00, "Spit Masks") are met.

Personnel shall immediately request medical aid if an inmate in any portion of a WRAP restraint complains of, or exhibits medical distress (e.g. respiratory distress, including gasping, snorting or gurgling sounds, complaint of chest pain, change in facial color, restricted blood circulation, complaints of extreme heat, sudden quiet or inactivity, loss of consciousness, vomiting, etc.) and remove the inmate from the WRAP restraint if a medical emergency appears to exist or medical staff so direct because of the medical emergency.

If personnel identify that the inmate placed in the WRAP restraint has a need for mental health care, mental health staff shall be requested and personnel shall adhere to procedures delineated in Custody Division Manual (CDM) section 4-05/000.00, "Behavioral Observation and Mental Health Referral Reports."

MONITORING INMATES SECURED IN THE WRAP RESTRAINT

Following application of the WRAP restraint, resisted or otherwise, a supervisor and the appropriate number of personnel who were not directly involved in the application shall take the inmate to a medical clinic for a documented medical assessment and/or treatment as soon as practicable. **Absent unusual circumstances when the medical needs of other patients take priority, inmates who arrive in the WRAP at the medical clinic will receive priority when it comes to receiving the medical assessment and/or treatment they require, and that** medical assessment shall be conducted within one (1) hour from the time of placement in the WRAP restraint to determine if placement is safe based on the inmate's present physical or mental condition. A medical opinion based on the inmate's present physical or mental wellbeing as to whether the inmate shall remain in the WRAP restraint shall take precedence over custody personnel's evaluation. Any refusals for medical treatment shall be made by the inmate directly to medical personnel **and will be addressed by those medical personnel in a manner consistent with their medical judgment and Correctional Health Services' (CHS) policy and practices concerning inmates who refuse medical care.**

Upon the inmate's placement in the WRAP restraint, Department personnel shall initiate the WRAP Restraint Security Check Log (SH-J-480). If it is determined an inmate shall remain in the WRAP restraint longer than fifteen (15) minutes, in addition to the in person, direct visual observation required at all times, safety checks shall be documented twice (2) every thirty (30) minutes, approximately fifteen (15) minutes apart, until the WRAP restraint is removed. Safety checks shall verify that the WRAP restraint is not causing injury or an obvious medical problem (e.g. respiratory distress, chest pain, restricted blood circulation, loss of consciousness, vomiting, etc.). The ankle strap, leg restraint component, and locking shoulder harness are to be checked frequently for tightness and re-tightened or loosened as necessary until the WRAP restraint is removed.

A sergeant shall also conduct a safety check that evaluates the application of the WRAP restraint and shall assess its continued use at a minimum of once (1) every thirty (30) minutes. During this check, the sergeant shall reassess whether or not the inmate needs to remain in the WRAP restraint.

The sergeant shall ensure each inmate has been offered or provided access to toilet facilities, drinking water, prescribed medication, and be allowed to exercise their extremities (when safe), which shall be documented in the WRAP Restraint Security Check Log (SH-J-480). If the inmate misses a regularly scheduled meal due to being placed in the WRAP restraint, a meal shall be provided to the inmate upon removal of the WRAP restraint.

The sergeant shall attempt to have the inmate removed from the WRAP restraint before one (1) hour. If it is determined the inmate cannot be safely removed from the WRAP restraint before one (1) hour, the reason for continued retention shall be documented in the WRAP Restraint Security Check Log (SH-J-480). The sergeant shall have the inmate removed from the WRAP restraint within two (2) hours.

A supervisor at the rank of sergeant or above shall be present when the WRAP restraint is removed, absent emergency circumstances. The removal of the WRAP restraint should occur when the inmate can be safely confined within a housing location or an alternative location, or if the inmate is no longer deemed a threat. If necessary, the sergeant shall adhere to CDM section 7-01/040.00, "Planned Use of Force," upondetermining the WRAP restraint can be removed, absent emergency circumstances.

USE OF WRAP CART ALONE – INMATE AFFIXED TO WRAP CART

Title 15, section 1058 does not apply to the use of a WRAP CART alone for security reasons during short-term movement or escort.

The WRAP CART has connection points that personnel may use to affix an inmate to the WRAP CART itself using a set of handcuffs.

The following procedures apply when personnel affix an inmate to the WRAP CART, but are not using the WRAP restraint device:

- The inmate shall remain under in-person, direct visual observation at all times by the supervising sergeant or custody personnel designated by the supervising sergeant. The inmate's safety and physical condition shall be monitored continuously by designated custody personnel throughout the movement/escort. Personnel shall remove the inmate from the WRAP CART if a medical emergency appears to exist.
- If during the placement or movement of the inmate in the WRAP CART, the inmate struggles against the restraints, has any visible signs of injury, or complains of pain, they shall be immediately taken for a documented medical assessment and/or treatment.
- The use of the WRAP CART for security reasons during short-term movement shall be documented in the WRAP Restraint Security Check Log (SH-J-480) and the electronic Use of Force Tracking System along with the reason for placement, time of placement, and time of removal from the WRAP CART.
- Use of the WRAP CART for short-term movement when the inmate is affixed to the WRAP CART shall not exceed one (1) hour.

Notification of the use of the WRAP CART shall be made to the sergeant upon placement. Inmates placed in the WRAP CART may be restrained by other methods consistent with Department policy.

If the inmate remains affixed to the WRAP CART for more than one (1) hour, all procedures for the WRAP restraint shall be followed.

Pregnant inmates shall not be handcuffed to the rear during transportation in the WRAP CART.

These WRAP CART procedures do not apply when the WRAP CART is used solely as a transportation device and the inmate is not affixed to any portion of the WRAP CART.

REPORTING USE OF THE WRAP RESTRAINT

Absent any other factors, the un-resisted placement of an inmate in the WRAP restraint device does not constitute reportable force. However, if in the course of applying the WRAP restraint, the inmate resists personnel, it constitutes a reportable use of force and must be reported pursuant to CDM section 7-06/000.00, “Use of Force Reporting Procedures.”

The WRAP Restraint Security Check Log (SH-J-480) shall be entered into the electronic Use of Force Tracking System by the supervising sergeant prior to the end of their shift.

• 7-04/000.00 Escorting Procedures for Combative or Uncooperative Inmates

The following procedures are to be used in conjunction with all current use of force policies as well as all other applicable procedures, policies, and guidelines. At all times Department members shall employ appropriate defensive tactics and control techniques.

Uncooperative inmates being escorted shall be properly handcuffed and searched prior to movement. To reduce the opportunity for inmates to make false allegations, inmates shall be kept in normal traffic areas.

Inmates who are uncooperative and combative, or have a history of making false allegations, shall be escorted by a sergeant and two Department members, one member being a deputy. The sergeant shall ensure the movement is video recorded, refer to Custody Division Manual (CDM) sections 7-02/020.00 “Handling Insubordinate, Recalcitrant, Hostile, or Aggressive Inmates” and 7-06/010.00 “Video Recording Procedures.”

Personnel involved in an incident/altercation with a recalcitrant, uncooperative, or combative inmate shall not be part of the escorting team.

These procedures extend to the transport of combative or uncooperative inmates to or from any outside custody, court, or medical facility. Upon arrival, the escorting sergeant shall notify the receiving sergeant of the inmate's combative or uncooperative behavior. In the event that no receiving sergeant is available, the escorting sergeant shall remain with the inmate until such time as a receiving sergeant becomes available.

No section of this policy is intended to preclude Department personnel from making contrary decisions due to exigent/unique circumstances.

• 7-04/010.00 Spit Masks

The Department has approved the use of spit masks to reduce the risk of the wearer transmitting fluids (saliva, mucus, and blood) from the facial area through spitting, sneezing, or coughing. Spit masks shall only be used in instances where there is a reasonable belief that the inmate poses a threat of transmitting bodily fluids, actively spitting, biting, and/or threatening to spit by words or actions.

The decision to use a spit mask should not be taken lightly as improper use may cause injury or death, including asphyxiation, suffocation, or drowning in one's own fluids. Personnel shall not use a spit mask as a form of retaliation or punishment. Spit masks are for one-time use only and are considered a biohazard after use. Spit masks shall be disposed of in approved biohazard receptacles after use.

Conditions for Using the Spit Mask

When a spit mask is used, personnel shall ensure the following:

- The wearer shall be restrained before applying a spit mask.
- Personnel shall make an attempt to remove any jewelry and eyewear from the wearer before application (if safe).
- Personnel should avoid spraying the wearer with chemical agents while the spit mask is applied.
- Circumstances permitting, attempt to video record the spit mask’s application and video record the wearer wearing the spit mask.

- Circumstances permitting, request a supervisor before application of the spit mask.
- The wearer shall remain under constant, close supervision while wearing the spit mask and be continuously monitored in person for signs of medical or mental distress.
- The wearer shall never be left unattended.

Spit masks shall **not** be used under the following circumstances:

- If the inmate is vomiting, having difficulty breathing, or is bleeding profusely from the mouth or nose area.
    - If personnel observe the wearer experiencing difficulty breathing, vomiting, or if the wearer begins to bleed profusely from the mouth or nose after the application of the spit mask, the spit mask shall be immediately removed, and personnel shall request medical assistance.
- If there is difficulty applying the spit mask due to head size.

• 7-05/000.00 Chemical Agents

For the purposes of this policy, chemical agents are generally classified in the following three categories and shall only be used by trained personnel:

- Aerosol
- Incendiary (flammable)
- Non-incendiary (non-flammable)

In accordance with CDM section 5-01/030.05, “Identification and Classification Symbols for Pregnant Inmates,” and for the purposes of this section, “pregnant inmate” means an inmate that is known to the Department to be pregnant. Inmates known to be pregnant will wear an orange wristband loop along with the K-8 sub-classification code displayed on the wristband. Their uniform consists of a dual-color shirt with a light blue front side and a white back side, and white pants.

When time and circumstances permit, personnel shall request that Correctional Health Services (CHS) staff check the inmate’s medical/mental health records before chemical agents are used against the inmate. If a medical check finds these agents are contra-indicated or the involved inmate is pregnant, they shall not be used unless to prevent the imminent loss of life or serious bodily injury.

Personnel shall not intentionally expose an inmate known to be pregnant to chemical agents. Absent exigent circumstances requiring immediate use of chemical agents, personnel shall request pregnant inmates move from areas where unintentional exposure to the chemical agents may be reasonably foreseeable. Any refusal by a pregnant inmate shall be video recorded by a supervisor with the rank of sergeant or higher, and medical personnel shall be summoned to the location.

The authorized use of any chemical agent during any disturbance or riotous situation in the Custody Divisions as defined in CDM section 4-01/010.00, “Classification and Reporting of Facility Incidents,” shall have as a primary objective, one or more of the following:

- Prevention of violence
- Suppression and dispersal of riotous assemblies of inmates with minimum hazard to inmates and

officers
- Incapacitation and restraint of violent inmates who are endangering life, property, and/or security

Chemical agents shall not be used in the following situations:

- When the inmate no longer presents a danger to personnel or other inmates
- When the inmate is no longer resistive
- Against an inmate known to be pregnant
- When custody personnel have specific knowledge of an inmate's medical condition, which may be aggravated or affected by such a device
- In a manner that contradicts the manufacturer's recommendations or Department training

The deployment of incendiary chemical agents (i.e., CS grenades) shall be authorized by the watch commander and the use authorized by a sergeant. The possibility of a structure fire should be considered when making the decision for their use. For this reason, fire equipment shall be requested to the scene prior to the use of CS grenades inside a structure. In situations where the potential to start fires is a concern but the need to use chemical agents exists, consider using a non-burning agent.

