

Section 2 - Inmate Health Care and Hygiene

• 5-02-010 Pill Call, Sick Call, and Doctor's Line

Reference: CDM 4-05.000, 5-03.050, and 7-02/020.00; PDC South Unit Order

3-05-100, 6-03-040, and 6-03-050

PURPOSE OF ORDER:

The purpose of this order is to establish procedures for securing and operating an efficient pill call, sick call, and doctor's line at Pitchess Detention Center (PDC) South Facility.

SCOPE OF ORDER:

This order applies to all personnel assigned to, and working at PDC South Facility.

ORDER:

PILL CALL TIMES

Pill call for inmates going to court and assigned to a work detail will begin at approximately 0330 hours. This will allow for prescribed medication to be dispensed prior to the inmates leaving the facility.

Once morning count clears, at approximately 0730 hours, day shift pill call will begin. Inmates in the upper compounds (Adam, Boy, and Eddie) will receive their medication from medical staff in the PDC South Facility clinic. Inmates in the lower compounds (Henry, King, and Mary) will receive their medication from medical staff in the clinic annex trailer located in Eddie compound. Security for the clinic annex trailer in Eddie compound shall be provided by the deputy assigned as Eddie compound rover.

Pill call scheduled at 1200, 1500 (after count clears), and 1900 hours will be conducted at, or as close as possible to, the scheduled time.

In the afternoon, pill call for all PDC South Facility compounds will be conducted at the PDC South Facility clinic pill call window. The clinic movement deputy/officer will supervise and coordinate pill call with medical staff. This includes the monitoring of inmates brought into the administrative building hallway pursuant to PDC South Facility unit order 3-05-100, "Main Control and Admin Hallway Security."

Deputy personnel shall provide security for medical personnel by standing in close proximity to nursing staff for the duration of pill call. It is the responsibility of medical services personnel to ensure each inmate has placed

the provided medication in their mouth. However, custody personnel shall assist medical personnel by making a reasonable effort to ensure the inmate ingests the medication. In the event the inmate becomes insubordinate and refuses to allow the medical or custody personnel to confirm the consumption of medication, custody personnel shall follow the notification procedures as outlined in the Custody Division Manual (CDM) section 7-02/020.00, "Handling Insubordinate, Recalcitrant, Hostile, or Aggressive Inmates."

For a detailed list of responsibilities for the clinic security personnel see PDC South Facility unit orders 6-03-040, "Clinic Deputy", 6-03-050, "Clinic Movement Deputy/Officer", and CDM 5-03/050.00 "Access to Health Care."

SELF MEDICATIONS

Inmates taking self-medications will remain in general population and should not be housed in any pill call assigned barracks. Inmates on self-medication will have their prescriptions renewed and checked by medical staff for compliance following AM shift's initial count. The medical staff will advise the clinic deputy which inmates need to be seen.

SICK CALL NURSE CLINIC

All inmates shall have access to immediate medical attention for emergent, life threatening situations and/or potentially infectious conditions (e.g., Methicillin-resistant Staphylococcus Aureus [MRSA]). For all other medical situations, inmates shall be allowed to sign up for "sick call/nurse clinic" (the terms "sick call" and "nurse clinic" are synonymous) on a daily basis, Monday through Friday.

The following procedures shall be followed when allowing inmates to sign up for and be seen at sick call:

- Sunday through Thursday - the PM shift watch deputy shall distribute a sick call sign-up sheet for each barrack with the PM wristband count purges at 2200 hours. Compound personnel will announce sick call sign-up at the conclusion of the nightly 2200 hour wristband count and leave the sign-up sheet in the barrack.
- PM shift personnel shall collect all of the sign-up sheets and deliver them to the South Facility front desk/main control (South David) for the EM shift watch deputy to collect and process.
- The EM shift watch deputy shall make one copy of every sign up sheet and ensure the original and copies are available for the day shift clinic movement deputy/officer.
- The day shift clinic movement deputy/officer shall pick up the original sign-up sheets and the copies. The originals will be given to the PDC South Facility medical staff and the copies will be kept by the clinic movement deputy/officer.
- When the medical staff advises they are ready for sick call, the clinic movement deputy/officer shall request for each compound officer to escort the inmates in their respective compound that signed up, to the clinic. The clinic deputy will note on their copy of the sign-up sheet whether the inmate was seen, and if not, document why.
- Once all barracks have been escorted to sick call, the clinic deputy shall return their copies of the sick call sheets, with their notations, to the watch deputy to be kept on file in the watch deputy file cabinet.

DOCTOR'S LINE

Doctor's line will occur Monday through Friday. Inmates may request to see a doctor while at sick call. If

medical staff determines that the inmate requires a doctor's attention, the inmate will be informed of their appointment and instructed to return to their barrack. A doctor's line list will be given to the clinic movement deputy/officer, who shall then inform all compound officers to have inmates with appointments, report to the clinic. The doctor's line will be supervised by the clinic deputy to ensure all inmates report as scheduled.

DENTAL LINE

Dental line will occur Monday through Friday and inmates will follow the same procedures described for doctor's line to arrange for dental appointments.

PSYCHIATRIC CARE

All inmates who require psychiatric care will be processed per CDM Section 4-05/000.00, "Behavioral Observation and Mental Health Referral Reports."

