

Skagit County Sheriff's Office

Custody Policies

INTRODUCTION TO THE MANUAL

OFFICIAL PUBLICATION

This manual is an official publication of the Skagit County Sheriff's Office. It contains general guidelines concerning the employment, transfer, removal, discipline and welfare of employees, and other aspects of employment at the Skagit County Community Justice Center as well as articulating operational responsibilities to Justice Center inmates. It is the intent of this manual to establish policies which will serve as general guidelines to administrative actions, including discipline, for violations of the policies, procedures, and regulations contained in this manual. It is not the intent of this manual to establish promises of specific treatment, any type of employment contract, or any legal obligation. As such, the Sheriff's Office reserves the right to modify, delete or add to any part of this manual at any time at its discretion. The Sheriff's Office may use other means than this document to convey changes in the policies and procedures, including but not limited to all-employee e-mails, postings on bulletin boards, employee letters or other documents/publications. If any provision or application of these policies to any person or circumstance is held invalid, the remainder of the policies or the application of the provision to other persons or circumstances is not affected.

KNOWLEDGE OF THE MANUAL

It is the responsibility of every employee to familiarize him or herself with the content of this manual.

ISSUING THE MANUAL

All employees will sign and date a receipt form upon receiving their manual. Employees are required to read the manual within 30 days of receiving it. After reading the manual the employee will sign a second receipt acknowledging they have read and understand the contents of the manual. Any updates to the manual will be receipted as well. Some employees may be tested by their supervisor to insure they are familiar with particular policies within the manual.

SECURITY OF THE MANUAL

Employees will keep their manuals secure; any information, which could hamper the agency's operations, will be kept strictly confidential. Strict confidentiality is especially important with regard to information on emergency response to criminal activity. Loss of manual or manuals in need of repair will be brought to the attention of the employee's supervisor. Requests for any information contained within this manual to persons outside of Law Enforcement should be directed to the Sheriff.

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CODE OF ETHICS

CODE OF CONDUCT

Like other professions, law enforcement must establish minimum standards of ethical conduct for its incumbents. Since law enforcement encompasses an increasing number of specialists, many of whom are not the traditional commissioned police officer, this policy also is intended to establish expectations of conduct for them. Though the term peace officer is used throughout these Canons and Standard, the term "Sheriff's Office Member" should be understood as being interchangeable with the term peace officer for the purpose of this policy. It is the policy of this office that all members of the Skagit County Sheriff's Office shall be bound by these Standards unless specifically excluded by the nature of the Standard itself, e.g., when the Standard may refer to the exercise of commission authority which some members of this office do not have.

CODE OF ETHICS

As a Law Enforcement Officer, my fundamental duty is to serve mankind; to safeguard lives and property; to protect the innocent against deception, the weak against oppression or intimidation, and the peaceful against violence or disorder and to respect the Constitutional Rights of all men to liberty, equality and justice. I will keep my private life unsullied as an example to all; maintain courageous calm in the face of danger, scorn, or ridicule; develop self restraint and be constantly mindful of the welfare of others. Honest in thought and deed in both my personal and official life. I will be exemplary in obeying the laws of the land and the regulations of the office. Whatever I see or hear of a confidential nature or that is confided in me in my official capacity will be kept ever secret unless revelation is necessary in the performance of my duty. I will never act officiously or permit personal feelings, prejudices, animosities or friendships to influence my decisions. With no compromise for crime and with relentless prosecution of criminals, I will enforce the law courteously and appropriately without fear or favor, malice or violence and never accepting gratuities. I recognize the badge of my office as a symbol of public faith, and I accept it as a public trust to be held so long as I am true to the ethics of the police service.

CODE OF PROFESSIONAL CONDUCT AND RESPONSIBILITY FOR PEACE OFFICERS

PREAMBLE

Whereas, peace officers are vested with a public trust which requires that they consistently demonstrate the highest degree of integrity and good moral character; and Whereas, the need to maintain high standards of moral character, integrity, knowledge and trust requires the establishment of a Code of Professional Conduct and Responsibility for Peace Officers as a matter of the highest significance to the health, welfare and safety of the citizens of this state; and Whereas, the establishment of a Code of Professional Conduct and Responsibility of Peace Officers, which includes Canons of Ethics and minimum Standards, requires the granting of authority to enforce these Standards of professional conduct through disciplinary action as necessary for the protection of the health, welfare and safety of the public; therefore BE IT RESOLVED that the need to maintain high standards of moral character, integrity, knowledge and

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CODE OF ETHICS

trust require that peace officers establish and conform to a Code of Professional Conduct and Responsibility for Peace Officers.

GENERAL STATEMENT

Peace Officers are granted a public trust which requires that they consistently demonstrate the highest degree of integrity. To be worthy of this public trust and to ensure that their professional conduct is above reproach, members of the peace officers profession must not only conform to a Code of Ethics but must also abide by these Canons of Ethics and Ethical Standards which constitute this Code of Professional Conduct and Responsibility as a means of internal regulation. The essence of a profession is that it requires, in addition to prescribing a desired level of performance, established minimum standards of ethical conduct with prescribed rules for internal discipline to ensure compliance. Accordingly, this Code of Professional Conduct and responsibility has been established for the peace officer profession. Nothing in this Code of Professional Conduct and Responsibility for Peace Officers is intended to limit or supersede any provision of law relating to the duties and obligations of peace offices or the consequences of a violation thereof. Whereas these rules specify certain conduct as unprofessional, this is not to be interpreted as approval of conduct not specifically mentioned. Nothing in this Code is intended to limit the authority of this agency to adopt and enforce rules and regulations that are more stringent or comprehensive than those that are contained in this Code of Professional Conduct and Responsibilities for Peace Officers.

DEFINITIONS

This Code of Professional Conduct and Responsibility for Peace Officers is comprised of nine Canons of Ethics, with explanatory statements in the form of Ethical Standards. Examples of Disciplinary Rules and Enforcement Procedures are included as an addendum. Following are definitions of these terms, as used in the context of the code.

"PEACE OFFICER" means a fully commissioned regular or reserve officer, and by extension and where applicable, any other paid or volunteer member of the Skagit County Sheriff's Office.