• 7-05/010.00 Aerosol Chemical Agents

In accordance with CDM section 5-01/030.05, "Identification and Classification Symbols for Pregnant Inmates," and for the purposes of this section, "pregnant inmate" means an inmate that is known to the Department to be pregnant. Inmates known to be pregnant will wear an [REDACTED TEXT] wristband loop along with the [REDACTED TEXT] sub-classification code displayed on the wristband. Their uniform consists of a [REDACTED TEXT] shirt with a [REDACTED TEXT] front side and a [REDACTED TEXT] back side, and [REDACTED TEXT] pants.

The following aerosol chemical agents are classified as special weapons:

- Mark 46 (OC) aerosol canister
- Orthochlorobenzalmalononitrile (CS) + (OC) blend canisters larger than 4 ounces

The deployment and use of these chemical agents are subject to the provisions of the Custody Division Manual (CDM) section 7-08/000.00, "Deployment of Special Weapons."

The use of some of these aerosol chemical agents have the potential to affect those deploying them. For this reason, all personnel should be aware of the possibility of being exposed to the agent. Personnel deploying OC and OC/CS blend agents classified as special weapons shall wear Department-approved particulate masks during the application of the agent.

The following aerosol chemical agents are not classified as special weapons and may be carried by all personnel:

- Two to four ounce (OC) spray canisters
- Two to four ounce (OC) foam canisters
- Two to four ounce OC/CS blend canisters

- Mark 9 (MK-9) Oleoresin Capsicum (OC) aerosol canister

Aerosol chemical agents are defensive weapons designed to incapacitate aggressive individuals with no permanent after effects and with a minimum of contact on the part of the user.

Absent circumstances that justify the use of deadly force, chemical agents, including aerosol chemical agents, shall not be used against an inmate known to be pregnant. In addition, personnel shall not intentionally expose an inmate known to be pregnant to chemical agents. Absent exigent circumstances requiring immediate use of chemical agents, personnel shall request pregnant inmates move from areas where unintentional exposure to the chemical agents may be reasonably foreseeable. Any refusal by a pregnant inmate shall be video recorded by a supervisor with the rank of sergeant or higher, and medical personnel shall be summoned to the location.

When dealing with a hostile/violent individual, personnel may use their Department-issued aerosol chemical agents without prior authorization, and must notify their immediate supervisor and the watch commander immediately after such use. All incidents involving the use of aerosol chemical agents shall be recorded on the facility log and reported to the unit commander through the watch commander.

All inmates exposed to chemical agents shall be given medical assistance as soon as possible after exposure.

The use of aerosol chemical agents constitutes a use of force. All members utilizing aerosol chemical agents must do so only when fully justified, and in conformance with:

- Department Manual of Policy and Procedures (MPP) and Custody Division Manual (CDM) use of force policies
- MPP section 5-06/040.45, "Use of Chemical Agents"
- CDM section 7-01/020.00, “Authorized Use of Force,” and 7-05/000.00, “Chemical Agents”

Members will be considered qualified to use aerosol chemical agents only after successful completion of the Academy course of instruction or upon successful completion of the course of instruction presented under the direction of the Custody Training and Standards Bureau (CTSB). No Department member shall use a chemical agent or variation of a chemical agent in which they have not been certified in its use.

• 7-06/000.00 Use of Force Reporting Procedures

The Sheriff’s Department recognizes each use of force by its members requires a thorough, fair, and objective review.

Reportable force is any force which is greater than that required for un-resisted Department-approved:

- Searching;
- Handcuffing;
- Control holds;
- Come-alongs;
- Hobbling;

- Or any action which results in an injury or a complaint of pain.

NOTE: Throughout this section, the term “suspect” is used to refer to any individual upon whom force has been used.

Reportable Force Categories

There are three categories of Reportable Force.

Category 1 Force involves any of the following where there is no injury:

- Searching and handcuffing techniques resisted by a suspect;
- Hobbling resisted by a suspect;
- Control holds or come-alongs resisted by a suspect;
- Takedowns;
- Use of Oleoresin Capsicum spray, Freeze +P or Deep Freeze aerosols, or Oleoresin Capsicum powder from a Pepperball projectile (when a suspect is not struck by a Pepperball projectile) if it causes only discomfort and does not involve injury or lasting pain.

Category 2 Force involves any of the following:

- Any identifiable injury;
- A complaint of pain that a medical evaluation determines is attributable to an identifiable injury;
- Any application of force other than those defined in Category 1 Force, but does not rise to the level of Category 3 Force.

Category 3 Force involves any of the following:

- All shootings in which a shot was intentionally fired at a person by a Department member;
- Any type of shooting by a Department member which results in a person being hit;
- Force resulting in admittance to a hospital;
- Any death following a use of force by any Department member;
- All head strikes with impact weapons;
- Kick(s), delivered from a standing position, to an individual’s head with a shod foot while the individual is lying on the ground/floor;
- Knee strike(s) to an individual’s head deliberately or recklessly causing their head to strike the ground, floor, or other hard, fixed object;
- Deliberately or recklessly striking an individual’s head against a hard, fixed object;
- Skeletal fractures, with the exception of minor fractures of the nose, fingers or toes, caused by any Department member;
- All canine bites;
- Any force which results in a response from the Internal Affairs Bureau (IAB) Force/Shooting Response Team, as defined in the Manual of Policy and Procedures (MPP) section 3-10/130.00, “Activation of the IAB Force/Shooting Response Teams.”

IAB will be notified of all canine bites requiring medical treatment. Due to the specialized nature of these

investigations, canine bites will initially be investigated by the Special Enforcement Bureau Canine Services Detail (SEB/CSD) sergeant, unless the incident meets the criteria for an IAB Force/Shooting Response Team response. All canine bites shall also be reviewed by the Executive Force Review Committee, with an additional level of oversight conducted by the Office of the Inspector General (OIG).

Responsibilities for Reporting the Use of Force

In all cases in which members use reportable force, they shall make a verbal notification to their immediate supervisor (with a minimum rank of sergeant) as soon as safely possible. To the extent possible, the verbal notification should be outside the presence of other Department members who used or witnessed the force.

Each member who uses reportable force and each supervisor who directed the force which was used, shall complete a written first report of the force incident prior to going off duty. If the watch commander determines exigent circumstances such as the member's physical or medical condition impair their ability to complete the report, the report shall be completed as soon as possible and the reasons for the delay should be documented.

Each assisting member who used force, including partners, shall submit a separate supplementary report detailing their actions prior to the member going off duty.

Department members witnessing reportable force used by another Department member or by anyone working with or on behalf of the Department shall similarly advise their immediate supervisor and prepare an independent written report before going off duty unless the watch commander specifically designates which witnesses will write the reports because a large number of members witnessed the same incident. If their immediate supervisor used or directed force, witnesses shall make their advisement to the watch commander who will determine whether a separate report/memorandum by the witness is required.

Members witnessing reportable force used by employees of another law enforcement agency shall, as soon as safely possible, advise their immediate supervisor and write a memorandum documenting their presence or, if applicable, provide a copy of their patrol log.

NOTE: Refer to MPP section 3-10/300.00, "Deputy-Involved Shootings – General Provisions" through section 3-10/600.00, "Statistical Compilation – Shots Fired by or at Deputies – No Person Wounded or Killed" for the use of force reporting and review procedures involving shootings by Department members.

When feasible, written reports shall be reviewed and approved by the supervisor to whom the force incident was initially reported. A reference to the verbal notification and the name of the supervisor to whom it was made shall be included in the first report. Each member reporting force in a report or memorandum shall describe in detail the force incident, including the tactics leading up to the use of force, the actions of the suspect necessitating the use of force, the specific force used in response to the suspect's actions, and any force the member observed which was used by other members. Any injuries or complaint of injuries, and any medical treatment or refusal of medical treatment, shall be documented in the first report, supplementary reports, or memoranda.

When force is used during crowd control situations and an arrest cannot be made, or the suspect(s) cannot be identified, Department members shall report their individual uses of force (directed or otherwise) to an on-scene supervisor as soon as safely possible. The application of force applied to a group, or members of a group, who are not arrested or cannot be identified, shall be documented on a single use of force

memorandum by the on-scene supervisor and approved by the incident commander. Reporting of force used in crowd control situations in which suspects are arrested, or can be identified, shall be reported as an individual use of force consistent with this policy. Department members who use force in crowd control situations in a Custody Operations facility shall prepare a written report/memorandum.

Allegations of Force

Allegations of force, whether made by the person upon whom the alleged force was used or by a third party, shall be investigated in a timely manner similar to a force investigation (e.g. interview the complainant and witnesses, collect evidence, gather documents, respond to the scene, take photographs, etc.). The Department member to whom the force allegation was reported shall report the allegation to their immediate supervisor with the minimum rank of sergeant. That supervisor shall immediately conduct an inquiry to determine the validity of the allegation (i.e. whether it is corroborated by statements and/or evidence.). However, if that supervisor was alleged to have been involved in (or a witness to) the incident, the inquiry shall be assigned to another supervisor.

The supervisor conducting the inquiry shall adhere to the following guidelines:

- Follow up on information provided by the individual making the allegation (i.e. interview person(s) whom the individual said were present and/or witnessed the incident, look for and collect evidence that the individual mentions);
- Collect evidence and take statements;
- Take photographs of the location, if appropriate;
- Review any medical records (in cases of an inmate, review the inmate injury report). If an inmate injury report was not prepared for an inmate, ensure one is prepared and the inmate is medically treated;
- Photograph all visible injuries (if applicable) and thoroughly document/describe all statements taken and evidence collected;
- Determine if the force incident was recorded and secure any such recordings of the incident.

An inquiry into a force allegation shall be documented in a memorandum from the supervisor to the unit commander and shall include the supervisor's conclusions regarding the validity to the allegation. The unit commander shall take one of the following actions:

- Close the inquiry if there is no validity to the allegation;
- Initiate an administrative investigation if the inquiry reveals possible misconduct that could result in discipline, such as unreported use of force;
- Initiate a criminal investigation if the inquiry reveals reasonable suspicion a crime occurred (e.g. assault under the color of authority.)

All allegations of force shall be forwarded by the unit commander to the concerned facility’s area commander for review/concurrence and then forwarded to the administrative commander for review. After review by the administrative commander, it shall be returned to the originating facility for forwarding to the Discovery Unit.

• 7-06/010.00 Video and Audio Recording Procedures

The Sheriff's Department utilizes video cameras in the Custody Services Division to enhance safety and effectiveness for personnel in the performance of their duties, and to provide a reviewable electronic record of incidents.

Regardless of the method of recording, the use of video equipment at a Sheriff's Department custody facility by personnel shall be restricted to law enforcement functions, and is subject to all applicable laws, policies, and procedures.

Portable Video Cameras

Portable video cameras (e.g., camcorders, iPods, etc.) are handheld devices used to record incidents, interviews, crime scenes, and any other situation warranting an audio/visual accounting.

Personally owned video recording devices of any kind are not authorized and shall not be brought into the secured areas of any custody facility without prior approval from the watch commander.

Recording Incidents with a Portable Video Camera

Reasonable attempts shall be made to record significant incidents with a portable video camera including, but not limited to, the following:

- Major inmate disturbances
- Inmate extractions
- Recalcitrant inmates
- Application of medical restraints
- Application of the Wrap restraint, Total Appendage Restraint Procedure (TARP) or use of the Safety Chair
- Medical removals who pose a significant risk or have the potential to become violent
- Use of force by Department personnel
- Housing area or facility searches
- Any incident/event which may pose risk management and/or liability issues
- All Emergency Response Team (ERT) activations, except for training exercises

A designated video operator should respond to the incident and begin recording using the wide-angle field of view. **Unless no other option is available, supervisors should not assume the role of video operator**. The video operator shall state on the recording:

- Date
- Time
- Video operator's name, rank, and employee number
- Location
- Factual narration during the incident, (e.g., "watch commander is on scene," "Emergency Response Team is on scene," etc.)
- Name of civilians on scene (e.g., nurse or mental health clinician evaluating the inmate)
- Status of facility lock down, if applicable

- Any other necessary or significant details about the incident

Only factual information shall be narrated while recording on video.