Any immediate and/or concerning, psychiatric issues shall be addressed by documenting the concerning behavior on a Behavioral Observation and Mental Health Referral (BOMHR) form, and escorting the inmate to the clinic for evaluation. An immediate notification to the watch sergeant shall be required for any inmate who requires a BOHMR and evaluation.

• 5-02-020 Access to Health Care Urgent Health Care Lists

Reference: CDM 5-03/010.00, 5-03/050.00

PURPOSE OF ORDER:

The purpose of this order is to establish guidelines governing the documentation of urgent health care lists for all inmates housed at Pitchess Detention Center (PDC) South Facility.

SCOPE OF ORDER:

This order applies to all personnel assigned to, and working at PDC South Facility, specifically those assigned to the PDC South Clinic, the Access to Care (ATC) lieutenant and the shift watch commanders.

ORDER:

Health care passes refer to any order to deliver an inmate for health care services. It is the responsibility of custody personnel, medical personnel, and mental health personnel to work together to ensure all inmates receive appropriate health care services within a reasonable time period. Access to health care shall not be denied or discouraged by any Department or non-Department member.

URGENT HEALTH CARE PASSES

It shall be the responsibility of the ATC lieutenant (or the on-duty watch commander if the ATC lieutenant is not available), at the beginning of each shift, to contact the nursing supervisor (or designee) to identify inmates with pending urgent health care passes. The clinic officer shall obtain the number of inmates that medical staff have identified as being on an urgent pass list. The number of inmates shall be forwarded to the shift watch commander for inclusion into the daily watch commander's log.

The watch commander's log entry shall be made even when there are no urgent health care passes reported, along with the name and employee number of the notifying health care person.

At the end of each shift, the clinic officer will obtain from medical staff, the number of inmates who were seen and treated.

If any inmate(s) did not receive treatment, the inmate's name, booking number and reason for non-treatment (e.g., court, work crew, etc.) shall be forwarded to the watch commander for documentation in the watch commander's log. The assigned watch commander on the following shift shall be responsible for ensuring inmates on the health care pass list are seen as soon as possible. Inmates seen or additional attempts to facilitate urgent health care passes shall be noted in the watch commander's log.

The ATC lieutenant shall be advised should there be continuing delays, issues or concerns affecting the timely care of inmates who do not receive urgent medical care in a timely manner.

Facility line personnel assigned to areas with inmates in possession of urgent health care passes shall ensure the identified inmate is notified of the pass. Urgent health care passes shall be considered a high priority. Custody personnel shall ensure the inmate is brought to the designated location immediately, or as soon as duties permit.

Should the identified inmate refuse an urgent health care pass, refusal protocols, as outlined in Custody Division Manual (CDM) section 5-03/050.00, "Refusals" shall be adhered to.

URGENT HEALTH CARE PASSES DURING FACILITY LOCKDOWN

When possible, and if the situation permits, the watch commander (or in his absence the watch sergeant) shall notify the PDC South Clinic nursing supervisor prior to any planned facility lockdown. The watch commander (or ATC lieutenant) shall adhere to the same procedures whenever possible as outlined above for all urgent health care passes during a facility lockdown.

• 5-02-030 Response to Inmate Medical Emergencies

Review Date: 09-21-13

PURPOSE OF ORDER:

This order establishes the policy and guidelines for custody personnel and medical personnel during an inmate medical emergency “man down” at PDC South Facility.

SCOPE OF ORDER:

This order applies to all personnel assigned to or working in any capacity at PDC South Facility.

ORDER:

In the event of a medical emergency involving an inmate, the following shall apply:

1. Custody personnel shall notify both Main Control and the clinic deputy via a department issued hand held radio or any other available means necessary, of the nature of the emergency, location of the inmate, and to request for medical personnel to respond to the location.
2. The watch deputy shall verify both the clinic deputy and medical personnel are notified.
3. The clinic deputy shall escort the medical personnel to the location and provide assistance as requested and/or needed per medical personnel
4. Medical personnel shall provide directions and supervision when custody personnel render assistance in transporting an inmate on a gurney.
5. The watch deputy shall be responsible for requesting the fire department paramedics when necessary.
6. If the inmate is emitting blood or other bodily fluids, personal protective equipment (PPE) shall be obtained from the medical personnel ***PRIOR*** to handling the inmate.

Refer to Custody Services Division Manuel (CDM) section

5-03/060.00, *Response to Inmate Medical Emergencies” for further information.

• **5-02-035 Automatic External Defibrillators**

Reference: CDM 3-14/090.05

PURPOSE OF ORDER:

The purpose of this order is to establish the procedures for custody personnel conducting and documenting once daily readiness checks and periodic physical inspections of the Automated External Defibrillators (AED)

at Pitchess Detention Center (PDC) South Facility. PDC South Facility is responsible for nine (9) ZOLL AED Plus® units and accessories issued by Correctional Health Services (CHS).

SCOPE OF ORDER:

This order applies to all personnel assigned to or working at PDC South Facility.

ORDER:

Personnel assigned to AM shift in each area where an AED is located shall conduct a daily readiness check of the unit by physically inspecting the unit to ensure the green check symbol appears in the status indicator window. The daily inspection of each unit shall be reported to the AM shift watch deputy or desk officer, unless otherwise noted. The watch deputy shall ensure the appropriate daily inspections were conducted and make the appropriate entry into the electronic Uniform Daily Activity Log (eUDAL).