"CANONS" are statements, which express in general terms standards of professional conduct expected of peace officers in their relationship with the public, the criminal justice system and the peace officer profession. They embody the general concepts from which the Ethical Standards and the Disciplinary Rules are derived.

"ETHICAL STANDARDS" are statements that represent the objectives toward which every peace officer shall strive. They constitute principles that can be relied upon by the peace officer for guidance in specific situations.

"DISCIPLINARY RULES" specify an unacceptable level of conduct for all peace officers, regardless of their rank or the nature of their assignment. Any peace officer who violates any agency rule that applies to these Canons and Standards is guilty of unprofessional conduct, and is subject to disciplinary action. Violation of disciplinary rules requires appropriate adjudication

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and disciplinary action ranging from oral reprimand to termination or criminal prosecution, or other administrative action sanctioned by law, as dictated by the individual case.

"ENFORCEMENT PROCEDURES" are the fundamental rights of an accused officer, which are applicable to a disciplinary investigation or proceeding against the officer.

"ADMINISTRATIVE INVESTIGATION" is an investigation conducted to determine whether an officer has violated any provision of this code, or any agency rule or regulation; or whether an officer is impaired or unfit to perform the duties and responsibilities of a peace officer.

"FORMAL DISCIPLINE" refers to the final adjudication of administrative or disciplinary charges.

CANONS OF ETHICS

CANON ONE Peace officers shall uphold the Constitution of the United States, the State Constitution and all laws enacted or established pursuant to legally constituted authority.

ETHICAL STANDARDS

STANDARD 1.1 Peace officers shall recognize that the primary responsibility of their profession and the individual officer is the protection of the people within the jurisdiction of the United States through upholding of their laws, the most important of which are the Constitution of the United States and State Constitutions and laws derived therefrom.

STANDARD 1.2 Peace officers shall be aware of the extent and limitations of their authority in the enforcement of the law.

STANDARD 1.3 Peace officers shall diligently study principles and new enactments of the laws they enforce.

STANDARD 1.4 Peace officers shall be responsible for keeping abreast of current case law as applied to their duties.

STANDARD 1.5 Peace officers shall endeavor to uphold the spirit of the law, as opposed to enforcing merely the letter of the law.

STANDARD 1.6 Peace officers shall respect and uphold the dignity, human rights and Constitutional rights of all persons.

CANON TWO

Peace officers shall be aware of and shall use proper and ethical procedures in discharging their official duties and responsibilities.

ETHICAL STANDARDS

STANDARD 2.1 Peace officers shall be aware of their lawful authority to use that force reasonably necessary in securing compliance with their lawful enforcement duties.

STANDARD 2.2 Peace officers shall truthfully, completely, and impartially report, testify and present evidence in all matters of an official nature.

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STANDARD 2.3 Peace officers shall follow legal practices in such areas as interrogation, arrest or detention, searches, seizures, use of informants and collection and preservation of evidence.

STANDARD 2.4 Peace officers shall follow the principles of integrity, fairness and impartiality in connection with their duties.

CANON THREE

Peace officers shall regard the discharge of their duties as a public trust and shall recognize their responsibilities to the people whom they are sworn to protect and serve.

ETHICAL STANDARDS

STANDARD 3.1 Peace officers, as professionals, shall maintain an awareness of those factors affecting their responsibilities.

STANDARD 3.2 Peace officers, during their tour of duty, shall diligently devote their time and attention to the effective and professional performance of their responsibilities.

STANDARD 3.3 Peace officers shall ensure that they are prepared for the effective and efficient undertaking of their assignment.

STANDARD 3.4 Peace officers shall safely and efficiently use equipment and material and material available to them.

STANDARD 3.5 Peace officers shall be prepared to and respond effectively to the demands of their office.

STANDARD 3.6 Peace officers, with due regard for compassion, shall maintain an objective and impartial attitude in official contacts.

STANDARD 3.7 Peace officers shall not allow their personal convictions, beliefs, prejudices or biases to interfere with their official acts or decisions.

STANDARD 3.8 Peace officers shall recognize that their allegiance is first to the people, then to their profession and the government entity or agency that employs them.

CANON FOUR

Peace officers will so conduct their public and private life that they exemplify the high standards of integrity, trust and morality demanded of a member of the peace officer profession.

ETHICAL STANDARDS

STANDARD 4.1 Peace officers shall refrain from consuming intoxicating beverages to the extent that it results in impairment which brings discredit upon the profession or their employing agency, or renders them unfit for their next tour of duty.

STANDARD 4.2 Peace officers shall not consume intoxicating beverages while on duty, except to the degree permitted in the performance of official duties.

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STANDARD 4.3 Peace officers shall not use any narcotics, hallucinogens or any other controlled substance except when legally prescribed. When such controlled substances are prescribed, officers shall notify their superior officer prior to reporting for duty.

STANDARD 4.4 Peace officers shall maintain a level of conduct in their personal and business affairs in keeping with the high standards of the peace officer profession. Officers shall not participate in any incident involving moral turpitude.

STANDARD 4.5 Peace officers shall not undertake financial obligations which they know they will be unable to meet and shall pay all just debts when due.

STANDARD 4.6 Peace officers shall not engage in illegal political activities.

STANDARD 4.7 Peace officers shall not permit or authorize for personal gain the use of their name or photograph and official title identifying them as peace officers in connection with testimonials, advertisements for any commodity, commercial enterprise or commercial service which is not the product of the officer involved.

STANDARD 4.8 Peace officers shall not engage in any activity which would create a conflict of interest or would be in violation of any law.

STANDARD 4.9 Peace officers shall at all time conduct themselves in a manner which does not discredit the peace officer profession or their employing agency.

STANDARD 4.10 Peace officers shall not be disrespectful, insolent, mutinous or insubordinate in attitude or conduct.

STANDARD 4.11 Peace officers shall be courteous and respectful in their official dealings with the public, fellow officers, superiors and subordinates.

STANDARD 4.12 Peace officers shall not engage in any strike, work obstruction or abstention, in whole or in part, from the full, faithful and proper performance of their assigned duties and responsibilities, except as authorized by law.