In order to establish a timeline for the incident, the video recording should not be paused or stopped until the entire incident has concluded. If the incident becomes active after the recording was concluded, the recording shall be reinitiated immediately and all requirements of this policy shall be adhered to. If a battery, tape, or memory storage device change becomes necessary while recording an incident, the video operator shall re-introduce his/her name, rank, employee number, time, and state the reason for the interruption. The recording should include documentation of injuries, evidence, emergency medical treatment, and statements by all concerned parties.

In the case of emergency medical treatment, video recording should continue after medical staff arrives, throughout the course of medical treatment, and until the inmate is completely stable, no longer resisting, and the medical staff has completed treatment. Outside medical personnel rendering first aid while inside a custody facility, shall be recorded on video until they finish treating the inmate.

When documenting inmate injuries, all inmates at or near the incident should be interviewed on video individually. When documenting a large inmate disturbance, the incident commander should be recorded on video directing inmates with injuries to come forward.

When video recording injured inmates, custody personnel shall:

- State the inmate’s name, booking number, and housing location
- Ask the inmate to describe his/her injuries and how they occurred (a language translator should be used when necessary)
- Thoroughly record all injuries on video

Since the dynamics of an incident are constantly changing, the video operator should periodically pan around the entire area to show as much of the surroundings as possible, personnel present, and conversations between the inmate(s) and personnel. Whenever possible, only the on-scene supervisor should make the decision to stop recording an active incident.

Body Worn Cameras

For procedures concerning the body worn cameras, personnel shall refer to Custody Division Manual (CDM) section 3-06/055.15, “Body Worn Cameras,” and Manual of Policy and Procedures (MPP) sections 3-06/200.00, “Body Worn Cameras,” through section 3-06/200.75, “Public Release of Critical Incidents.”

Fixed Video Surveillance

Fixed video surveillance involves cameras permanently or temporarily mounted in designated locations that continuously record all activities in the cameras’ view.

The Sheriff’s Department’s primary objectives with fixed video surveillance are to:

- Record/document events as they occur
- Provide real-time intelligence for Department personnel

- Provide video evidence of actions by inmates and staff
- Produce a deterrent effect against inmate violence
- Provide for post-incident analysis

Radio Transmissions

All radio transmissions on the facility's main radio frequency are recorded, absent technical difficulties, via the Department's Voice Print Systems. Access to the Voice Print Systems will be restricted to supervisors. The Sheriff's Department's primary objectives with the Voice Print Systems are to:

- Record radio transmissions as they occur
- Provide audio evidence of actions by inmates and staff (if applicable)
- Provide for post-incident analysis

Retention of Recordings

Supervisors shall review all available video and radio transmission recordings as soon as reasonably possible following any inmate incident, force incident, or significant facility incident, **with the exception of incidents involving inmate deaths. Unit commanders or above shall be the only personnel authorized to review video recordings involving inmate deaths. Personnel shall not review video recordings involving inmate deaths without direct authorization from their unit commander.** If a supervisor determines a recording(s) may have evidentiary value or should be preserved by the Department for official use, the recording(s) shall be saved on the server and to a video medium (e.g., a compact disc [CD], digital video disc [DVD], or secure digital [SD] card). A copy of the video(s) and radio transmission(s) shall be retained in accordance with applicable laws and Department policies and procedures regarding handling of video and/or evidence.

Under no circumstances shall personnel forward any image, video, or audio captured as a result of their employment to entities outside of the Department without unit commander approval. Refer to MPPsections 3-01/100.46, "Use of Communication Devices," 3-01/040.95, "Confidential Information," and 3-01/030.78, "Prohibition on Profiteering."

Video copied to CD, DVD, SD card, or other memory storage device should be properly labeled with the following:

- Inmate's name and booking number
- Uniform Report Number (URN), reference number, and/or Administrative Case Number

NOTE: SD cards are small and the label provided does not allow sufficient space to write all the required information as listed above. Write the retention, the reporting year, and the sequential of the URN on the front of the SD card label. The SD card shall be sealed inside of a small paper envelope and all of the above required information shall be written on the outside of the envelope.

Once it has been verified that video recorded on portable video cameras has been successfully preserved in accordance with this policy, all video on the camera shall be deleted (or blank storage media shall be placed in the camera) prior to returning the video camera to its assigned location.

Incidents recorded on video not associated with an URN or reference number shall be held for a minimum of

twelve (12) months. Fixed video surveillance cameras record continuously; contents not associated with an URN or reference number shall be retained in a Department maintained server for a minimum of twelve (12) months. Recorded radio transmissions not associated with an URN or reference number will be retained for a minimum of 25 months. Recordings associated with pending litigation shall be preserved until the pending litigation is resolved.

If there are no trained personnel on-duty to retrieve a recording, the supervisor shall notify the unit commander and the video manager and provide the following information:

- Request to save potentially recorded video footage onto a DVD or CD
- Date, time, URN/Administrative Case Number
- Description of the incident
- Description of what may have been recorded on the surveillance system
- Location of the incident and specific surveillance cameras which may have recorded the incident
- Approximate time the incident began and ended

The requesting supervisor shall follow up to ensure the requested surveillance recording is saved and retained in accordance with the requirement of this policy. Supervisors shall ensure documentation of all reportable incidents clearly indicates whether or not an incident was captured on video.

Entering Recordings into Evidence

Supervisors shall ensure all video recordings and photographic evidence associated with an Incident Report (SH-R-49) is entered in the Department's Property, Evidence, and Laboratory Information Management System (PRELIMS). When a case is submitted for prosecution, Custody Investigative Services (CIS) investigators shall include all video and photographic evidence provided by the originating facility with their filing package, unless privileged or otherwise precluded by law. This includes:

- Photographs or video recordings of suspects' injuries or areas of alleged injury
- Photographs or video recordings of any personnel injuries
- Audio or video recordings of watch commander and handling sergeant's suspect and witness interviews
- All audio, and/or video recordings, and/or radio transmissions (including all viewpoints of Closed Circuit Television [CCTV] or portable camera) of the incident

If there is no evidence booked into PRELIMS, the investigator shall contact the operations staff at the originating facility and request all evidence to be booked into PRELIMS.

Portable Video Equipment Inspection

Watch commanders shall ensure all video recording equipment is inspected once per shift. This requires the watch commander to ensure personnel who use video equipment inspect their devices at the beginning of each shift to confirm the following:

- Account for all video recording equipment
    - All equipment is working properly
    - Any necessary repairs are documented appropriately

Inspection of portable video equipment shall include:

- Ensure batteries for video recording equipment are charged
- The camera should be pre-set to record in a high-quality mode, and should be pre-set not to record the internal time and/or date, as that information can be erroneously programmed and therefore unreliable
- When applicable, there should be a blank memory storage device in the video camera and at least two additional blank memory storage devices available at the beginning of each shift
- The portable video equipment inspection shall be documented in the electronic Uniform Daily Activity Log (e-UDAL)

Fixed Video Equipment Inspection

Inspection of fixed video equipment shall include:

- The watch commander or their designee shall confirm all surveillance cameras are properly functioning and recording at the beginning of each shift by logging into the system and retrieving a sample recording from the previous shift
- At the beginning of each shift, the watch commander or their designee shall ensure real-time footage accurately reflects the correct date and time of day
- The watch commander or their designee shall notify the designated video manager of any malfunctions, submit necessary work orders through proper channels (e.g., the online Helpdesk, etc.), and document all actions taken in the Watch Commander's Log, including who was notified and the requested corrective action
- The designated video manager shall ensure all high-definition cameras are recording at no less than ten (10) frames per second, with picture resolution no less than 720p, unless otherwise directed in writing by the respective Custody Services Division chief
- The fixed video equipment inspection shall be documented in the facility Watch Commander's Log

In the event the unit commander determines the fixed video surveillance equipment is in need of modifications, and in accordance with Prison Rape Elimination Act (PREA) Standards for Prison and Jails section 115.118, "Upgrades to Facilities and Technologies," and CDM section 3-06/030.00, "Facility Modifications," the unit commander, or their designee, shall consult with the Department's PREA coordinator to ensure such modifications can enhance the Department's ability to protect inmates from sexual abuse. The Department's PREA coordinator shall also be consulted when there is a substantial expansion or modifications of an existing facility or when the Department acquires a new facility.

NOTE: Data Systems Bureau (DSB) is the designated video manager for fixed video equipment within Custody Services Division facilities and is responsible for the maintenance and repair of related software and equipment, and for establishing protocols governing the security and remote monitoring of server rooms at each facility. The rooms shall remain locked and shall not be accessed by unit personnel, except in case of emergency, or at the direction of DSB.

• 7-06/020.00 Use of Force Package

Watch commanders/supervising lieutenants of Custody Services Division shall prepare and submit a force review package to the unit commander for all reviews of force not conducted by an Internal Affairs Bureau

(IAB) Force/Shooting Response Team.

In addition to the required items set forth in the Manual of Policy and Procedures (MPP) Use of Force policies, Custody Services Divisions force review packages shall include the following items:

- Involved employee's use of force memos (if no SH-R-49 was submitted);
- In cases of hospital/urgent care treatment or when the inmate is scheduled for a follow-up examination, ensure a timely additional investigation was conducted to verify the injuries or inmate's medical status;
- Audio and/or video recordings (including all viewpoints of Closed Circuit Television [CCTV] or hand-held camera and radio transmissions) of the incident, if applicable;
- Photographs and/or video recordings of the suspect's injuries or area of alleged injury;
- Audio and/or video recording(s) of watch commander and handling sergeant interviews (suspect and witnesses);
- In the event the Total Appendage Restraint Procedure (TARP) is applied, the TARP-related information obtained from the immediate supervisor, as outlined in the Immediate Supervisor's Responsibilities subsection, shall be documented in the memorandum. For additional information, refer to MPP section 3-01/110.22, “Total Appendage Restraint Procedure (TARP);”
- Inmate inventory by permanent housing location (purge), if applicable;
- In instances where employees are injured, photographs and/or video of the injuries shall be included in the packet.

Review of Multi-Media Documentation

Custody Services Division watch commanders shall personally review any facility CCTV footage, video and audio recordings, and any photographs that are related to a force investigation they are assigned to review and approve. If multiple vantage points of CCTV and/or hand held video exist, all viewpoints shall be reviewed.

If the facility has a CCTV system and no video is available for the incident, the watch commander shall indicate the reason (for example: the system was down, no camera is positioned to cover that area of the facility). The watch commander shall document if a repair request was submitted, if a new camera needs to be installed to provide additional coverage, or any remedy which is required to address the problem.

The unit commander shall follow-up on the video issues noted by the watch commander and shall ensure the problem is remedied.

Submission of Incident Report (SH-R-49)

In cases where an Incident Report (SH-R-49) is submitted, supervisors shall ensure all the following items are entered in the Department's Property Evidence and Laboratory Information Management System (PRELIMS):

- Photographs and/or video recordings of suspect's injuries or areas of alleged injury;
- Photographs and/ or video recordings of staff injuries or areas of alleged injury, when applicable;
- Audio or video recordings of watch commander and handling sergeant’s interviews (including suspect and witness interviews);
- All audio and/or video recordings (including all viewpoints of CCTV or hand-held camera and radio

transmissions) of the incident.

Duties of Custody Investigative Services (CIS) Investigators

CIS investigators shall contact the operations staff at the originating facility and/or the supervisor charged with preparing the force package to ensure that all relevant and necessary evidence is booked into PRELIMS. When a case is submitted for prosecution, CIS investigators shall include all audio, video, and photographic evidence, all use of force memos, and all witness and suspect statements with their filing package to the pertinent prosecutorial agency, unless it is privileged or otherwise precluded by law.

Submission of Force Package

Refer to Custody Division Manual section 7-07/000.00, “Use of Force Review Procedures.”