ROVING PATROL (ADAM) UNITS

Personnel assigned to an Adam unit shall each have one (1) AED and one (1) additional set of pediatric pads stored in a hard side case to prevent damage. The daily inspection shall be conducted by the deputy assigned to each Adam unit.

AEDs shall not be left in unassigned vehicles. If an Adam unit is not staffed, the assigned AED shall be stored in the in/out shack.

EDDIE COMPOUND

One (1) AED and one (1) set of additional pediatric pads are mounted in the Eddie compound staff station. The daily inspection shall be conducted by the Eddie rover deputy.

ELMER T. JAFFE VISITOR'S CENTER (MAIN VISITING)

One (1) AED and one (1) set of additional pediatric pads are mounted on the wall in the metal detector room. The daily inspection shall be conducted by visiting personnel on Saturday, Sunday and visiting holidays. The daily inspection shall be conducted by the field crew main visiting deputy during the week, when staffed.

RANCH KITCHEN

One (1) AED is mounted on the wall in the PDC ranch kitchen security office. The daily inspection shall be conducted by the ranch kitchen deputy.

LAUNDRY

One (1) AED is located at the entry to the PDC laundry security office and (1) AED is located at the mezzanine

staff station. The daily inspection shall be conducted by laundry security personnel, except on days when the laundry facility is closed.

NURSERY

One (1) AED is in the PDC ranch nursery office. The daily inspection shall be conducted by PDC ranch field personnel, except on weekends and visiting holidays.

PDC South facility training staff shall conduct periodic inspections of AEDs and accessories every six (6) months. The inspection shall be reported to the watch deputy to be entered into the Uniform Daily Activity Log (UDAL) book.

Damaged or inoperable AEDs shall be reported to the watch commander. When an AED requires maintenance, battery replacement or exchange, contact PDC South Facility training personnel who shall coordinate with PDC South Facility operations personnel to request AED servicing from CHS. Line personnel shall not contact CHS executives directly. Only AEDs approved by the Department and procured by CHS shall be utilized.

Refer to Custody Division Manual (CDM) section 3-14/090.05, "Mandatory Inspection of Automated External Defibrillators (AED)" for further information.

The ZOLL AED Plus® Automated External Defibrillator Operator's Guide can be accessed from the following share file link: [REDACTED TEXT]

• 5-02-040 Transportation and Security Procedures For Inmate Medical Treatment

Review Date: 03-04-21

PURPOSE OF ORDER:

The purpose of this order is to establish procedures for the documentation of requests by medical staff, and notifications made to supervisors, for the transportation and security of inmates for medical treatment in county or private hospitals.

SCOPE OF ORDER:

This order applies to all personnel assigned to, and working at Pitchess Detention Center (PDC) South Facility.

ORDER:

INITIAL DUTIES AND REQUIRED NOTIFICATIONS

A nurse who requests for an inmate to be transferred from PDC South Facility to another location, for medical reasons, shall do so by completing a "Medical Report" form (PHR-200). The nurse shall sign the form and present it to the clinic deputy who shall forward it to the watch deputy or desk officer. The deputy shall sign the form, provide a copy to the requesting nurse, and arrange for the transfer of the inmate per the request. The deputy who accepts the form from the nurse is responsible for the transfer of the inmate.

[REDACTED TEXT]

The watch commander shall be notified prior to an inmate being transferred from the facility to a hospital. The following information shall be documented in the PDC South Facility Desk Log:[REDACTED TEXT]

The watch commander shall be provided with a copy of the inmate's [REDACTED TEXT]

WATCH COMMANDER'S RESPONSIBILITIES

It is the watch commander's responsibility to review the inmate's information packet and decide if [REDACTED TEXT] The watch commander, or their designee, shall notify the law enforcement agency having jurisdiction over the hospital facility where the inmate will be treated. The agency shall be notified a jail inmate will be there under the direct supervision of deputy personnel. This notification shall be made at the beginning of each shift as long as the inmate remains at the hospital facility. [REDACTED TEXT]

At least once per shift, duties permitting, the watch commander will designate a sergeant to respond to the hospital and check on the status and security of the inmate and deputies. This response shall be documented in the watch commander's log.

HOSPITAL SECURITY DEPUTY DUTIES

If the designated deputies are the initial deputies responsible for transporting/responding to the hospital, those deputies shall first respond to the watch commander and receive an information packet to include: [REDACTED TEXT]

This information packet shall be taken to the medical facility and remain in the direct possession of all deputy personnel providing security for the inmate. All deputy personnel assigned as the hospital security deputy shall be fully equipped with the following equipment prior to leaving the facility:[REDACTED TEXT]

It is recommended that the deputies transporting the inmate to the hospital advise their facility control and Sheriff's Communication Center (SCC) via radio of their departure, starting mileage and to which hospital they are going.

Any transportation of inmates by deputy personnel shall be accomplished with two (2) fully armed deputy personnel. Transportation shall be by means of a marked, black and white, Department vehicle equipped with a security cage. Transporting personnel shall not under any circumstances stop for personal errands while transporting an inmate.