STANDARD 4.13 Peace officers shall maintain a neutral position with regard to the merits of an labor dispute, political protest, or other public demonstration, while action in an official capacity.

CANON FIVE

Peace officers shall recognize that our society holds the freedom of the individual as a paramount precept which shall not be infringed upon without, just, legal and necessary cause.

ETHICAL STANDARDS

STANDARD 5.1 Peace officers shall not restrict the freedom of individuals, whether by detention or arrest, except to the extent necessary to legally or reasonably apply the law.

STANDARD 5.2 Peace officers shall recognize the rights of individuals to be free from capricious or arbitrary acts which deny or abridge their fundamental rights as guaranteed by law.

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STANDARD 5.3 Peace officers shall not use their official position to detain any individual, or to restrict the freedom of any individual, except in the manner and means permitted or prescribed by law.

CANON SIX

Peace officers shall assist in maintaining the integrity and competence of the peace officer profession.

ETHICAL STANDARDS

STANDARD 6.1 Peace officers shall recognize that every person in our society is entitled to professional, effective, and efficient law enforcement services.

STANDARD 6.2 Peace officers shall perform their duties in such a manner as to discourage double standards.

STANDARD 6.3 Peace officers shall conduct themselves so as to set exemplary standards of performance for all law enforcement personnel.

STANDARD 6.4 Peace officers shall maintain the integrity of the profession through complete disclosure of those who violate any of these rules of conduct, violate any law or who conduct themselves in a manner which tends to discredit the profession.

STANDARD 6.5 Peace officers shall have responsibility for reporting to proper authorities any known information which would serve to disqualify candidates from transferring within or entering the profession.

STANDARD 6.6 Peace officers shall be responsible for maintaining a level of education and training that will keep them abreast of current techniques, concepts, laws and requirements of their profession.

STANDARD 6.7 Chief Executive peace officers shall accept the responsibility of utilizing all available resources and the authority of their office to maintain the integrity of the agency and the competency of their officers. These Canons and Ethical Standards shall apply to all legally defined peace officers regardless of rank.

STANDARD 6.8 Peace officers shall assume a leadership role in furthering their profession by encouraging and assisting in the education and training of other members of the profession.

CANON SEVEN

Peace officers shall cooperate with other officials and organizations that are using legal and ethical means to achieve the goals and objectives of the peace officers profession.

ETHICAL STANDARDS

STANDARD 7.1 Peace officers, within legal and agency guidelines, shall share with personnel both within and outside their agency, appropriate information that will facilitate the achievement of criminal justice goals or objectives.

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STANDARD 7.2 Peace officers, whether requested through appropriate channels or called upon individually, shall render needed assistance to any other officer in the proper performance of their duty.

STANDARD 7.3 Peace officers shall within legal and agency guidelines, endeavor to communicate to the people of their community the goals and objectives of the profession, and keep them apprised of conditions which threaten the maintenance of an ordered society.

CANON EIGHT

Peace officers shall not compromise their integrity, nor that of their agency or profession, by accepting, giving or soliciting any gratuity.

ETHICAL STANDARDS

STANDARD 8.1 Peace officers shall refuse to offer, give or receive gifts, favors or gratuities, either large or small, which can be reasonable interpreted as capable of influencing official acts or judgments. This standard is not intended to isolate peace officers from normal social practices, or to preclude gifts among friends, associates or relatives, where appropriate.

STANDARD 8.2 Peace officers shall not consider their badge of office as a license designed to provide them with special favor or consideration.

CANON NINE

Peace officers shall observe the confidentiality of information available to them through any source, as it relates to the peace officer problem.

ETHICAL STANDARDS

STANDARD 9.1 Peace officers shall be aware of and shall meticulously observe all legal restrictions on the release and dissemination of information.

STANDARD 9.2 Peace officers shall treat as confidential the official business of their employing agency, and shall release or disseminate such information solely in an authorized manner.

STANDARD 9.3 Peace officers shall treat as confidential that information confided to them personally. They shall disclose such information as required in the proper performance of their duties.

STANDARD 9.4 Peace officers shall neither disclose nor use for their personal interest any confidential information acquired by them in the course of their official duties.

STANDARD 9.5 Peace officers shall treat as confidential all matters relating to investigations, internal affairs, and personnel.

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MISSION STATEMENT

SKAGIT COUNTY SHERIFF'S OFFICE

MISSION STATEMENT

The Skagit County Sheriff's Office is committed to the safety of the citizens we serve, visitors to our community and our employees.

Professionalism, enthusiasm and integrity shall be our guiding principles in accomplishing the mission.

VISSION

Safety through courage and professionalism.

SKAGIT COUNTY CORRECTIONS: OUR MISSION

To Provide the resident of Skagit County with a jail which follows current high professional standards, allowing inmates quality human existence while awaiting trial or serving a sentence deemed appropriate by our court system.

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Chapter 1 - Role and Authority

Organizational Structure and Responsibility

100.1 PURPOSE AND SCOPE

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

100.2 DIVISIONAL RESPONSIBILITY

The Sheriff is responsible for administering and managing the Office. He is assisted by the Undersheriff. There are four divisions in the Office:

- Administrative Services Division
- Corrections Division
- Field Services Division
- Investigations Division

100.2.1 CORRECTIONS DIVISION

The Corrections Division is commanded by the Corrections Chief, whose primary responsibility is to provide general management direction and control for the correctional facility. The Corrections Division consists of Custody Operations, which also includes Court Security, Medical/Mental Health Services, Programs, Alternatives and Transportation.

100.3 CHAIN OF COMMAND

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

To maintain continuity, order and effectiveness in the Office, a chain of command has been established and should be respected. All staff members should adhere to the chain of command in all official actions. However, nothing shall prohibit a staff member from initiating immediate action outside of the chain of command if it is necessitated by a complaint of discrimination, sexual harassment, gross malfeasance or a violation of the law.

100.3.1 SUCCESSION OF COMMAND

The Sheriff exercises command over all personnel in the Office. During planned absences the Sheriff will designate the Undersheriff to serve as the acting Sheriff.