• 7-06/030.00 Inmate Assault Reporting

Supervisor Responsibility

When **any** assault, inmate on staff or inmate on inmate (e.g. battery, assault with a deadly weapon, etc.) occurs within the Custody Services Divisions, it is the responsibility of the handling supervisor to ensure the completion of an Incident Report (SH-R-49), a Custody Services Division Crime Analysis (SH-R-49C), and any applicable inmate injury and/or use of force documentation as delineated in Custody Division Manual (CDM) sections 4-01/020.05, “Inmate Injury/Illness Reporting,” 7-06/020.00, “Use of Force Package,” and 7-07/000.00, “Use of Force Review Procedures,” in addition to any other required documentation. (Refer to CDM sections 4-01/000.00, "Crime Reporting Procedures," 4-01/010.00, "Classification and Reporting of Facility Incidents," and 4-07/010.00, "Notification and Reporting of Significant Incidents").

Applicable data from the reports shall be entered into the Los Angeles Regional Crime Information System (LARCIS) and the electronic Line Operations Tracking System (e-LOTS), if applicable.

Watch Commander Responsibility

Following any employee assault or use of force, the watch commander or a designee shall ensure all necessary reports, notifications, and log entries are completed prior to the end of the shift, unless otherwise approved in accordance with CDM section 4-01/000.50, "Deferred Report Procedures." A copy of all completed crime reports shall be forwarded to the respective unit statistical coordinator for entry into LARCIS.

The original Incident Report and Custody Services Division Crime Analysis shall be placed into the URN file. A second copy shall be placed in the related use of force package(s).

Compliance Lieutenant Responsibility

The facility compliance lieutenant or a designee shall enter the use of force incident information into the Preliminary Data Entry (PDE) system of the Performance Recording and Monitoring System (PRMS) within

the first 24 hours of occurrence, or as soon as possible thereafter. Refer to CDM section 7-07/030.00, "Compliance Lieutenant."

Note: *The PDE system serves as the temporary tracking site for information that will be transferred to PRMS. It serves to provide managers early notification and initial details of an incident and to provide a method of tracking and accountability for PRMS users.*

Statistical Coordinator Responsibility

Upon receipt of the reports, the respective unit statistical coordinator shall ensure the data is entered into LARCIS within 48 hours, in accordance with Manual of Policy and Procedures (MPP) section 4-01/140.05, "Los Angeles Regional Crime Information System (LARCIS) - Statistical Reporting System."

Unit Commander Responsibility

Prior to the final approval of a use of force package, the concerned unit commanders or designee shall ensure the data from the reports was accurately captured in PRMS and, if applicable, LARCIS.

• 7-07/000.00 Use of Force Review Procedures

Immediate Supervisor's Responsibility

Responding to Force Incidents

A sergeant shall respond without unnecessary delay to any incident involving reportable force and advise the watch commander or supervising lieutenant of any reportable force incident. Sergeants who planned, directed, or participated in the use of force should not investigate the incident.

With respect to any force incident, unless otherwise directed by the watch commander an uninvolved sergeant shall do the following:

- Ensure the inmate is taken for a documented medical assessment and/or treatment as soon as practical after the force incident. Inmates should only refuse medical treatment to a medical professional
- Locate and interview all potential witnesses, including Department personnel, medical/mental health staff, chaplains, and any other civilians who may have been present, and document their statements, including those who could have witnessed but claim not to have witnessed the incident
- Interview mental health staff who witnessed the force incident and/or attempted to resolve the incident without the use of force and what those attempts entailed. With the permission of mental health staff, the interview should be recorded on video or audiotape
- Inmates who witnessed the use of force shall be interviewed away from all other inmates and Department members involved in or witnessing the use of force
- Photograph and/or record the scene in conditions as near as possible to those at the time of the force incident, if appropriate

- Determine if the force incident was recorded and secure any such recordings of the incident
- Ensure that Department members who used force or witnessed force prepare required reports in a timely manner
- Review first reports and separate supplemental reports or memorandums to ensure that, consistent with this section, they describe in detail the force incident (including force used by another Department member), including the tactics leading up to the use of force, attempts to resolve the incident without force, the actions of the inmate necessitating the use of force, and the specific force used in response to the inmate's actions, as well as obvious or observable injuries to any party
- To the extent practical, Department personnel involved in the use of force, including Department members who witnessed the force incident, shall be separated from each other until their written first reports have been completed
- In cases where a recording has been secured, if the sergeant determines (after their initial review of the video and the incident reports) that there is evidence of apparent misconduct, or it appears that a Department member failed to make proper notifications of the incident, the sergeant should consult with the watch commander or supervising lieutenant before proceeding further (refer to Watch Commander/Supervising Lieutenant's Responsibilities subsection)
- After first reports and separate supplemental reports have been reviewed by the sergeant, and where there is no such evidence of apparent misconduct or a failure to properly notify, afford Department members an opportunity to review the recording of the force incident to facilitate recollection of additional details (refer to Manual of Policy and Procedures (MPP) section, 3-10/115.00 "Video Review and Admonishment")
- Complete a "Supervisor's Report, Use of Force" (SH-R-438-S) documenting each member who used force, or witnessed force
- Interview the attending physician or other qualified medical personnel, when the inmate is taken to a medical facility for examination, as to the extent and nature of the inmate's injuries, or lack thereof, and whether the injuries are consistent with the degree of force reported
- If the inmate is admitted to a medical facility or requires further medical treatment, it is the supervisor's responsibility to follow up with medical staff to ascertain if the injury was more serious than initially believed and make any necessary notifications in a timely manner
- Photograph and video record the members' injuries, swelling, or redness sustained during the use of force or document the absence of injuries

In incidents involving the Total Appendage Restraint Procedure (TARP), the sergeant shall document the following information in the "Incident Details" section of the SH-R-438S, if possible:

- How long the inmate was restrained with the TARP
- The emergency medical services agency that responded to the scene of the TARPing
- How the inmate was transported and in what body position(s) they were placed during the transport
- The length of time of the transport phase
- The observations of the inmate's psychological/physical condition while TARPed and during the

transport phase

- Any alleged recent drug usage by the inmate or indications by them that they suffer from cardiac or respiratory diseases (e.g., asthma, bronchitis, emphysema, etc.)

For additional information, refer to Manual of Policy and Procedures (MPP) section 3-01/110.22, “Total Appendage Restraint Procedure.”

If the force incident is a category 3 force incident that results in a response from the Internal Affairs Bureau (IAB) Force/Shooting Response Team, the sergeant's or immediate supervisor's function shall be limited to:

- Notifying the watch commander or supervising lieutenant of the force incident
- Identifying witnesses
- Ensuring that the members who used force or witnessed force do not communicate with each other until they have prepared their report or have been interviewed by investigators
- Preserving the scene and evidence as appropriate.

Unless otherwise specifically directed by the watch commander/supervising lieutenant, members (including supervisors) who directed force shall complete a written first report of the force incident prior to the member going off duty, unless exigent circumstances exist. If exigent circumstances exist, reasons for the delay shall be documented.

Force Packages

Sergeants reviewing reports or memos regarding force incidents shall ensure that all pertinent information is contained in them. Particular attention should be given to the tactics leading up to the use of force, attempts to resolve the situation without force, the description of the use of force, observable or otherwise obvious injuries, and the inmate’s actions that led to the use of force. The sergeant shall ensure that copies of such reports or memos are forwarded to the concerned watch commander/supervising lieutenant for inclusion in the force package.

Watch Commander/Supervising Lieutenant’s Responsibilities

Interviewing Inmates

The watch commander/supervising lieutenant shall, with extreme priority, personally examine any inmate upon whom force has been used and, except in category 3 force incidents, interview the inmate regarding the incident.

Personnel involved in a use of force, including participants, witnesses, and supervisors directing force, shall not be present when the interview is requested or conducted without approval from the on duty watch commander. If exigent circumstances require their presence, detailed justification shall be made in all supervisors’ subsequent reports.

When interviewing inmates regarding use of force incidents, the watch commander/supervising lieutenant shall ask the inmate if they have any injuries, the nature of the injuries, and if they were medically treated. These questions must be asked whether or not the inmate has any apparent injuries (refer to MPP section 3-

10/105.00 “Medical Treatment and Transporting Suspects”). If the inmate is taken to a medical facility for examination or treatment, the watch commander/supervising lieutenant shall ensure that a supervisor interviews the examining physician or qualified medical personnel as to the extent of the injuries, or lack thereof, and whether the injuries are consistent with the force reported.

The watch commander/supervising lieutenant shall ensure that the interview of the inmate is recorded on video and, if appropriate, photographs are also taken, paying particular attention to any known or alleged areas of injury (obtain inmate consent for photographing injuries hidden by clothing). Where practical, the inmate should not be interviewed during actual medical treatment. Prior to beginning the interview, the time, date and location of the interview shall be clearly stated, along with the names, ranks, and employee numbers of all persons present.

When an inmate must be transported to Los Angeles County + University of Southern California (LAC + USC) Medical Center or an alternate hospital for treatment, the watch commander or supervising lieutenant shall arrange to interview the inmate at the hospital.

Completion of Investigations

After interviewing an inmate in incidents involving directed or planned force, the watch commander/supervising lieutenant shall determine who should complete the initial investigation. Sergeants who planned, directed, or participated in the use of force shall not complete the investigation of the incident. If a non-involved sergeant is not available, the initial investigation should be completed by the watch commander/supervising lieutenant. The supervisor who directed the force shall prepare a supplemental report, or memo, detailing their actions for inclusion with the force package.

Except in the case of an IAB Force/Shooting Response Team rollout, in situations involving very large numbers of potential witnesses, the watch commander or supervising lieutenant shall determine the appropriate scope of the witness canvass that would be necessary to sufficiently document the force incident.

In cases where a supervisor has reviewed video of an incident and determined that there is evidence of apparent misconduct, or it appears that a Department member failed to make proper notifications of the incident, the watch commander/supervising lieutenant shall determine the nature and seriousness of the matter. The watch commander/supervising lieutenant shall then contact the unit commander, who shall decide if an administrative or criminal investigation is warranted, including the necessity for an immediate response by IAB or ICIB. If an administrative or criminal investigation is initiated, then the force investigation will be conducted as part of that investigation. If it is determined that an administrative or criminal investigation is not warranted, then the force investigation shall be completed by the watch commander/supervising lieutenant. If an involved employee is not allowed to view video of an incident due to possible misconduct, the watch commander/supervising lieutenant shall notify the member he or she may be subject to an investigation.

Force Packages

The watch commander/supervising lieutenant shall prepare and submit a force package to the unit commander for all reviews of force not conducted by an IAB Force/Shooting Response Team as soon as possible, but no later than 21 days after the incident, unless otherwise directed. In reviewing Department members’ force reports, the watch commander/supervising lieutenant shall determine whether the reports reflect individual perceptions and recollections and do not contain language or verbiage that would suggest

inappropriate collaboration. The watch commander/supervising lieutenant is responsible for detailing the results of his or her review and recommendation as to whether further action or investigation is warranted in the appropriate section of the SH-R-438S.

The force package shall include the following items:

- “Supervisor’s Report, Use of Force” (SH-R-438S)
- Copy of SH-R-49 and related supplemental reports and/or memos
- Copy of in-service rosters for the concerned shift(s)
- Documentation showing suitable treatment from qualified medical personnel was sought and/or received
- Photographs and/or video recordings of inmate’s injuries or areas of alleged injury (copies of booking photographs may also provide excellent documentation)
- Copies of any recorded interviews conducted by supervisors during the investigation
- Any related material which is deemed significant or serves to further document the incident, such as dispatch or complaint telephone tapes, other photos, etc.
- The video and related material shall be placed in a 6” x 9” manila envelope. A “Use of Force Package - Attachments” label shall be affixed on the top, front of the envelope. The label itemizes related material and identifying data from the Use of Force Package
- All videos and related material contained in the envelope shall be labeled with the Use of Force Package URN

Requesting an IAB Force/Shooting Response Team

The watch commander/supervising lieutenant is responsible for making an immediate verbal notification to the on call IAB lieutenant in any of the following situations:

- Hospitalizations due to injuries caused by any Department member
- Skeletal fractures caused by any Department member
- All large party situations where category 2 or 3 Force is used
- Injury or complaint of injury to a person's head, or neck area, resulting in medical evaluation and/or treatment, following contact with any Department member. (This does not apply to contamination due to the use of Departmentally approved chemical agents)
- All head strikes with impact weapons
- Kick(s) to an individual’s head with a shod foot
- Knee strike(s) to an individual’s head
- Any situation wherein a Department member pushes, shoves, takes down, or otherwise causes a person to hit their head against a hard object (e.g., bench, concrete floor, wall, door jamb, jail bars, etc.)