Upon arrival at the hospital, the deputies shall contact the watch commander or their designee and report the following:[REDACTED TEXT]

All deputies assigned to make relief for hospital security shall report to their facility and confirm the hospital and room number of the inmate. All relief shall only be made in person. The relief deputies shall verify the required documents are present. The inmate's restraints and surroundings should also be searched. The deputies shall then make contact with the watch commander once relief is complete. Deputies shall contact the watch commander (or their designee) at least once during their shift and provide a status update (preferably near the middle), and at any time there is a significant change in the inmate's condition. These notifications shall be documented in the watch commander's log.

Deputy personnel shall maintain direct supervision of the inmate in their custody at all times and shall not be distracted by televisions or reading material. While at the hospital, deputies providing security shall ensure the inmate is secured to the bed with handcuffs and/or the issued leg chains. Should it become necessary for the inmate to move from the bed due to medical treatment, exercise, or to use the restroom, the deputy must evaluate the inmate's medical condition and consider the appropriate restraint method to secure the inmate.

Only the following methods of restraint shall be used:

- Handcuffing in front or back
- Waist chain with one or both hands cuffed
- Leg chains

In circumstances where one of the inmate's appendages is injured the deputy should consider moving the inmate in a wheel chair or gurney while the inmate is handcuffed or shackled to the device.

Deputy personnel shall not allow the inmate to make or receive phone calls or visits from friends or family at the hospital. If friends or family attempt to visit the inmate, the deputy shall advise them the inmate may not receive visits. If the visitors refuse to leave, the deputy shall notify hospital security immediately and ensure the visitors are escorted or removed from the hospital. It is recommended the deputy request the inmate be relocated to prevent family and friends from returning and advise hospital security and staff the inmate's location is to remain confidential. The inmate shall not be allowed to communicate with other patients sharing the same hospital room.

If an attorney or clergy attempts to visit the inmate, the deputies shall delay the visit and notify their facility supervisor immediately. Their supervisor shall inform the attorney or clergy the visit shall be allowed only with the understanding that the deputies will remain in close proximity and confidentiality may not be possible. Deputy personnel providing security for inmates with contagious illnesses shall follow directions given by medical staff in order to limit exposure.

EMERGENCY SITUATIONS AND ESCAPES

In the event of any emergency or other unusual circumstance, it shall be the responsibility of assigned deputies to notify their facility supervisor as soon as possible. Personnel encountering emergency situations occurring within a hospital, which would require the inmate to be relocated or evacuated (e.g. fire, earthquake, etc.), shall follow the direction of hospital staff.

Inmates that attempt to escape from custody are committing a felony, and deputies shall take immediate

action to capture the inmate. All Departmental policies and procedures governing foot pursuits and the use of force, including the use of deadly force, shall apply. Deputies shall ensure an emergency broadcast is initiated and their facility is notified by SCC. The facility watch commander shall contact the nearest Sheriff's station to have a supervisor respond immediately to the hospital and also ensure a facility supervisor responds to the location.

If the inmate is able to successfully escape from the custody of the assigned deputies, the deputies shall immediately make contact with the first arriving agency police officer, supervisor, or Sheriff's Department responding personnel and provide them with the information packet.

The overall responsibility for apprehending the escaped inmate shall be with the local law enforcement agency. Department personnel and/or the sergeant at the scene of another jurisdiction shall co-locate a command post with the jurisdiction incident commander and assist the field units as directed by the incident commander. All Departmental escape responding and reporting procedures shall apply.

• **5-02-050 Inmate Treatment and Transportation by Paramedic-Ambulance Service**

Reference: CDM 5-03/090.00

PURPOSE OF ORDER:

This order establishes policy and procedures for the summoning of Los Angeles County Fire Department paramedics and the transport of inmates by ambulance.

SCOPE OF ORDER:

This order applies to all personnel assigned to South Facility.

ORDER:

In the event that an inmate receives an injury or is suffering from an illness which requires emergent medical attention and/or transportation (as determined by medical staff), a request for Emergency Medical Services (EMS) will be made in the following manner:

- Medical staff will advise the Clinic Deputy of the need to contact Emergency Medical Services (EMS).
- The Clinic Deputy will obtain the inmates age and the circumstances requiring the need for EMS (ie; heart attack, suspected stroke, seizure, assault).
- The Clinic Deputy will contact the Watch Deputy, provide the above obtained information, and have the

Watch Deputy call EMS.

- The Watch Deputy will call the Los Angeles County Fire Department (LACoFD) Central Dispatch at 661-259-2111, and request EMS to respond. All ambulance requests in an emergent situation will be made by Fire Dispatch. In most cases, the responding ambulance company will be American Medical Response (AMR).
- Upon confirmation that EMS has been notified and is responding, the Clinic Deputy will notify the medical staff and fill out a "PDC-South Ambulance Transportation" log sheet. This form can be located in the PDC - South share files and once completed will be given to the Watch Deputy to be kept on file. The "PDC - South Ambulance Transportation" form will serve to log arrival times of EMS and persons involved in the treatment of the inmate requiring care.
- The Watch Deputy will notify the Watch Sergeant and Watch Commander of the situation.
- Immediately upon notifying the Watch Sergeant/Watch Commander, the Watch Deputy shall prepare two complete "Medical Transportation Packets," consisting of the following documents:
 - A printout of the injured/ill inmates SI01, MC01, IC01, IC02, IC10 and IC12 AJIS screens.
 - A printout of the inmates RAPS1 history.
 - A photograph of the inmate, obtained from LACRIS.
 - A "Hospital Security Assessment Form" (located in the South Facility share files).
- Once EMS has arrived, treated, and is ready to transport the injured/ill inmate, the Watch Deputy will provide the transporting deputies a copy of the "Medical Transportation Packet."