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

- (a) Corrections Commander
- (b) Corrections Lieutenant
- (c) Corrections Sergeant

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Organizational Structure and Responsibility

(d) Corrections Corporal

100.4 UNITY OF COMMAND

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

Authority and Legal Assistance

101.1 PURPOSE AND SCOPE

This policy acknowledges and reflects the legal authority under which the Skagit County Sheriff's Office shall operate and maintain a local detention facility in this state. In addition to the authority vested by state law, the correctional facility operates in accordance with these laws, constitutional mandates, regulations and local ordinances (RCW 70.48.180 and RCW 70.48.190).

101.2 POLICY

It is the policy of this Office that the local detention facility will be maintained by all lawful means for the incarceration of persons suspected of violating the law or who have been adjudicated as guilty of committing a crime or civil offense by a competent legal authority, as prescribed by law.

101.3 LEGAL FOUNDATION

Jail staff, at every level must have an understanding and true appreciation of their authority and limitations in the operation of a local detention facility. The Skagit County Sheriff's Office recognizes and respects the value of all human life and the expectation of dignity without prejudice toward anyone. It is also understood that vesting law enforcement personnel with the authority to incarcerate suspected law violators to protect the public and prevent individuals from fleeing justice requires a careful balancing of individual rights and legitimate government interests.

101.3.1 PEACE OFFICER POWERS

The arrest authority of the Skagit County Sheriff's Office includes (RCW 10.31.100):

- (a) When the peace officer has probable cause to believe that a person has committed or is committing a felony shall have the authority to arrest the person without a warrant.
- (b) A peace officer may arrest a person without a warrant for committing a misdemeanor or gross misdemeanor only when the offense is committed in the presence of an officer, except as provided in RCW 10.31.100.
- (c) A peace officer may arrest a person in compliance with an arrest warrant.

101.3.2 CORRECTIONS OFFICER POWERS

Corrections officers who have completed the Basic Corrections Officer course at the Criminal Justice Training Commission or equivalent course and have been granted a limited commission by the Sheriff have authority to make an arrest when authorized by a warrant. Such corrections officers, unless separately commissioned as a general authority Washington peace officer, does not have independent authority to make an arrest without a warrant or engage.

101.4 LEGAL ASSISTANCE

The following are examples of areas where the services of the Prosecuting Attorney and legal specialists can be of benefit to the Office:

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Authority and Legal Assistance

- (a) Analyze and alert the correctional facility executive and management team to correctional facility-related case law.
- (b) Serve as a legal consultant in the construction and review of new correctional facility policies and procedures.
- (c) Serve as a legal consultant on issues related, but not limited to the following:
 - 1. Use of force
 - 2. Faith-based requests
 - 3. Complaints and grievances
 - 4. Allegations of abuse by staff
 - 5. Americans with Disabilities Act (ADA) issues, policies and procedures
- (d) Serve as legal counsel in legal matters brought against this office and the Sheriff.

Annual Review and Performance-Based Goals and Objectives

102.1 PURPOSE AND SCOPE

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

102.2 POLICY

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

102.3 ANNUAL REVIEW

The custody management team will conduct an annual management review of minimally:

- (a) Statutory, regulatory and other requirements applicable to the operation of the facility.
- (b) Lawsuits and/or court orders/consent decrees.
- (c) Office policies, procedures, directives and post orders that guide the operation of the facility.
- (d) Fiscal operations and accounting procedures.
- (e) Personnel issues/actions that include, but are not limited to, on-the-job injuries, use of force events, internal affairs investigations, employee grievances, employee discipline, selection and recruitment.
- (f) Compliance with internal/external inspections of the facility.
- (g) Condition of the physical plant, infrastructure and maintenance efforts.
- (h) Cleanliness of the facility.
- (i) Inmate profiles and trends that measure:
 - 1. Inmate population (Average Daily Population)
 - 2. Inmate population by gender
 - 3. Highest one-day count
 - 4. Bookings/releases
 - 5. Percentage of male inmates

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Annual Review and Performance-Based Goals and Objectives

6. Percentage of female inmates
7. Juveniles in custody
8. Felony inmates in custody
9. Misdemeanor inmates in custody
10. Pre-trial population
11. Sentenced population
12. Medical beds
13. Mental health beds
14. Meal counts (regular, medical, court meals)
15. Early releases
16. Alternative-to-incarceration participants
17. Special needs inmates
18. Classification issues
19. Inmate grievances (founded/denied)
20. Demographics (age, race, gang affiliation)
21. Court movement
- (j) Security issues that include:
 1. Inmate-on-inmate assaults
 2. Inmate-on-staff assaults
 3. Major disturbances
 4. Deaths in custody (natural/suicide/homicide/accidents)
 5. Suicide attempts
- (k) Inmate programs including:
 1. Education
 2. Commissary
 3. Drug and alcohol programs
 4. Faith-based services

102.4 CRITERIA TO MEASURE PERFORMANCE

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

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- (a) Fiscal year budget surpluses or successful operations even with budget reductions
- (b) Findings from independent financial audits
- (c) Inmate grievances
- (d) Documentation that office investigators have completed the required specialized training in conducting sexual abuse investigations (28 CFR 115.34)
- (e) Documented training hours received by staff
- (f) Completed audits of the policy and procedures manuals

102.5 MANAGEMENT REVIEW PROCESS

The management team may employ several methods to assess performance, including the following:

- (a) **Performance analysis** - Performance analysis attempts to discover discrepancies between the expected and actual levels of performance. This analysis should focus on whether the practices in this facility are meeting the mission of the Office and whether office policies and procedures are in alignment with statutes, regulations and court orders.
- (b) **One-to-one interviews** - Scheduled interviews with custody staff held in private to encourage candid responses, to help identify issues or conditions that should be targeted for review or correction.
- (c) **Questionnaires** - Questionnaires should be used as a group method to solicit suggestions and information about what operations are in need of adjustment or where program resources should be directed.
- (d) **Staff debriefing** - Staff should be periodically debriefed, especially after an emergency operation or incident, to identify aspects of facility operations that may need to be addressed by the Corrections Chief and supervisors.
- (e) **Inspection findings** - The Office is subject to a variety of administrative inspections (standard-setting authorities, command staff, grand jury, jail advocates). These annual inspections should be used to identify ongoing issues in the operation of this facility.