- Any death following a contact with any Department member
- All inmate deaths
- Any of the above uses of force witnessed by a Department member applied by personnel from another law enforcement agency involved in an operation with Department personnel

The IAB lieutenant shall determine whether the response of an IAB Force/Shooting Response Team is appropriate. If a response team is to be sent, the IAB lieutenant shall direct the watch commander/supervising lieutenant as to whether to conduct an inmate interview.

In any situation in which an IAB Force/Shooting Response Team responds to conduct a force review, the watch commander/supervising lieutenant shall cooperate with and assist team personnel in conducting the review. Neither the watch commander/supervising lieutenant nor the sergeant shall conduct an inmate interview unless directed to do so by the IAB lieutenant. A unit-level force package shall not be submitted on any force incident which is documented by IAB Force/Shooting Response Team personnel who have responded to the scene.

The watch commander/supervising lieutenant shall make an immediate verbal notification to the unit commander of any incident requiring an IAB Force/Shooting Response Team response. (Refer to MPP section 3-10/130.00_"Activation of an IAB Force/Shooting Response Teams.") The watch commander shall respond to the location when an employee discharges a firearm, whether intentional or unintentional.

Unit Commander's Responsibilities

The involved employee's unit commander shall verbally notify the Department duty commander or involved employee's Division commander who shall then respond to the location (if within Los Angeles County) when the employee, on or off duty, intentionally discharges a firearm at a person, whether or not anyone is hit, as well as to any type of shooting by the employee which results in a person being hit. Exceptions must be approved by the involved employee's division chief or division director.

The unit commander shall ensure that preliminary data is entered into the Preliminary Data Entry (PDE) system within the first 24 hours of the force incident, or as soon as possible thereafter.

Force Packages

The unit commander shall promptly evaluate all force packages and the watch commander/supervising lieutenant's findings concerning the use of force. The unit commander shall determine if further action or investigation is necessary.

In determining if further action or investigation is necessary, the unit commander shall consider:

- The tactics leading up to the use of force
- Whether the reports and witness statements are complete and consistent
- Whether the reports reflect individual perceptions and recollections and do not contain language or verbiage that would suggest inappropriate collaboration
- If there are unexplained injuries to the inmate against whom force was used or injuries to the head, eyes,

throat, spine or groin areas

- If the inmate was in restraints when force was applied
- If the objective evidence corroborates any allegations of unreasonable force by the inmate
- Whether only authorized tactics, equipment and devices were used in accordance with Department policies and procedures.

There shall be a presumption that further investigation is necessary if an inmate sustains unexplained injuries or there is evidence that head strikes were used by Department members (whether by fists, knees, feet, or weapons) against a handcuffed inmate.

If further investigation is warranted, the unit commander may either initiate an administrative investigation or request an investigation by the ICIB, or both. The unit commander shall ensure that the member(s) who used force are notified as soon as possible in any case requiring further investigation.

Unit commanders shall hold supervisors accountable for the quality and timeliness of their investigations.

The unit commander shall ensure that unit-level force packages are completed, reviewed/approved, and processed in a timely manner. The unit commander shall ensure that unit personnel utilize a tracking system in order to track force packages.

The unit commander shall ensure that completed/approved force packages are either submitted to the Discovery Unit, or forwarded to division, as required below. Force packages not submitted to the Discovery Unit within 60 days will be considered overdue.

Involved employees are entitled to a copy of the completed SH-R-438S. The unit commander shall ensure that the involved employee(s) receive a copy, if so requested.

Use of Force Analysis

It is imperative that leaders of the Los Angeles County Sheriff's Department be personally informed about issues involving the use of force.

Whenever a Department supervisor or manager prepares or receives an analysis, the concerned unit commander shall ensure that a copy of any analysis on systemic issues regarding use of force investigations or use of force trends in the unit commander's facility is delivered to the Office of the Sheriff and the Office of the Assistant Sheriffs.

To honor the Department's commitment to transparency, the concerned unit commander shall also ensure that a copy of the analysis also is delivered to the Office of the Inspector General (OIG), and the Law Enforcement Division chief in the Office of the Los Angeles County Counsel.

Commander's Responsibilities

The facility's commander shall review all use of force incidents. The commander shall note their concurrence with the unit-level force review on the documents. In the event that the commander does not concur, they may specify to the unit commander the additional steps necessary to satisfactorily complete the package and,

when warranted, request an administrative and/or criminal investigation. If the commander concurs but would like an additional review, they may request to have it scheduled by the Custody Force Review Committee (CFRC) if it has not already been scheduled, refer to CDM section, 7-07/020.00 Custody Force Review Committee.

Evaluations of force incidents should be reviewed as follows:

- All Category 1 Force cases and Category 2 cases that do not meet the criteria for a roll-out by the CFRT should be reviewed by a least one commander in Custody Services Division
- All allegations of force should be reviewed by at least two commanders in Custody Services Division

All Category 3 Force cases should be reviewed by the Executive Force Review Committee.

• 7-07/005.00 Video Review and Advisement

The accuracy of reports, Department member statements, and other official documentation is essential for the proper administration of justice and complying with the Department's obligation to maintain full and complete records of enforcement and investigative activities. Investigators, supervisors, prosecutors, and other officials rely on complete and accurate records to perform their essential duties and responsibilities. This includes amendments and supplemental reports when additional information or clarification is available due to the existence of video recordings. Any review of a recording by a Department member shall be documented in their reports.

SEPARATION OF INVOLVED OR WITNESSING PERSONNEL

Any review of a recording by a Department member should not be undertaken in the presence of another Department member, excluding uninvolved supervisors, if practical. Department members shall be admonished to write independent use of force reports, and, to practical extent, should be separated until they have completed their reports.

BODY WORN CAMERAS (BWC)

Department members are permitted to view their own recordings of Non-Categorized, Category 1, or Category 2 use of force incidents prior to submitting a written report, in accordance with the procedures delineated in Custody Division Manual (CDM) section 3-06/055.15, “Body Worn Cameras.” In accordance with that section, Department members shall not view BWC recordings of Category 3 force incidents without the proper authorization, as specified in that section. Department members shall document in their written report whether or not they viewed their own recordings.

VIEWING OF OTHER DEPARTMENT MEMBERS’ BWC RECORDINGS OR FIXED VIDEO SURVEILLANCE/CLOSED CIRCUIT TELEVISION (CCTV) RECORDINGS

Prior to viewing other Department members’ BWC recordings or any CCTV recording of a force incident, Department members shall prepare and submit all necessary written reports to the handling sergeant. After the sergeant has reviewed the first reports and any separate supplemental reports of the force incident and concluded that there is no such evidence of apparent misconduct or a failure to make proper force reporting

notifications, the sergeant shall provide involved Department members the opportunity to review the recorded incident for the purposes of refreshing their memory. The sergeant shall allow the Department member to read the video advisement below prior to the Department member's viewing of the additional recordings. Once the additional BWC or CCTV recordings have been reviewed, personnel will have the opportunity to prepare a supplemental report stating that they observed the video and that it either refreshed their memory, adding any corrective language, or that the original written statements were accurate.

Should the review enable a Department member to provide greater clarity to any incident based upon additional recollection or perception of specific actions, the member shall prepare a separate supplemental report. Any additional information should be added with transitional language such as, "After reviewing video of the incident, additional details are noted as follows…"

Because Department personnel are required to provide a written account of their actions prior to viewing other BWC or CCTV recordings, the Department will not assume an adverse inference when personnel amend or supplement their reports if additional BWC recordings or CCTV video review prompts further recollection of incident details. Whether an adverse inference should be drawn from an amendment or supplement will depend upon the facts and circumstances in each case.

VIDEO ADVISEMENT

Prior to reviewing other Department members' BWC recordings or any CCTV video recording, Department members shall read the following advisement, as established in Manual of Policies and Procedures section 3-10/115.00, "Video Review and Advisement":

You are about to viewa video recording. It is important to understand that while this recording depicts visual information from the scene, the human eye and brain could perceive some things in stressful situations differently than a camera records them, so this photographic record may not reflect howthe involved personnel actually perceived the event.

The recording may depict things that personnel did not see or hear. Personnel may have seen or heard things that were not recorded by the camera. Depending on the speed of the camera, some action elements may not have been recorded or may have happened faster than personnel could perceive and absorb them. The camera has captured a 2-dimensional image, which may be different from a person's 3-dimensional observations. Lighting and angles may also have contributed to different perceptions.

This recording is being shown in order to facilitate recollection of the incident. Video images are only one piece of evidence to be considered in reconstructing and evaluating the totality of the circumstances. Some elements may require further exploration and explanation before the investigation is concluded.

ADDITIONAL ADVISEMENT TO PERSONNEL INVOLVED IN RECORDED INCIDENT:

If the video appears to showsome details of the incident differently from what you recall, you should note those differences in your report.

- **7-07/010.00 Custody Force Response Team**

The goal of the Custody Force Response Team (CFRT) is to ensure high quality force investigations through incident oversight and investigative evaluation; however, the CFRT's involvement in reviewing incidents shall not delay the Department's force investigation.

The CFRT is comprised of sergeants, designated to respond to specific force incidents, where they shall monitor various aspects of the inquiry including but not limited to, interviewing participant employees, inmates, and witnesses, examining any video or evidence and monitoring the facility supervisor as they conduct their inquiry.

CFRT Notification

Watch commanders shall make immediate verbal notification to the CFRT lieutenant whenever any of the following force incident criteria are present:

- Significant inmate injuries as a result of employee contact or alleged contact
- Significant employee injuries as a result of inmate contact
- Taser use
- Carotid restraint
- Total Appendage Restraint Procedure (TARP) application
- All inmate extractions during which force is used
- Assaults on staff involving a use of force
- Emergency Response Team (ERT) activations during which force is used
- Personal weapons used, resulting in significant inmate injury
- Impact Weapon/shod foot used resulting in inmate injury
- Any head strikes, including the head striking any fixed/hard object
- Watch commander discretion
- On any force incident when Internal Affairs Bureau responds and handles (notification only)

Note: *Significant injuries consist of more than minor redness, swelling, or bruising. Complaints of pain will not be considered notification criteria unless the complaint is regarding the head, neck, spine, or may possibly be indicative of an internal injury.*

In addition, watch commanders may notify the CFRT lieutenant whenever he or she believes that the investigation of a force incident requires additional oversight and expertise.

All notifications shall be made through Sheriff's Information Bureau: (213) 229-1700.

CFRT Response

The CFRT lieutenant shall evaluate the information and determine if a response is appropriate and, if so, shall notify the unit commander or his designee that the CFRT shall oversee the force investigation and assign a response team sergeant to act as an on-scene resource, provide information, guidance, analysis and recommendations.

In the course of reviewing the incident, the response team sergeant may give specific direction to the handling supervisor, if appropriate. The facility supervisor has the primary responsibility of handling and documenting the force incident; however, the CFRT has the authority to take control and assume responsibility for the investigation. In the event of policy violations the CFRT lieutenant may initiate a request for an administrative (internal) investigation, through proper channels.

In examining force incidents, response team sergeants shall pay particular attention to events that precipitated the use of force and the tactics used. In incidents where multiple employees are participants, additional focus shall be placed on the actions of responding personnel and the tactics involved in their engagement.