Inmates transported off this facility via ambulance, will be accompanied by two armed Deputies. One Deputy will ride guard in the ambulance and the other will follow in a marked Sheriff's vehicle, unless otherwise authorized by the Watch Commander.

The escorting Deputies will update the Watch Commander of their arrival at the hospital and provide an hourly update.

• 5-02-060 Suicide Prevention Program

Reference: CDM 5-07/010.00, 5-07/020.00; 5-11/060.00; CCR Title 15, Section 3031

PURPOSE OF ORDER:

The purpose of this order is to establish guidelines regarding a plan for a suicide prevention program at Pitchess Detention Center (PDC) South Facility.

SCOPE OF ORDER:

This order applies to all personnel assigned to, and working at PDC South.

ORDER:

A serious attempt by an inmate to take their life will often occur when custodial personnel are least likely to discover the inmate's attempt before it is too late. Typically, times for such an occurrence would be at night, immediately following the officer's security check, or when custodial personnel are preoccupied with other duties. Recent studies in the Los Angeles County Jail reveal that over 90% of all completed suicides occurred in the late afternoon and early morning hours.

When an inmate attempts suicide during the day or just prior to the time the officer is scheduled to check the area, the inmate could be purposely trying to be seen and prevented from carrying out a successful suicide. Attempts of this type should be taken seriously and not viewed as just an attempt to get attention. The second attempt could be fatal. Any expression of suicidal actions or thoughts, or any talk of suicide, should be brought to the immediate attention of a supervisor and to medical and mental health staff.

BEHAVIORAL OBSERVATION AND MENTAL HEALTH REFERRAL FORM

PDC South personnel who identify an inmate either through observation, information received from another person (e.g., relative, clergy, etc.) or intake screening, who expresses suicidal ideation by word or by action, or exhibits unusual behavior which could result in a suicide or an attempted suicide, shall complete a Behavioral Observation and Mental Health Referral (BOMHR) (SH-J-407) form. Sections 1 through 6, including the "circumstances" narrative section on the reverse side shall be completed.

In cases where custody personnel believe that the actual act of attempting suicide has not occurred, wherein;

- An inmate commits an act resulting in only superficial "hesitation mark" injuries that are visible
- The severity of the injury does not support a life threatening injury
- The inmate has not displayed the desire to commit suicide

The category, "Threat to Commit Suicide and/or Feigned Suicidal Gestures" shall be selected in section 5, "Suicidal Assessment" of the BOMHR form. The use of this category shall only be authorized by the watch commander. (Refer to Custody Division Manual [CDM] section 4-05/000.00 Behavioral Observation and Mental Health Referral).

If this section is selected, an Incident Report (SH-R- 49) is not required. A Custody Division reference number shall be issued and the BOMHR form shall be the only report, barring any unusual circumstances. The BOMHR form shall accompany the inmate to Mental Health staff, who will make the final determination as to whether the inmate actually attempted suicide.

If mental health personnel later determine that the overt act is a sincere suicide attempt, then the attempt suicide procedures shall apply and all the required reports shall be completed. Mental health personnel will determine the appropriate housing locations.

All personnel shall strictly adhere to CDM section 4-05/000.00, Behavioral Observation and Mental Health Referral, regarding the initiation of the BOMHR form.

JAIL MENTAL EVALUATION TEAM

When a South Facility staff member encounters an inmate whom they feel may need the attention of a mental health specialist, the appropriate Jail Mental Evaluation Team (JMET) shall be notified. JMET referrals shall be logged at the PDC South Clinic. Arrangements shall be made by JMET to interview the inmate in question to assess his mental health needs.

The JMET assigned to PDC facilities can generally be reached Monday through Friday during the early PM shift hours by contacting the North County Correctional Facility's (NCCF) main control.

When the identification of a suicidal or potentially suicidal inmate occurs after hours and JMET is not available to evaluate the inmate, it shall be the responsibility of the watch commander to determine the appropriate method of transportation to the Inmate Reception Center (IRC) for appropriate mental health evaluation.

SUICIDE INTERVENTION

In the event of the discovery of an attempt or completed suicide personnel shall:

- Call for assistance and notify South Facility main control (South David)
- Notify the South Clinic medical personnel and request paramedics if necessary
- Lockdown the immediate area
- Obtain the suicide intervention kit
- In the case of hanging, use the "cut down tool," from the suicide intervention kit to immediately cut down the inmate. The preservation of life should be the primary consideration
- Monitor the inmate's airway, breathing, and circulation
- Render first aid and/or cardiopulmonary resuscitation (CPR) if necessary

Each staff station has been assigned a suicide intervention kit. The suicide intervention kit is contained in a white waterproof container with red stenciling on the sides labeled "SUICIDE INTERVENTION KIT." The suicide intervention kit shall only be removed from the staff station to assist in suicide intervention or during suicide intervention drills. The suicide intervention kit contains the following items:

- Cut down tool - Caution should be exercised whenever the suicide intervention kit is deployed. The cut down tool is a security risk and should be accounted for at all times.
- CPR mask
- Two towels
- Latex gloves

Personnel assigned to the staff station shall inspect the suicide intervention kit at the beginning of their shift to ensure the tamper-resistant tape is intact. This inspection shall be documented in the Uniform Daily Activity Log (UDAL) book. If the tamper-resistant tape is broken or the kit appears to have been opened, notification to a supervisor shall be made. When the suicide intervention kit has been deployed, or has been opened for any reason, the supervisor shall inspect the container to ensure all of the above listed items are present, and apply new tamper-resistant tape.