102.6 MANAGEMENT REVIEW RESULTS

To the extent reasonably practicable the individuals responsible for the development of a management review should follow the guidelines established in the Administrative Communications Policy and Annual Facility Inspection Policy to document and support the findings. A complete report of the review results should be submitted to the appropriate level in the chain of command for final approval.

The results of management reviews should be used in the ongoing process of continuous improvement. They should be used to direct changes in the operation of this facility or to identify

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successful operations that might be replicated in other areas of the facility. They should not, however, include specific identifying information of incidents or involved individuals.

The results of management reviews shall be made available to all personnel and also may be used in full or in part to respond to inquiries from interested groups, such as the local legislative body, courts or others, to provide information on issues concerning the operation of this facility, including action planning whenever appropriate.

102.7 AVAILABILITY OF WRITTEN GOALS AND OBJECTIVES

The Facility Manager should ensure that the written goals and objectives of the office are available to all personnel.

Custody Manual

103.1 PURPOSE AND SCOPE

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

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

103.2 POLICY

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

103.2.1 DISCLAIMER

The provisions contained in the Custody Manual are not intended to create an employment contract nor any employment rights or entitlements. The policies contained within this manual are for the internal use of the Skagit County Sheriff's Office and shall not be construed to create a higher standard or duty of care for civil or criminal liability against the county, its officials or members. Violations of any provision of any policy contained within this manual shall only form the basis for office administrative action, training or discipline. The Skagit County Sheriff's Office reserves the right to revise any policy content, in whole or in part.

103.3 RESPONSIBILITIES

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

The Corrections Chief shall ensure that the Custody Manual is reviewed annually, updated whenever necessary, and staff trained accordingly to ensure that the policies in the manual are current and reflect the mission of the Skagit County Sheriff's Office. The review shall be documented in written form sufficient to indicate that policies and procedures have been reviewed and amended as appropriate to facility changes (RCW 70.48.071).

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103.3.1 COMMAND STAFF

The command staff should consist of the following:

- Sheriff
- Undersheriff
- Corrections Chief
- Lieutenant

103.3.2 OTHER PERSONNEL

Line and supervisory staff have a unique view of how policies and procedures influence the operation of the facility and therefore are expected to bring to the attention of their supervisors issues that might be addressed in a new or revised policy.

All members suggesting revision of the contents of the Custody Manual should forward their suggestions, in writing, through the chain of command, to the Corrections Chief, who will consider the recommendation.

103.3.3 OTHER PERSONNEL

All employees are encouraged to participate in the development, revision and maintenance of the Custody Manual and participate in staff meetings, suggestion programs, committees or other activities as appropriate.

Line and supervisory staff have a unique view of how policies and procedures influence the operation of the facility and therefore are expected to bring to the attention of their supervisor issues that might be addressed in a new or revised policy.

All employees suggesting revision of the contents of the Custody Manual should forward their suggestion in writing to the Corrections Chief, who will consider the recommendation and forward it to the command staff.

103.4 DEFINITIONS

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

Office - The Skagit County Sheriff's Office.

Custody Manual - The Office Custody Manual.

Employee - Any person employed by the Office.

May - Indicates a permissive, discretionary or conditional action.

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

- Full- and part-time employees.
- Deputies.
- Reserve deputies.

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- Non-sworn employees.
- Volunteers.

Deputy - All persons, regardless of rank, who are employees and who are selected and trained in accordance with state law as deputies of the Skagit County Sheriff's Office.

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

Order - A written or verbal instruction issued by a superior.

Rank - The job classification title held by a deputy.

Shall or will - Indicates a mandatory action.

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

103.5 DISTRIBUTION OF MANUAL

Copies of the Custody Manual shall be made available to all members. An electronic version of the Custody Manual will be made available to all members on the office network.

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

103.6 MANUAL ACCEPTANCE

As a condition of employment, all members are required to read and obtain necessary clarification of this office's policies. All members are required to sign a statement of receipt acknowledging that they have received a copy or have been provided access to the Custody Manual.

103.7 REVISIONS TO POLICIES

All members are responsible for keeping abreast of all Custody Manual revisions. All changes to the Custody Manual will be posted on the office network for review prior to implementation. The Training Sergeant will forward revisions to the Custody Manual as needed to all personnel via electronic mail. Each member shall acknowledge receipt by return email or online acknowledgement, review the revisions and seek clarification as needed.

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

Administrative Communications

104.1 PURPOSE AND SCOPE

Effective communications within the Office are critical to the accomplishment of the mission of the Office and the effective operation of the correctional facility. Administrative communications of this office are governed by the following policy.

104.2 PERSONNEL ORDERS

Personnel orders may be issued periodically by the Sheriff to announce and document all promotions, transfers, hiring of new personnel, separations, personnel and group commendations or other changes in status.

104.3 CORRESPONDENCE

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

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

104.4 SURVEYS

All surveys made in the name of the Office shall be authorized in advance by the Sheriff or the Corrections Chief.

104.5 COMPLETED STAFF WORK

All staff reports (e.g., reports assigned to a specific person for the purpose of responding to a problem or issue) shall incorporate the principle of "completed staff work," which requires the person to whom a task has been delegated to complete and document the delegated work to such an extent that the only thing left for the decision-maker to do is to approve or decline to approve the recommendation. Staff reports that only point out weaknesses or merely suggest needed actions are not completed staff work and are not acceptable.

The writer of the staff report should document the efforts made to have the report reviewed by or acted upon by those individuals representing work units or other entities likely to be affected by any proposed changes.

104.6 INTRODUCTORY SUMMARY MEMORANDUMS

Any memorandum that exceeds one page in length should contain a brief introductory summary section synthesizing the subject matter.

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Administrative Communications

104.7 ADMINISTRATIVE REPORT FORMAT

All staff reports submitted via the chain of command to superior officers for further action should be written in accordance with the following format, when applicable.