Unit Commander Duties

The unit commander shall forward the completed Use of Force package to the Custody Training and Standards Bureau (CTSB) captain no later than 30 days after the incident. The force investigation will then be scheduled for a CFRC review hearing. Refer to Custody Division Manual (CDM) section 7-07/020.00, “Custody Force Review Committee,” for further information.

When an unforeseen circumstance interferes with a unit’s ability to meet the above stated time lines, the unit commander shall advise the CFRC chairperson (commander) and formally request an extension in writing, explaining the reason for the delay.

• 7-07/020.00 Custody Force Review Committee

The Custody Force Review Committee (CFRC) is comprised of three (3) commanders assigned to Custody Services Division. One commander will be appointed as chairperson. Additionally, a member of the Office of the Inspector General (OIG) will participate as a monitor and provide input. The goals of the CFRC are to evaluate the force applied within custody facilities, the quality of use of force investigations, and the effectiveness of supervision in their units; however, the Custody Force Response Team's (CFRT) involvement in reviewing incidents shall not delay the Department’s force investigation.

The CFRC should review:

- All Category 2 force incidents which require a CFRT roll-out, should be reviewed by the CFRC.
- Any grievance in which force is alleged to have been used in retaliation against an inmate. CFRC shall review the grievance at its next meeting, or the meeting thereafter, following the unit commander's approval of the disposition. The review shall be performed for the purpose of assessing the corectness of the unit commander's evaluation of the grievance.

Note: Any exemptions from review by the CFRC must have prior approval from the CFRC chairperson.

Any unexplained tactical decisions pertaining to uses of force or any discrepancies among witnesses and/or evidence found by the reviewing commander(s) or committee, should be refferred back to the incident investigator. The referral for additional investigation to the incident investigator, should be in writing, via the facility's incident commander. Results of the additional investigation should be reported in writing to the reviewing commander(s) or committee.

In addition, the CFRC can review incidents at the request of a unit commander, or based on factors such as an increase in force incidents by facility, shift, or employee.

The CFRC will schedule completed force packages for review and will require the unit commander (or their designee), the supervisor completing the investigation, and the approving watch commander to attend. They shall be prepared to discuss specifics of the force incident, answer questions about the incident and the force review, and justify their recommendations regarding the incident. The CFRC shall review the force incident as a whole, including the events which precipitated the use of force and any prevention efforts (if applicable), as well as the quality of the force review. The handling CFRT sergeant will present the basic facts of each incident and will act as a subject matter resource.

The CFRC chairperson shall report the committee's findings, including recommendations, to the specific unit commander via memorandum. Recommendations to debrief involved and/or uninvolved personnel, provide additional training, or conduct counseling shall be included in the committee's memorandum. Exemplary performance or conduct shall also be acknowledged and appropriate commendations recommended.

The unit commander shall evaluate the committee's findings, act on their recommendation(s), document their actions, address any disagreements, and report back to the committee within 30 business days.

If the CFRC determines the force incident may have involved a violation of Department policy, the specific Manual of Policy and Procedures or Custody Division Manual section(s) shall be cited in the committee’s findings. The CFRC shall order that an administrative investigation be opened and assigned to the appropriate unit, which in the case of Category 2 and 3 force incidents shall be the Internal Affairs Bureau.

When completed, the administrative investigation shall be returned to the respective facility unit commander for disposition. Prior to issuing a Letter of Intent, the unit commander shall report on the findings of the investigation at the next scheduled CFRC session. The disposition shall then be processed through normal channels with the respective Custody Services Division chief having final approval. Discipline imposed as a result of CFRC review can be grieved via the normal grievance process.

Issues concerning tactics, training, and/or policy revisions shall be cited and a memorandum forwarded to the appropriate Department unit/bureau for consideration.

After review by the CFRC, the force package shall be submitted to CFRT for its processing and forwarding to the Discovery Unit.

• 7-07/030.00 Compliance Lieutenant

The Compliance Lieutenant, or their designee, should track the status of all investigations, reviews, and evaluations of all custody use of force incidents, and allegations of force to ensure investigations, reviews, and evaluations are completed appropriately and timely.

The duties of the Compliance Lieutenant's classification shall include the following:

- Possess a thorough understanding of emergency procedures and management of significant incidents;
- Ensure all reports and notifications are accurate and timely;
- Review all Use of Force Packages from line sergeants and lieutenants;
- Review the performance of on-the-scene emergency activities of subordinates, supporting compliance with Department policy and efficient use of resources;
- Conduct administrative investigations on Category 1 uses of force;
- Review all civil claims/lawsuits;
- Review and track all force and administrative investigations;
- Review and analyze inmate injuries for trends;
- Review and analyze inmate grievances for trends;
- Review and analyze timely entries into the Performance Recording and Monitoring System (PRMS) and e-LOTS;
- Timely entry of use of force incident information in the Preliminary Data Entry (PDE) system of PRMS;
- Reconciliation of PRMS and e-LOTS;
- Identify potential at-risk employees as it relates to force, conduct, and inmate grievances;
- Analyze trends and assess potential risk management issues and trends related to use of force, inmate injuries, and other potential areas of liabilities and report those findings directly to the unit commander;
- Mitigate and minimize risks to the Department and personnel through monitoring, evaluating, reporting, and remediating employees' performance;
- Draft, compile, and submit reports, statistics, and analysis as requested by the unit commander, or at the direction of Custody Services Division - Administration;
- Prepare special projects, memoranda, and correspondence as required at the direction of the unit commander and Custody Training and Standards Bureau (CTSB);
- Assist in identifying training issues, specifically at the supervisory level;
- Communicate with his/her supervisors keeping them aware of problems, issues and activities concerning the areas of responsibilities;
- Ensure facility is meeting risk management standards and goals as determined by the Assistant Sheriff.

• 7-08/000.00 Deployment of Special Weapons

In accordance with CDM section 5-01/030.05, “Identification and Classification Symbols for Pregnant Inmates,” and for the purposes of this section, “pregnant inmate” means an inmate that is known to the Department to be pregnant. Inmates known to be pregnant will wear an [REDACTED TEXT] wristband loop along with the [REDACTED TEXT] sub-classification code displayed on the wristband. Their uniform consists of a [REDACTED TEXT] shirt with a [REDACTED TEXT] front side and a [REDACTED TEXT] back side, and [REDACTED TEXT] pants.

The purpose of the deployment of special weapons is to facilitate a safe and effective response to situations that may jeopardize the life and safety of personnel or inmates and/or the security and operations of custody facilities. Approval from the watch commander, incident commander, or higher authority in the chain of command is required prior to the deployment of special weapons within custody facilities. Only Department-authorized special weapons may be deployed.

Consistent with these objectives, the following shall apply:

- Strict control of special weapons shall be maintained, with the ultimate responsibility for their use resting with the unit commander;
- The unit commander shall ensure watch commanders are aware of all Department policies concerning the use of special weapons;
- Authorization for the deployment of special weapons can only be given by the watch commander, incident commander, or higher authority in the chain of command;
- During circumstances when an inmate poses an imminent threat of inflicting serious injury to any person, qualified personnel may use designated special weapons without direct supervision. In all other instances, authorization from a sergeant or a supervising line deputy acting in the capacity of an Emergency Response Team (ERT) leader must be obtained prior to the use of special weapons;
- Members will be considered qualified to use a special weapon only after attending, and successfully completing, a training class on that weapon presented by the Custody Training and Standards Bureau; in no instance will authorization be given for the use of these weapons by personnel who are not qualified to use them;
- Deputy personnel, when encountering a situation demanding deployment of special weapons, shall immediately notify the watch commander or incident commander of the circumstances, and request deployment of special weapons. The watch commander or incident commander shall immediately review the situation and provide further direction based upon this assessment;
- Special weapons maintained at each unit shall be stored in the armory and/or other secured area (meeting the specifications of an armory) determined by the unit commander;
- To facilitate an immediate special weapon response in areas where a response would otherwise be delayed, unit commanders may pre-authorize the deployment of special weapons on a routine basis. Any non-temporary, routine deployments shall be designated in a facility unit order;
- Cleaning of special weapons is to be accomplished in similar fashion as are other Department weapons. Maintenance and repairs will be performed by the range staff, armories, and weapons training staff. Unit personnel will not normally be required to break down or “field strip” these weapons, except as required for cleaning purposes;
- Absent circumstances that justify the use of deadly force, personnel shall not use special weapons

against an inmate known to be pregnant;

- Any use of a special weapon in custody shall be reported as a “Significant Incident.” Notifications and reports shall be made pursuant to the Custody Division Manual (CDM) section 4-07/010.00 "Notification and Reporting of Significant Incidents" and the Department's Manual of the Policy and Procedures (MPP) use of force policies.

• 7-08/010.00 Authorized Special Weapons

The following list constitutes the less lethal special weapons and chemical agents (and the policies governing their use) which can be deployed pursuant to the Custody Division Manual (CDM) section 7-08/000.00, "Deployment of Special Weapons":

WEAPON	POLICY
Chemical Agents	CDM 7-05/000.00 "Chemical Agents" MPP 5-06/040.45 "Use of Chemical Agents"
Aerosol Chemical Agents • MK-46 • OC/CS Aerosol Grenades	CDM 7-05/010.00 "Aerosol Chemical Agents"
Pepperball Launchers	CDM 7-08/020.00 "Pepperball Launchers"
Baton Launchers	CDM 7-08/060.00 "Baton Launching Weapon Systems" MPP 5-06/040.15 "Baton Launching Platforms"
Baton Munitions	CDM 7-08/040.00 "Specialty Impact Munitions"
Less Lethal Grenades	CDM 7-08/050.00 "Less Lethal Grenades"
Fabrique Nationale Herstal 303 (FN 303)	CDM 7-08/090.00 "Less Lethal Launchers"

NOTE: Both the TASER and the Mark 9 shall not be classified as a Special Weapon and may be carried by all personnel in compliance with CDM section 7-08/030.00, "Electronic Immobilization Device (TASER) Procedures" and 7-05/010.00, "Aerosol Chemical Agents." For a list of approved chemical agents by manufacturer and model, contact the Uniform and Safety Committee.

These weapons and chemical agents are considered less lethal. However, their potential to inflict serious or fatal injuries in certain circumstances must not be dismissed.

Members will be considered qualified to use these weapons only after attending, and successfully completing, a training class presented by the Custody Training and Standards Bureau (CTSB).

Members shall be recertified annually with each special weapon by their respective training unit. Members are prohibited from using any special weapon unless they have been recertified.

Any additional special weapons and/or munitions considered for use within custody shall be evaluated by CTSB in conjunction with the Training Bureau Weapons Training Unit. Prior to use within any custody facility, additional weapons and/or munitions shall be approved by the Assistant Sheriff of Custody Operations.

• 7-08/020.00 Pepperball Launcher

The Pepperball launcher is a less lethal weapon for use in a wide variety of tactical applications encountered within custody. The purpose of this weapon is to facilitate a safe and effective response to situations which may jeopardize the life and safety of personnel, inmates, and/or the security of the facility.

Authorization for the deployment of a Pepperball launcher can only be given by the watch commander/incident commander or higher authority in the chain of command. Authorization for the use of a Pepperball launcher can only be given by a supervisor of a rank no less than sergeant, or by a senior deputy acting in the capacity of an emergency response team leader (refer to Custody Division Manual [CDM], section 7-08/000.00, "Deployment of Special Weapons").

In no instance shall authorization be given for the use of Pepperball launchers by anyone other than authorized personnel. All members utilizing Pepperball launchers shall do so only when fully justified, and in conformance with Department use of force policies and CDM section 7-08/000.00, "Deployment of Special Weapons."

Members will be considered qualified to use the weapon only after attending, and successfully completing, a training class presented by the Custody Training and Standards Bureau (CTSB).