POST SUICIDE ATTEMPT FOLLOW-UP

Subsequent to an attempted suicide, personnel shall:

- Arrange for the inmate to be escorted to the South Facility medical clinic for evaluation
- Arrange for the inmate to be seen by JMET
- If necessary, transport the inmate to the appropriate hospital designated by medical personnel for further treatment
- After treatment and/or evaluation, escort the inmate to the appropriate housing location as directed by JMET
- Give the inmate a blue wristband marked with an "S" (Suicidal)

REQUIRED REPORTS

- Incident Report (SH-R-49)
- BOMHR (SH-J-407)
- Inmate Injury Report (SH-J-212)
- Special Handling Request (SH-J-181)

Refer to CDM section 4-07/010.00, Notification and Reporting of Significant Incidents.

NOTIFICATIONS OF AN ATTEMPTED SUICIDE

In cases where an inmate has been sent to IRC for a psychological evaluation, and JMET staff determines that an attempted suicide was a sincere attempt, JMET staff shall notify the Twin Towers Correctional Facility (TTCF) watch sergeant of the suicide attempt. The TTCF watch sergeant will call the South Facility watch sergeant and notify him of the change in the inmate's status.

The South Facility watch sergeant shall assign staff to complete a SH-R-49 documenting the inmate's attempted suicide. The South Facility watch sergeant will also provide the TTCF watch sergeant with the uniform reporting number (URN) of that SH-R-49 so TTCF personnel can complete the BOMHR form.

The primary goal of this procedure is the timely and effective handling, treatment, and housing of inmates who attempt suicide and to ensure that the inmate and the BOMHR form remain together from initial observation to final mental health housing, including the medical assessment, during any transportation, and during the mental health assessment.

SAFETY CHECKS

Inmates at South Facility who have been identified as potentially suicidal shall be immediately reassigned to the proper custody facility at the direction of Jail Mental Health Services. During transition, inmates who are suicidal or display suicidal tendencies shall be subject to safety checks conducted every 15 minutes, or more frequently as directed by Jail Mental Health Services. Safety checks shall be conducted at least ten minutes apart from each other.

PERSONAL ITEMS

Inmates classified as "Suicidal" shall not be issued any clothing, bedding, sheets, towels, or t-shirts, or any material which could be used to fashion ligatures. These inmates shall not be issued any personal hygiene or

other items that could be used to self-inflict injury (e.g., combs, razors, etc.).

Deputies shall make every effort to ensure that all items that may be used as instruments for accomplishing suicides are removed from the concerned inmate's environment.

SUICIDE PREVENTION AND INTERVENTION DRILLS

Custody Training Standards Bureau (CTSB) shall conduct random drills of each custody facility in regard to the handling of suicidal inmates and suicide prevention.

The scenarios shall also involve practical applications of first aid and CPR procedures. These drills shall be conducted quarterly and the records shall be maintained at each custody facility's training unit.

CTSB shall also be responsible for the development and routine distribution of instructional bulletins detailing suicide and attempted suicide prevention and handling.

• **5-02-070 Identification and Evaluation of Developmentally Disabled Inmates**

Reference: CDM 5-03/030.00; South Unit Order 5-04-075, 5-04-090

PURPOSE OF ORDER:

The purpose of this order is to establish guidelines for identifying and evaluating developmentally disabled inmates.

SCOPE OF ORDER:

This order applies to all personnel assigned to, and working at Pitchess Detention Center (PDC) South Facility.

ORDER:

Prior to being assigned a living area, inmates shall be pre-screened by a medically licensed person or by trained non-medical staff. The screening is to find any conditions or illnesses in the following areas:

- Medical and mental health
- Developmental disabilities
- Communicable diseases

South Facility does not house inmates with medical/mental health illnesses, developmental disabilities or communicable diseases. Any inmate who is suspected to have, or admits to having any of those listed illnesses and/or conditions shall be immediately escorted to the PDC South medical clinic for additional screening.

PDC South medical staff and the Jail Mental Health Evaluation Team (JMET) will determine if the inmate is to be rehoused pursuant to Custody Division Manual (CDM) section 5-03/030.00, Pre-screening, South Facility Unit Order 5-02-110, Information Concerning Inmates Exposed to or Infected by a Communicable Disease, and South Facility Unit Order 5-02-060, Suicide Prevention Program.

• 5-02-080 Inmate Showering Procedures

Reference: CDM 5-13/040.00; Title 15 Section 1266

PURPOSE OF ORDER:

The purpose of this order is to establish showering procedures for inmates.

SCOPE OF ORDER:

This order applies to all personnel assigned to and working at Pitchess Detention Center (PDC) South Facility.

ORDER:

There are showers located in each barrack at South Facility. The showers are available daily to inmates housed in the barracks between the hours of 0600 (reveille) and 2200 (lights out). Showers will not be allowed during the following times:

- Count time
- Feeding and consumption of inmate meals
- Barrack cleanup time (approximately one hour each morning).