Executive Summary Section - The staff report should begin with a brief statement of the problem or issue and what could be done about it. This summary should restate the main points of the report in general, non-technical language, leaving out details. The length of the executive summary section should range from one paragraph to one page.

Problem/Issue Identification Section - This section of a staff report is critical to the success of the reader's ability to grasp the issues involved and to arrive at an informed decision. It should strive to identify the true nature and scope of the problem by identifying the known facts and background of the situation, including who has the problem, how long has it existed and the known or likely consequences of the problem.

Forecast Future Impacts - This section of the report should clearly define the problem and be accompanied by an analysis of relevant factors, supported by specific examples, details or testimony, clarifying what the problem is and why it exists. Generally, the reader should be able to leave this section of the report clearly understanding the issues involved and the consequences of taking no action.

Alternatives Analysis Section - Whenever the seriousness or complexity of a problem warrants the development of alternative solutions, a staff report should include a section containing a discussion of different courses of action and their consequences, taking into account the comments and positions of other staff members or entities affected by an Office response to the problem.

104.8 POLICY

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

Departmental Directive

105.1 PURPOSE AND SCOPE

Departmental Directives establish a communication practice that may be used by the Sheriff to make immediate changes to policy and procedure in accordance with and as permitted by statutes, regulations or negotiated contracts. Departmental Directives will immediately modify or change and supersede the sections of this manual to which they pertain.

105.2 DEPARTMENTAL DIRECTIVES PROTOCOL

Departmental Directives will be incorporated into the manual as required upon approval of the Sheriff. Departmental Directives will modify existing policies or create a new policy as appropriate. The previous policy will be rescinded upon incorporation of the new or updated policy into the manual.

Any Departmental Directives issued after publication of the manual shall be numbered consecutively starting with the last two digits of the year, followed by the number "01" For example, 13-01 signifies the first Departmental Directive for the year 2013.

105.2.1 WRITTEN DIRECTIVES

In addition to this manual, employees are expected to familiarize themselves with other official Skagit County and Sheriff's Office publications including:

SKAGIT COUNTY POLICY MANUALS: Issued to all new county employees.

LABOR CONTRACT: Issued to each employee by the labor union after every new labor agreement.

DIVISION PROCEDURE: Issued and updated by administrator of each division within the Sheriff's Office.

BULLETINS: Issued by Sergeants or Division Chiefs as reminders to their divisions about operations within the divisions.

ADMINISTRATIVE DIRECTIVES:

"A" DIRECTIVES: Permanently change the policy of the Sheriff's Office. "A" directives should be incorporated into the Sheriff's Office Policy Manual. The Sheriff and Undersheriff are the only command staff who may issue these types of directives.

"B" DIRECTIVES: Change the daily operation of a division within the Sheriff's Office and is usually only directed to an individual division. "B" Directives may be incorporated into the Sheriffs Office Policy Manual.

"C" DIRECTIVES: Temporary in nature, are used to announce special events, personnel changes and disciplinary actions. Acknowledgment of directives is done by an e-mail acknowledgment to the Chief of Administrative Services.

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Departmental Directive

105.3 RESPONSIBILITIES

Only "A" and "B" directives require an automatic response unless otherwise noted.

It is the responsibility of all users of the Sheriff's Office Manual to note any discrepancies, errors or omissions to the issuing administrator.

The Policy review committee will periodically review directives and incorporate them into the manual when appropriate.

Unless otherwise directed the issuing administrator will format the written directives of his/her division to a manner consistent with this manual.

105.3.1 SHERIFF

The Sheriff or his designee shall issue all Departmental Directives.

105.3.2 MANAGERS AND SUPERVISORS

All employees are required to read and obtain any necessary clarification of all Departmental Directives. Acknowledgement by e-mail receipts showing an employee's acknowledgement will be maintained by the Chief of Administrative Services.

Annual Facility Inspection

106.1 PURPOSE AND SCOPE

Annual facility inspections are the collections of data designed to assist administrators, managers and supervisors in the management of the custody facility by means of establishing a systematic inspection and review of its operation. This policy provides guidelines for conducting the annual facility inspection.

106.1.1 POLICY

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

106.2 CHIEF OF CORRECTIONS RESPONSIBILITIES

The Corrections Chief is responsible for collecting performance indicators and other relevant data to generate and provide an annual inspection of all custody facilities. The Corrections Chief will ensure that inspections are conducted as outlined below for each facility type on an annual basis.

Annual inspections may be used in preparation of inspections by outside entities, such as inspections by a government inspection authority, professional organization or accreditation body. In this case, the local inspection will serve as a pre-inspection review that will prepare the facility for the outside or third-party evaluator.

106.3 INSPECTION PROCESS

The Corrections Chief is responsible for coordinating the annual inspection and should include the following areas in the assessment process:

- (a) **Pre-assessment briefing** - The pre-assessment briefing should begin with a meeting of all Corrections Chiefs, key program staff and service providers. The individual conducting the assessment will need to advise key personnel of the areas they will be inspecting so the appropriate materials will be brought up to date and made available to the assessment team.
- (b) **Policy review** - A review of all correctional facility policies and procedures should be conducted to ensure that those policies are up to date and accurately reflect the requirements and activities related to the correctional facility operation.
- (c) **Record review** - A review of the records that support correctional facility activities, medical records and of the facility's financial records should be conducted to ensure that contractual benchmarks are being met and that any discrepancies are documented and reported as part of the assessment report in an effort to mitigate harm from improper access to or release of records.