There are two tactical applications for the Pepperball launcher:

- First, it may be used as an area treatment device to deploy chemical agents. When used in this manner, the launcher will be pointed toward a solid object, such as a ceiling or wall, and is effective at distances up to 150 feet;
- Second, it may be used as a direct fire weapon against an individual. When used in this way, the launcher may be fired directly at a target at a minimum distance of three feet. The weapon shall be aimed at the abdominal area, or below, of a potential target. The intended target zone for the Pepperball launcher is low center mass, unless the situation dictates otherwise (i.e. obstructed target area, alternate targets such as arms, hands, legs). Personnel discharging these weapons shall avoid deliberately targeting the head, neck, or spinal column unless the situation dictates the use of deadly force. In such instances, personnel will be held accountable for their decision to use deadly force in accordance with relevant Department policies including, but not limited to, Manual of Policy and Procedures (MPP) section 3-10/030.00, "Unreasonable Force," MPP section 3-10/100.00, "Use of Force Reporting Procedures," and CDM section 7-06/000.00, "Use of Force Reporting Procedures."

The Pepperball launcher shall not be altered or modified in any way. Only approved munitions shall be fired from this weapon. All repairs to the weapon shall be made by the Department armorer.

Authorized Pepperball launchers are as follows:

- SA-200
- Custom Carbine SX
- Custom Carbine TX
- Full Tactical Carbine (FTC)
- Tippman FT-12
- FN 303

FN 303 munitions are specific to the FN 303 and cannot be used in any other Pepperball launcher. Likewise, standard Pepperball munitions cannot be used in the FN 303.

• 7-08/030.00 Electronic Immobilization Device (TASER) Procedures

The TASER is a less lethal hand held electronic immobilization device used for controlling assaultive/high risk persons.

The purpose of the TASER is to facilitate a safe and effective response to situations which jeopardize the life and safety of personnel, inmates, the public, and/or the security and operations of custody facilities.

The TASER can be deployed on a routine basis with prior approval from the unit commander. If a TASER has been deployed, the sworn personnel issued the TASER shall be authorized to use it in compliance with the Department's use of force policies and training.

Deputies shall carry the TASER on their support side (opposite duty firearm) in a holster. The weak side draw or cross draw methods are both acceptable.

All sworn personnel utilizing this weapon must do so when fully justified, and in conformance with:

- Department Manual of Policy and Procedures (MPP) sections, 5-06/045.00 through 5-06/045.14.
- Sworn personnel will be considered qualified to use the weapon only after attending, and successfully completing, the Department's TASER training program presented under the direction of the Custody Training and Standards Bureau (CTSB)
- **Custody assistants working in a Custody Services Division facility are not authorized to utilize TASERs. This also applies to custody assistants who may have completed the Department's TASER training program for use within other divisions of the Department**
- Custody assistants who have completed the Department's TASER training program and are assigned to work in a Court Services Division lock-up or assigned as Patrol Operations station jailers may utilize TASERs in conformance with the Department's policy and procedures, all applicable Patrol Division Orders, and Court Services Division Manual section 1-04/030.00, "Conducted Electrical Weapon (C.E.W.)"
- Departmentally approved TASERs may be purchased by sworn personnel
- Personally owned TASERs may be carried only after the approval of their unit commander, inspection by CTSB, and successful completion of the Department's TASER training program
    - Personally owned TASERs shall be numerically identifiable and available for computer download upon the request of a supervisor or during regular download intervals as defined in CDM section 7-08/030.05, "TASER Download Procedures"

In addition to the above procedures, sworn personnel utilizing this weapon in a Custody Services Division facility shall abide by the following:

- At the beginning of every shift, deputies assigned to the TASER should remove the cartridge and display the electrical arc of the device in order to test the function of the TASER. This test shall be done out of the sight of inmates and in a safe manner. The result (ex: Taser tested successfully by Dep. Smith (#601010) at 0611 hours in the staff station.) shall be logged in the e-UDAL/UDAL in the "Additional

Information" section

- Any additional discharges of the TASER shall also be logged in the e-UDAL/UDAL along with the reason for the discharge (ex: Taser successfully tested by Dep. Smith (#601010) at 1114 hours in the staff station re: new battery)

- If time and circumstances allow, deputies shall give a verbal warning prior to using the TASER on an inmate. Warnings shall be made in accordance with MPP section 5-06/045.09, "CEW Warnings and Time to Comply."
- If a verbal warning to the inmate does not result in compliance, or the situation escalates (and time and circumstances allow), deputies may, but are not required to, remove the cartridge from the front of the TASER and display the electrical arc in view of the inmate, in an effort to gain voluntary compliance. If the TASER is utilized in the above manner, and the TASER is not subsequently applied to the inmate, the operator shall verbally notify their immediate supervisor of the permanent rank of sergeant (or higher)
  - If the supervisor determines that verbal warnings or the displaying of the electrical arc resulted in a prevented use of force, this shall be documented per CDM section 7-01/010.05, "Reporting Prevented Uses of Force"
- In any incident involving a crime report, including any in-custody death associated with the use of a TASER, the used TASER cartridges, wiring, and probes (after removal of the probes by medical personnel) shall be retained and booked as evidence

Any individual subjected to an application of the TASER, in either the "probe" or the "touch/drive stun" mode, shall be taken to a medical facility, for assessment, appropriate medical treatment and/or removal of the probes.

Except in emergent circumstances, the TASER should not be applied to the following or used in any other situation where there is a reasonably foreseeable likelihood of severe injury or death. In the extraordinary instance that Department personnel feel compelled to utilize the TASER in the following circumstances, the conduct of the involved personnel shall be evaluated in accordance to the Use of Force policy with sound tactical principles.

- Handcuffed persons
- Persons detained in a police vehicle
- Persons detained in any booking or holding cell
- Persons in control of a motor vehicle
- Persons in danger of falling or becoming entangled in machinery or heavy equipment which could result in death or serious bodily injury
- Persons near flammable or combustible fumes
- Persons near any body of water that may present a drowning risk
- Persons known to have a pacemaker or known to be pregnant

TASERs shall not be used against inmates in the following situations:

- When an inmate is only resistive, and no longer assaultive or a danger to others
- When custody personnel have specific knowledge that the inmate is known to suffer from medical conditions that may be aggravated or affected by such device
- In a manner that contradicts the manufacturer’s recommendations or Department training. Department

provided TASER training shall govern in the case of a conflict between Department training and manufacturer's recommendations.

When time and circumstances permit, an inmate's medical records should be checked before a TASER is used against the inmate. A TASER should not be used if it is contra-indicated in the inmate's medical records unless it is necessary to prevent imminent loss of life or serious bodily injury.

• 7-08/030.05 TASER Download Procedures

TASER download software shall be kept on a computer that is readily available at all times to the watch sergeant, watch commander, or any supervisor. The download cable(s) shall also be available for use at any time. After each use of the TASER, or at the discretion of any supervisor, a TASER shall be downloaded.

Each facility/unit shall develop a schedule that ensures that every TASER in their facility (working or not) shall be downloaded by the seventh day of every month. Each facility shall outline its plan in the form of a Unit Order. A notation shall be made in the watch commander's log to document when the downloads take place. It shall be the responsibility of each Department member who carries a personally owned TASER in a jail facility to ensure that the TASER is downloaded timely each month.

If any irregularities, such as the date resetting to 1/1/2000, are detected during a download, they shall be reviewed by the watch sergeant, watch commander, or any other designated supervisor. This irregularity usually reflects a connection problem. If this problem continues on a monthly basis contact the facility training staff, Custody Standards and Training Bureau (CTSB), or TASER International Customer Support (800-978-2737) for further diagnostics.

The individual(s) designated to conduct the regularly scheduled TASER downloads shall also check the functionality of all TASERCAMS. This will be done by removing the cartridge and placing it away from the Taser. The operator will point the TASER in a safe direction and take the weapon off safe. A test count to five will be conducted, and then the trigger will be pulled to allow for a five second cycle. Once the cycle is complete another test count of five will be conducted. Once this is complete the TASER will be made safe. This test incident will be downloaded and viewed to ensure the device is capturing the pre-incident, the incident, and post incident. If the incident is not captured in its entirety, contact TASER International Customer Support to ascertain the problem. If the TASER is functioning correctly load the weapon and return it to the line for deployment. If there is a problem with the TASERCAM only, remove the TASERCAM and insert a DPM (power source). This will allow the TASER to stay in service if the camera needs to be sent out for repairs.

TASER downloading shall only be done by qualified personnel. All TASER downloads shall be kept in a shared file on the unit's appropriate computer drive.

• 7-08/040.00 Specialty Impact Munitions

Authorized specialty impact munitions are less lethal crowd control and individually targeted ordnances which are fired from the 40mm baton launching system and the .68 caliber Fabrique Nationale Herstal 303 (FN303) Less Lethal Launcher. The following weapons and munitions are approved for use within custody:

Weapons:

- Penn Arms, Model 1377, multi-launcher
- Defense Technology, Model 1325, rifled single shot, full stock launcher
- FN303 Less Lethal Launcher
- Defense Technology 40 MM Tactical 4-Shot Launcher, Model 1377

Munitions:

- 40B (containing .60 caliber rubber balls)
- 40F (containing 3 foam batons with a height of 1.0 inch and a diameter of 1.4 inches)
- eXact iMpact XM 1006 (silver aluminum casing containing 1 projectile consisting of a plastic body and a foam sponge nose with a height of 2.48 inches and a diameter of 1.6 inches)
- Extended Range eXact iMpact XM 1006 (black aluminum casing containing 1 projectile consisting of a plastic body and a foam sponge nose with a height of 2.40 inches and a diameter of 1.6 inches)

- Muzzle Blast “CS” (Powder Dispersion Round)
- Muzzle Blast “OC” (Powder Dispersion Round)
- FN303 fires a .68 caliber fin stabilized projectile with a payload of .78 grams. There are two rounds authorized to be used with the FN303. The duty round, which is filled with O.C. (pava powder) and the inert powder round that may be used for training purposes

These munitions are designed as tools that may be utilized during tactical entries and special operations that may be encountered within Custody Services Division facilities.

The FN303 may be utilized as an area treatment device to deploy chemical agents and as a direct fire weapon against an assaultive and/or high risk individual. When used as a direct fire weapon, the FN303's maximum effective range against a point target is 50 meters (164 feet). The minimum standoff distance is three (3) feet. Personnel discharging this weapon shall avoid deliberately shooting anyone in the head, neck, or spinal column unless the situation dictates the use of deadly force. In such instances, personnel will be held accountable for their decision to use deadly force in accordance with relevant Department policies including, but not limited to, Manual of Policy and Procedures (MPP) section 3-10/030.00, "Unreasonable Force," and MPP section 3-10/100.00, "Use of Force Reporting Procedures."

The intended target zone is low center mass, unless the situation dictates otherwise (i.e., preferred area is obstructed, other areas of the body may be targeted back and arms). Warning shots shall not be fired under any circumstances. Personnel should always be aware of their backdrop and if the target is obstructed. See Custody Division Manual section 7-08/090.00, "Less Lethal Launcher."

The Extended Range eXact iMpact XM 1006 shall not be used to engage targets that are at a distance of less than thirty three (33) feet, absent of life threatening situations, and shall be limited to outdoor and/or long distance applications only. Although classified as less lethal weapons, their potential to inflict serious injuries cannot be dismissed. Due to this potential, absent life threatening situations, personnel firing munitions shall

avoid deliberately shooting anyone in the head, neck, or spinal column, or at distances of less than five (5) feet. The intended target zone for eXact iMpact munitions is low center mass, unless the situation dictates otherwise (i.e., recommended target area is obstructed, other areas of the body may be targeted such as back or hands). Personnel shall always be aware of the backdrop when engaging a target.

40B (.60 caliber rubber ball) rounds shall not be fired at anyone above the knees unless there are life threatening circumstances. These rounds are designed to be skip fired or direct fired at or below the knees of an intended target. They shall not be used to fire warning shots under any circumstances.