Shower availability shall be logged in the Uniform Daily Activity Log (UDAL), daily, for each barrack.

This Unit Order exceeds the requirements set forth by the California Code of Regulations (CCR) Minimum Jail Standards, Title 15, Section 1266.

• **5-02-085 Inmate Nail Clipper Use**

Reference: CDM 4-111020.00-025.00

PURPOSE OF ORDER:

The purpose of this order is to establish procedures regarding the storage, disinfection, accountability, and distribution of inmate nail clippers at Pitchess Detention Center (PDC) South Facility.

SCOPE OF ORDER:

This order applies to all personnel assigned to and working at PDC South Facility.

ORDER:

Each Compound shall be issued one (1) pair of nail clippers which shall be stored in a plastic container filled with blue Barbicide disinfectant solution (provided by inmate services personnel).

Each nail clipper shall be accounted for by custody personnel assigned to the staff station at the beginning of their shift and document it in the Uniform Daily Activity Log (UDAL).

Inmates using the clippers shall be seated on the front porch area outside the barrack and shall be continually supervised. Only one inmate shall be permitted to sit on the porch when clippers are being used. When the inmate is done, the nail clippers shall be returned to the staff station and placed in the Barbicide solution. The clippers shall be disinfected prior to allowing another inmate to use them.

Due to security concerns and requirements, it is imperative nail clippers are always accounted for. To minimize the possibility of inmates stealing or losing the nail clippers, a check-out sheet shall be completed every time an inmate uses them. Inmates shall be instructed to return the clippers after each use and not give them directly to another inmate.

Compound personnel shall document the check-out time, inmate's name, booking number, housing location, officer/deputy checking the clippers out, and the time clippers were returned on the clipper check-out sheet.

A copy of the clipper check-out sheet shall be kept in the PDC South Facility share files in the following location:

[REDACTED TEXT]

Missing or broken nail clippers shall be documented in the UDAL and replacement clippers shall be requested from inmate services personnel. Broken clippers shall be returned to PDC South inmate services

personnel and shall not be disposed of in the garbage can.

If clippers are missing, compound personnel shall attempt to locate the clippers using the clipper check-out sheet. If the clippers cannot be located, compound personnel shall immediately notify the line sergeant or supervising line deputy and a search shall be initiated.

• 5-02-090 Exchange and Disposal of Used Inmate Razors

Reference: CFR 29 1910.1030(D)(4)(iii)(C); Ca Title 15 1265; Medical Waste Management Act, Section 118280; CCR 5193; South Facility Unit Order 3-03-070, 5-10-010

PURPOSE OF ORDER:

The purpose of this order is to establish guidelines for the safe disposal of inmates' used shaving razors.

SCOPE OF ORDER:

This order applies to all personnel assigned to, and working at, Pitchess Detention Center (PDC) South Facility.

ORDER:

Bloodborne pathogens are defined as pathogenic microorganisms that are present in human blood and can cause disease. These pathogens can be found on used sharp objects such as needles and razor blades. The California Department of Occupational Safety and Health Administration's (Cal/OSHA) bloodborne pathogens standard states: *"Disposal of all regulated waste shall be in accordance with applicable regulations of the United States, and territories"* (Code of Federal Regulations [CFR] 29 1910.1030[D][4][iii] [C]).

Additionally, Cal/OSHA's bloodborne pathogens standard requires that, during use, sharps containers must be *"easily accessible to personnel and located as close as is feasible to the immediate area where sharps are used or can be reasonably anticipated to be found"*.

California Code of Regulations (CCR), Title 15 section 1265 mandates the issuance of shaving implements to inmates in Los Angeles County jail custody. South Facility's inmate services personnel are responsible for the issuance of personal hygiene kits to indigent inmates housed at South Facility. The hygiene kits include one small disposable plastic razor. When an inmate wishes to trade his used razor for a new one, personnel shall visually check each used razor to ensure the blade is intact. Once confirmed, the used razor shall be disposed of, by the inmate, into a biohazard, puncture resistant, sharps container, which shall be available at every staff station and the inmate processing area (IPA).

On a regular, scheduled basis personnel from the inmate services unit shall remove the full used sharps containers, and replace them with new ones. The red plastic biohazard containers are one-time use only containers. The full containers of used razors shall be kept in the locked fenced area in George compound (in front of the visiting area), pending removal by a contracted biohazard disposal company.

PERSONAL PROTECTIVE EQUIPMENT

Safe work practices include the wearing of latex disposable gloves, which shall be provided and utilized by all employees when handling biohazardous waste. The gloves provide protection against direct skin contact with the biohazardous materials. The gloves shall be discarded after each use and shall not be reused.

PERSONNEL TRAINING

Employees performing this procedure will be provided training. The training will include:

- Overview of the program and work practice controls.
- Use of personal protection equipment and limitations.
- Exposure control procedure to minimize exposure
- Concept of universal precaution
- Hands-on training for use of equipment

• **5-02-100 MRSA and Vermin Control Procedures**

Reference: CDM 4-11/020.00, 5-11/030.00, and 5-11/070.00

PURPOSE OF ORDER:

The purpose of this order is to establish guidelines for laundry exchange and cleaning in the event an inmate is identified as having Methicillin-Resistant Staphylococcus Aureus (MRSA) or any similar, contagious, communicable medical condition or infection.