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- (d) **Benchmark review** - A review of the Office stated goals and objectives should be discussed with Corrections Chiefs, program managers and other key providers of programs. This will provide the opportunity to identify any areas that require correction, additional resources or that reflect a successful performance that should be acknowledged and possibly replicated.
- (e) **On-site inspections** - The assessment team should conduct on-site inspections of the facility to verify that activities in the facility are in alignment with goals and objectives and compliant with policies and procedures. Any discrepancies, as well as exceptional efforts on the part of management and staff, should be reported as a part of the correctional facility assessment. An inspection checklist should be used to guide the inspection process and to ensure consistency. It is important that the correctional facility assessments be viewed as a credible measurement instrument as many issues identified in the assessment may require significant funding.
- (f) **Develop an action plan** - After the fact-finding described in the previous sections has been accomplished, notes, records and recommendations should be analyzed and an action plan developed to initiate any needed correction. Documenting successful practices is important to determine if they can be replicated in other areas.
- (g) **Reporting** - The results of the inspection should be compiled into a report and should include recommendations and action plans necessary to ensure continuous improvement in the operation and management of the Correctional Facility system. The completed report and any analysis and documentation required to justify costs, policy revisions or any other administrative requirements should be submitted to the Sheriff.
- (h) **Monitor progress** - The Corrections Chief should ensure that approved recommendations are being instituted by the responsible program providers.

Special Assignments and Promotions

107.1 PURPOSE AND SCOPE

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

107.2 SPECIAL ASSIGNMENT POSITIONS

The following positions are considered special assignments and not promotions:

- (a) Crisis Response Unit member
- (b) Correctional Emergency Response Team (CERT) or Special Emergency Response Team (SERT)
- (c) Hostage Negotiator
- (d) Classification (e.g., Prison Rape Elimination Act (PREA), crime scenes, backgrounds, housing assignments)
- (e) Programs deputy
- (f) Security Threat Group deputy (e.g., gang unit)
- (g) Alternatives deputy
- (h) Training Officer
 - 1. Training Sergeant
 - 2. Training specialist
 - 3. Correctional Facility Training Officer
 - 4. Field Training
 - 5. Defensive tactics instructor
 - 6. Rangemaster/Firearms/Control devices instructor
- (i) Field Training Officer
- (j) Court/Transportation

107.2.1 EVALUATION CRITERIA

The following criteria will be used in evaluating candidates for a special assignment:

- (a) Presents a professional, neat appearance.
- (b) Maintains a physical condition that aids in his/her job performance.
- (c) Expresses an interest in the assignment.
- (d) Demonstrates the following traits:
 - 1. Emotional stability and maturity.
 - 2. Stress tolerance.

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3. Sound ethical judgment and decision-making.
4. Personal integrity and ethical conduct.
5. Leadership skills.
6. Initiative.
7. Adaptability and flexibility.
8. Ability to conform to office goals and objectives in a positive manner.

107.2.2 GENERAL REQUIREMENTS

The following requirements should be considered when selecting a candidate for a special assignment:

- (a) Three years of relevant experience
- (b) Off probation
- (c) Possession of or ability to obtain any certification required by the Washington State Criminal Justice Training Commission or law
- (d) Exceptional skills, experience, or abilities related to the special assignment

107.2.3 SELECTION PROCESS

The selection process for special assignments will include an administrative evaluation as determined by the Sheriff to include:

- (a) Supervisor recommendations - Each supervisor who has supervised or otherwise been involved with the candidate will submit a recommendation.
 1. The supervisor recommendations will be submitted to the Division Chief for whom the candidate will work.
- (b) Division Chief interview - The Division Chief will schedule interviews with each candidate.
 1. Based on supervisor recommendations and those of the Division Chief after interviews, the Division Chief will approve the assignment.
- (c) The Sheriff will be notified of the assignment.

The selection process for all special assignment positions may be waived for temporary assignments, emergency situations, training, and at the discretion of the Sheriff.

107.2.4 DISQUALIFICATION

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

- (a) Engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution as defined in 42 USC § 1997.

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- (b) Been convicted of engaging in or attempting to engage in sexual activity facilitated by force, by overt or implied threats of force, or by coercion, or if the victim did not consent or was unable to consent or refuse.
- (c) Been civilly or administratively adjudicated to have engaged in the activity described in paragraph (b) of this section.

Employees who may have contact with inmates shall disclose any conduct described above in written applications or interviews for promotion or special assignment.

107.3 PROMOTIONAL REQUIREMENTS

Requirements and information regarding any promotional process are available at the Skagit Department of Human Resources.

107.4 POLICY

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

Standards of Conduct

108.1 PURPOSE AND SCOPE

This policy establishes standards of conduct that are consistent with the values and mission of the Skagit County Sheriff's Office and are expected of all office members. The standards contained in this policy are not intended to be an exhaustive list of requirements and prohibitions, but they do identify many of the important matters concerning conduct. In addition to the provisions of this policy, members are subject to all other provisions contained in this manual, as well as any additional guidance on conduct that may be disseminated by this office or a member's supervisors.

108.2 POLICY

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

108.2.1 PROGRESSIVE DISCIPLINE

The administration of discipline is generally expected to be progressive in nature, with relatively minor violations of rules resulting in minor disciplinary action for first offenders. Repetitive similar violations, or more serious violations, would generally result in progressively more serious forms of discipline being administered. Nothing in this policy is intended to preclude the administration of more serious forms of discipline, including termination, for a first offense when warranted by the seriousness of the offense.

108.3 CONDUCT THAT MAY RESULT IN DISCIPLINE

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

108.3.1 ATTENDANCE

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

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108.3.2 CONDUCT

- (a) Unauthorized or unlawful fighting, threatening or attempting to inflict unlawful bodily injury on another.
- (b) Initiating any civil action for recovery of any damages or injuries incurred in the course and scope of employment without first notifying the Sheriff of such action.
- (c) Using office resources in association with any portion of an independent civil action. These resources include, but are not limited to, personnel, vehicles, equipment and confidential records.
- (d) Engaging in horseplay that results in injury or property damage or the reasonable possibility thereof.
- (e) Unauthorized possession of, loss of, or damage to office property or the property of others or endangering it through unreasonable carelessness or maliciousness.
- (f) Failure of any employee to promptly and fully report activities on their own part or the part of any other employee where such activities may result in criminal prosecution or discipline under this policy.
- (g) Failure of any employee to promptly and fully report activities that have resulted in official contact by any other law enforcement agency.
- (h) Using or disclosing one's status as an employee with the Office in any way that could reasonably be perceived as an attempt to gain influence or authority for non-office business or activity.
- (i) The use of any confidential information, data, photograph, video or other recording obtained or accessed as a result of employment with the Office for personal or financial gain or without the express authorization of the Sheriff or the authorized designee may result in discipline under this policy.
- (j) Seeking restraining orders against individuals encountered in the line of duty without the express permission of the Sheriff.
- (k) Discourteous, disrespectful or discriminatory treatment of any member of the public or any member of this office.
- (l) Unwelcome solicitation of a personal or sexual relationship while on-duty or through the use of official capacity.
- (m) Engaging in on-duty sexual relations including, but not limited to, sexual intercourse, excessive displays of public affection or other sexual contact.
- (n) Engaging in personal associations with inmates, former inmates or their families. In instances where these relationships existed prior to the inmate's incarceration, staff shall submit notification of such relationship in writing to their supervisor, who will notify the Corrections Chief.