The purpose of these munitions is to facilitate a safe, effective, response to situations that may jeopardize the life and safety of our personnel, inmates, and/or the security and operation of a facility.

The goals of deploying specialty impact munitions are for the protection of life and property, and the restoration of order in a custody facility.

Any use of Specialty Impact Munitions must be in accordance with manufacturer's recommendations as referenced in Departmental training.

Personnel will be considered qualified to use the weapons systems only after attending, and successfully completing, a training class presented by the Custody Training and Standards Bureau. Refer to CDM section 7-08/000.00, "Deployment of Special Weapons." All personnel utilizing these weapons systems shall do so only when fully justified, and in conformance with:

- The Department's Manual of Policy and Procedures use of force policies,
- The Custody Division Manual, section 7-08/000.00, "Deployment of Special Weapons,"
- Specialty impact munitions shall only be used as part of a tactical plan, and shall not be used against passive resisters, or to punish an inmate.

• 7-08/050.00 Stinger Grenades

The stinger (sting ball) grenade is designed as a less lethal weapon for use in a wide variety of tactical applications encountered within the Custody Services Divisions.

The purpose of this device is to facilitate a safe and effective response to situations which may jeopardize the life and safety of personnel, inmates, and/or the security and operations of the facility.

The Model 15 RP (Rubber Pellet Only) Stinger Grenade manufactured by Defense Technology is the only approved stinger grenade for use in the Custody Services Divisions. No other versions of the Model 15 Stinger Grenade are approved for use, including the Model 15 RP/CS and the Model 15 RP/OC.

The deployment of this grenade is an aggressive and decisive action that can help achieve the goal of protection of life and property, and the restoration of order. In no instance will authorization be given for the use of these weapons by other than authorized personnel. Refer to Custody Division Manual, section 7-08/000.00, "Deployment of Special Weapons." All members utilizing this weapon shall do so only when fully justified, and in conformance with the Department's use of force policies and section 7-08/000.00 of the Custody Division Manual, "Deployment of Special Weapons."

Members will be considered qualified to use the weapon only after attending, and successfully completing, a training class presented under the direction of the Custody Training and Standards Bureau.

All personnel throwing this grenade shall wear a safety glove and a helmet with face shield or safety goggles. If the safety pin is removed and the need to deploy no longer exists, personnel shall not replace the stinger grenade pin back into the spoon handle. Personnel shall take the stinger grenade to a safe location, in close proximity, (each facility shall create a Unit Order, designating safe locations within or near the facility that are deemed safe for disposing of live Stinger grenades) and detonate it.

Stinger grenades that do not detonate shall be disposed of by contacting the LASD Arson Explosives Bureau; [REDACTED TEXT].

• 7-08/060.00 Baton Launching Weapon Systems

The Baton Launching Weapon System is designed as a less lethal specialty impact weapon. There are three authorized baton launching weapon configurations: the Defense Technology, Model #1325 and #1425, rifled single shot, full stock launcher, and the Penn Arms, Model #1377, multi-launcher.

The weapons are designed to be utilized during tactical entries and special operations which may be encountered in the Custody Services Divisions.

Although classified as less lethal weapons, these systems are considered to be firearms and their potential to inflict serious or fatal injuries cannot be dismissed. Due to this potential, other options should be given serious consideration prior to their use. In addition, these weapons shall not be employed against inmates during inmate extractions, unless they are armed or pose a substantial threat of inflicting serious bodily injury upon any person. Personnel discharging these weapons shall avoid deliberately shooting anyone in the head, neck, or spinal column unless the situation dictates the use of deadly force. Warning shots shall not be fired under any circumstances.

The purpose of these weapon systems is to facilitate a safe and effective response to situations which jeopardize the life and safety of personnel, public, inmates, and/or the security and operations of a custody facility.

The deployment of these weapons is a decisive action that can help achieve the goal of protection of life and property, and the restoration of order in custody facilities. In no instance will authorization be given for the use of these weapons by other than authorized personnel. Refer to Custody Division Manual (CDM), section 7-08/000.00, "Deployment of Special Weapons." All members utilizing this weapon system shall do so only when fully justified, and in conformance with the Department's use of force policies and CDM section 7-08/000.00, "Deployment of Special Weapons."

Members will be considered qualified to use the weapon only after attending, and successfully completing, the required training class presented by the Custody Training and Standards Bureau (CTSB).

• 7-08/070.00 Rubber Ball Blast Grenade

The Rubber Ball Blast Grenade is designed as a less lethal weapon for use as an aid during dynamic entries, distraction and/or disorientation, and crowd management situations.

The purpose of this device is to facilitate a safe and effective response to situations which may jeopardize the life and safety of personnel, inmates, and/or the security and operations of the facility.

The use of this device is an aggressive and decisive action that can help achieve the goal of protection of life and property, and the restoration of order. In no instance will authorization be given for the use of these weapons by other than authorized personnel.

Refer to Custody Division Manual (CDM) section, 7-08/000.00 “Deployment of Special Weapons.” All members utilizing this weapon shall do so only when fully justified, and in conformance with:

- Department Manual of Policy and Procedures (MPP) section, 3-01/025.00 “Use of Force"
- CDM section, 7-08/000.00 “Deployment of Special Weapons"

Members will be considered qualified to use this weapon only after attending, and successfully completing, a training class presented under the direction of the Custody Training and Standards Bureau (CTSB).

All personnel throwing this device shall wear a safety glove and a helmet with face shield or safety goggles.

• 7-08/080.00 Accountability of Special Weapons

Unit commanders shall ensure that facility unit orders establish procedures for the storage, issuance, reissuance, accountability, maintenance, and periodic inventory of all weapons (e.g., lethal, less lethal, electronic immobilization devices [TASERs], etc.) and safety equipment (e.g., helmets, vests, shields, etc.) stored at, or issued from, the facility. The unit orders shall include guidelines for:

- Use of inventory sheets for the armories and special weapons storage areas
- Complete list of all special weapons with corresponding serial numbers
- Complete list of all safety equipment with corresponding serial numbers
- Expiration dates of ordnance, when applicable
- An inventory every shift of any weapons, ordnance, and safety equipment available for immediate use
- Checklists for the inspection of functionality, for each type of weapon system stored at the facility
- Procedures for the removal of any unserviceable weapons and safety equipment
- Procedures for the disposal and replacement of any items that have expired
- Procedures for missing weapons, ordnance, and safety equipment

- Accountability procedures for tracking the issue and return of weapons, ordnance, and safety equipment used after emergency responses and training
- Unit level maintenance and cleaning
- Department level maintenance and cleaning
- Current rosters of persons qualified to use each weapon system

For accountability of personally-owned TASERs, refer to Manual of Policy and Procedures (MPP) section 5-06/040.95, "Electronic Immobilization Device (TASER) Procedures," and Custody Division Manual (CDM) 7-08/030.00, "Electronic Immobilization Device (TASER) Procedures."

Each facility or bureau shall designate a weapons and safety equipment coordinator to manage the provisions of this section.

Inventory, Control, and Accountability of Aerosol Chemical Agents

Facility and Bureau Responsibilities

Inventory and control of chemical agent canisters shall be the responsibility of each unit. Each unit shall permanently apply a tracking number to any canister that is not factory serialized, and track all canisters through the Mission Critical Management (MCM) system.

Each unit shall create and maintain an inventory control log of all chemical agent canisters issued by the Department.The following shall be documented for each employee in the training unit log:

- Employee's name and employee number
- The canister's serial number or unit-assigned tracking number
- The date of issuance
- The date of disposal
- The log shall be maintained either on paper or electronically and each employee's information shall be retained until the employee leaves the unit

Facility and bureau coordinators shall:

- Maintain a reasonable number of replacement canisters
- Establish a procedure for the replacement of unserviceable canisters
- Provide instructions for supervisors on how to exchange chemical agent containers during non-business hours
- The date of disposal
- Replace and dispose of all canisters that are used, expended, damaged, or expired
- Update the log with the date and time of use of any large capacity canister (i.e., Mark 9 and Mark 46)
- Report any discrepancies to their immediate supervisor

Each unit shall establish procedures for the temporary issuance and tracking of chemical agent canisters to personnel not assigned to custody (e.g., patrol, courts, etc.) who are working inside security.

Responsibility of Personnel

Personnel shall not bring either personally owned or unregistered canisters inside security.

Personnel shall only use chemical agents for the purpose they are intended. Personnel using chemical agents shall immediately report their use as required by CDM 7-06/000.00 "Use of Force Reporting Procedures."

Authorized Chemical Agents

All departmentally-issued OC spray canisters, once logged as required above, are authorized to be used within custody. All chemical agent canisters designed to contain less than 2oz. of agent are intended for a single use. All personnel should obtain a replacement following any use.

Chemical agent canisters designed to contain 4oz. of agent may be used multiple times, with all uses totaling no more than twelve (12) seconds of burst in aggregate. Personnel shall obtain a replacement if their assigned 4oz. canister is empty or it is not possible to determine if it contains enough agent for future use.

Supervisor Responsibility

When a supervisor (sergeant or above) is informed of the use of or damage to any chemical agent canister, the supervisor shall collect any used or damaged canisters and issue a replacement.

The supervisor shall notify the facility or bureau coordinator of the following:

- The date and approximate time of use
- The serial number or facility tracking number of the canister
- The name and employee number of the employee to whom the canister is assigned

Notification

Each facility shall post signs at facility entry points and provide notification alerting outside personnel not to bring unregistered chemical agent canisters inside security. This shall include instructions on how to obtain a temporary canister.

• 7-08/090.00 Less Lethal Launcher (FN303)

The Fabrique Nationale Herstal 303 (FN303) Less Lethal Launcher is designed for use in a wide variety of tactical applications encountered within custody and is designated as a special weapon. The purpose of this weapon is to facilitate a safe and effective response to situations which may jeopardize the life and safety of personnel, inmates, and/or the security of the facility.

The deployment of the FN303 Launcher is a decisive action that can help achieve the goal of protection of life and property, and the restoration of order in custody facilities. Authorization for the deployment of special weapons can only be given by the watch commander/incident commander or higher authority in the chain of command. Authorization for the use of special weapons can only be given by a supervisor of a rank no less

than sergeant, or by a senior deputy acting in the capacity of an emergency response team leader (refer to Custody Division Manual section, 7-08/000.00, "Deployment of Special Weapons"). In no instance will authorization be given for the use of this weapon to anyone other than qualified personnel. All members utilizing this weapon shall do so only when fully justified, and in conformance with the Department Manual of Policy and Procedures use of force policies and CDM section 7-08/000.00, "Deployment of Special Weapons."

There are two tactical applications for this weapon. First, it may be used as an area treatment device to deploy chemical agents. When used in this manner, the launcher will be aimed and pointed toward a solid object, such as a ceiling or wall, and is effective at distances up to 164 feet. Second, it may be used as a direct fire weapon against an assaultive and/or high risk individual.

The maximum effective range of the FN303 against a point target is 50 meters (164 feet). The minimum standoff distance is three (3) feet. Personnel discharging this weapon shall avoid deliberately shooting anyone in the head, neck, or spinal column unless the situation dictates the use of deadly force. The intended target zone is low center mass, unless the situation dictates otherwise (i.e. if the preferred target zone is obstructed, other areas of the body, such as the back and arms may be targeted instead). Warning shots shall not be fired under any circumstances. Personnel should always be aware of their backdrop as well as if their intended target is obstructed.

The FN303 fires a .68 caliber fin stabilized projectile with a payload of .78 grams. There are two rounds authorized to be used with the FN303. The duty round, which is filled with O.C. (pava powder) and the inert powder round that may be used for training purposes.

Members will be considered qualified to use the weapon only after attending, and successfully completing, a training class presented by the Custody Training and Standards Bureau.

The FN303 Launcher shall not be altered or modified in any way. Only approved munitions shall be fired from this weapon. All repairs to the weapon shall be made by the Department armorer