SCOPE OF ORDER:

This order applies to all personnel assigned to, and working at Pitchess Detention Center (PDC) South Facility.

ORDER:

Inmates with vermin or specific communicable medical conditions create the need for special handling of their

clothing. In instances where an inmate has been identified as being infested with vermin or infected with certain infectious diseases, like MRSA, medical staff will be summoned and shall determine if contaminated clothing will be placed in plastic bags. These bags will be taken to the facility laundry where they will be stored with other soiled laundry awaiting transport to Laundry Services for cleaning.

For beds and housing areas of inmates infected with MRSA, the cleaning procedures as outlined in Custody Division Manual (CDM) Section 5-11/070.00, "Guidelines for Limiting the Possibility of Infection by Methicillin Resistant Staphylococcus Aureus (MRSA)" shall be adhered to. All protocols in instances of vermin shall also be adhered to as described in CDM Section 5-11/030.00 "Control of Vermin."

All inmates in the immediate vicinity of, or assigned to adjacent bed areas of those identified with vermin or other infectious diseases, shall:

- Exchange their existing county issued linens and clothing for clean items.
- Scrub and disinfect their entire bed area, including bed frames, mattresses using the provided Citricide solution, or another suitable solution approved by medical services. Allow the Citricide or alternative cleaning solution to remain on areas for ten minutes prior to wiping off with clean towels. In addition to the inmate's bunk, bunks and mattresses located on both sides and in front/back of the contaminated bunk will also be disinfected. Soiled towels will be bagged and left in the Inmate Processing Area (IPA) for transport to Laundry Services for cleaning.
- (For those infected with vermin) Use a specialized delousing shampoo supplied by the medical staff to wash all body hair.
- The inmates shall be re-checked in 48 hours and the previous steps repeated as necessary.

Ensure these procedures are logged in the Uniform Daily Activity Log (UDAL) or electronic Uniform Daily Activity Log (e-UDAL), under "Medical and Psychological Events" (i.e., "0950 hrs - John Doe #1234567 - Treated for MRSA - Clothing Exchanged/Disinfected Mattresses on Bunks 44,45,46,47").

• 5-02-110 Information Concerning Inmates Exposed to or Infected by a Communicable Disease

Reference: Title 15; CDM 4-08/000.00; MPP 5-03/175.25

PURPOSE OF ORDER:

The purpose of this order is to establish guidelines for the distribution of information concerning inmates who have been exposed to, or infected by a communicable disease at Pitchess Detention Center (PDC) South Facility.

SCOPE OF ORDER:

This order applies to all personnel assigned to, or working at PDC South Facility.

ORDER:

PDC South personnel who observe or are informed of activity that may cause the transmission of human immunodeficiency virus (HIV) or acquired immunodeficiency syndrome (AIDS) or other communicable diseases shall take immediate action. The activity shall be documented on an Inmate Incident Report (SH-J-213) and/or Complaint Report (SH-R-49) as appropriate, and a Department of Health Services form, "Request and Decision for HIV Testing (DHS 8459), pursuant to the Department Manual of Policy and Procedures, section 5-03/175.25, "Reporting of Inmate's Exposure to AIDS and Other Communicable Diseases."

The information reported shall remain confidential. All employees shall maintain the confidentiality of inmates' personal information except when disclosure is necessary to obtain medical or psychological care or advice.

If an inmate alleges to be infected with HIV/AIDS he shall be expedited to South Facility's medical clinic. The medical staff at South Facility's medical clinic, upon examination and evaluation, will determine if transportation to Inmate Reception Center (IRC), Twin Towers Correctional Facility (TTCF) or another medical facility is needed. Both medical and custody personnel shall make the necessary notifications and fill out the appropriate forms.

• **5-02-120 Communicable Disease Protective Equipment**

Reference: CDM 3-15/020.00

PURPOSE OF ORDER:

The purpose of this order is to establish information regarding the location and contents of the communicable disease protective equipment kit.

SCOPE OF ORDER:

This order applies to all sworn personnel assigned to, and working at Pitchess Detention Center (PDC) South Facility, in the event they need to contact anyone with a communicable disease.

ORDER:

Pursuant to Custody Division Manual (CDM) Section 3-15/020.00, each Custody Services Division facility shall maintain communicable disease protective equipment kits which shall be strategically located for ease of access by all personnel. These kits are designed to minimize any exposure to communicable diseases as a

result of contact.

A communicable disease protective kit is maintained and kept in the PDC South Facility main armory. The main armory is strategically located in the middle of South Facility, just outside of the number eight (8) gate, allowing employees to quickly access items stored inside. The communicable disease protective kit can be located in the armory in a large paper bag labeled "Disease Equipment."

The protective equipment kit consists of the following:

- One (1) Tychem by Dupont® bio-hazard suits
- Three (3) boxes, each containing ten (10) disposable face masks
- One (1) box containing two hundred (200) disposable gloves
- One (1) box containing fifty (50) disposable paper towels
- Two (2) cans of disinfectant spray
- Ten (10) disposable plastic bags
- One (1) roll of duct tape
- 1 resuscitation mask for CPR use only

The kit and its contents shall be inspected quarterly as part of the regular quarterly armory inventory, and the kit contents shall be rotated/refreshed as needed.

Note: Tychem suits are a special purchase, which go above and beyond the CDM requirements. South Facility possesses several of the suits in the con-ex trailer located behind the armory.