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

108.3.3 DISCRIMINATION

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

108.3.4 INTOXICANTS

- (a) Reporting for work or being at work following the use of intoxicants where such use may impair the employee's ability to perform assigned duties or where there is an immediate suspicion of ineffectiveness during public contact resulting from the use of intoxicants.
- (b) Unauthorized possession or use of, or attempting to bring intoxicants to the work site.
- (c) Failure to promptly disclose to an immediate supervisor the use of any over-the-counter or prescription medication containing a controlled substance which have warning labels or notices which have reported side effects that could reasonably be expected to affect the ability of the employee to safely perform the essential functions of the job.
- (d) Reporting for work or being at work following the use of a controlled substance or any drug (whether legally prescribed or otherwise) where such use may impair the employee's ability to perform assigned duties without prior authorization from a supervisor.
- (e) Unauthorized possession, use of, or attempting to bring a controlled substance or illegal drug to any work site.

108.3.5 PERFORMANCE

- (a) Sleeping during on-duty time or assignments.
- (b) Careless workmanship resulting in spoilage or waste of materials or work of an unacceptable nature as applicable to the nature of the work assigned.

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- (c) Unsatisfactory work performance including, but not limited to, failure, incompetence, inefficiency or delay in performing and/or carrying out proper orders, work assignments or instructions of supervisors without a reasonable and bona fide excuse.
- (d) Concealing, attempting to conceal, removing or destroying defective or incompetent work.
- (e) Disobedience or insubordination to constituted authorities, including refusal or deliberate failure to carry out or follow lawful directives and orders from any supervisor or person in a position of authority.
- (f) The wrongful or unlawful exercise of authority on the part of any employee for malicious purpose, personal gain, willful deceit or any other improper purpose.
- (g) Disparaging remarks or conduct concerning duly constituted authority to the extent that such conduct disrupts the efficiency of the Office or subverts the good order, efficiency and discipline of the Office or that would tend to discredit any member thereof.
- (h) Knowingly making a false, misleading or malicious statements that are reasonably calculated to harm or destroy the reputation, authority or official standing of the Office or members thereof (RCW 43.101.021).
- (i) The falsification of any work-related records, the making of misleading entries or statements with the intent to deceive, or the willful and unauthorized destruction and/or mutilation of any office record, book, paper or document (RCW 43.101.021).
- (j) Wrongfully loaning, selling, giving away or appropriating any office property for the personal use of the employee or any unauthorized person.
- (k) The unauthorized use of any badge, uniform, identification card or other office equipment or property for personal gain or any other improper purpose.
- (l) The receipt or acceptance of a reward, fee or gift from any person for service incident to the performance of the employee's duties (lawful subpoena fees and authorized work permits excepted).
- (m) Any knowing or negligent violation of the provisions of the office manual, operating procedures or other written directive of an authorized supervisor, that the Office has made available to the employees.
- (n) Dishonesty, including attempted or actual theft of office property, services or the property of others, or the unauthorized removal or possession of office property or the property of another person (RCW 43.101.021).
- (o) Criminal, dishonest, infamous or disgraceful conduct adversely affecting the employee/employer relationship, whether on-duty or off-duty (RCW 43.101.021).
- (p) Failure to disclose or misrepresenting material facts, or the making of any false or misleading statement on any application, examination form or other official

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document, report or form, or during the course of any work-related investigation (RCW 43.101.021).

- (q) Failure to take reasonable action while on-duty and when required by law, statute, resolution or approved office practices or procedures.
- (r) Substantiated, active, continuing association with or membership in organized crime or criminal syndicates or any criminal gang with knowledge thereof, except as specifically directed and authorized by the Office.
- (s) Offer or acceptance of a bribe or gratuity.
- (t) Misappropriation or misuse of public funds.
- (u) Exceeding lawful peace officer powers by unreasonable, unlawful or excessive conduct.
- (v) Unlawful gambling or unlawful betting on office premises or at any work site.
- (w) Substantiated, active, continuing association on a personal rather than official basis with a person or persons who engage in or are continuing to engage in serious violations of state or federal laws, where the employee has or reasonably should have knowledge of such criminal activities, except where specifically directed and authorized by the Office.
- (x) Solicitations, speeches or distribution of campaign literature for or against any political candidate or position while on-duty, on office property or while in any way representing him/herself as a member of this office (RCW 41.14.190).
- (y) Contributing to political funds or rendering political services (RCW 41.14.190).
- (z) Violating any misdemeanor or felony statute.
- (aa) Any other on-duty or off-duty conduct which any employee knows or reasonably should know is unbecoming a member of the Office or which is contrary to good order, efficiency or morale, or which tends to reflect unfavorably upon the Office or its members.
- (ab) Any failure or refusal of an employee to properly perform the function and duties of an assigned position.
- (ac) Failure to maintain required and current licenses (e.g., driver license) and certifications (e.g., first aid).
- (ad) Giving false or misleading statements, or misrepresenting or omitting material information to a supervisor or other person in a position of authority, in connection with any investigation or in the reporting of any office-related business.

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108.3.6 SAFETY

- (a) Failure to observe posted rules, signs and written or oral safety instructions while on-duty and/or within office facilities or to use required protective clothing or equipment.
- (b) Knowingly failing to report any on-the-job or work-related accident or injury within 24 hours.
- (c) Substantiated employee record of unsafe or improper driving habits or actions in the course of employment.
- (d) Failure to maintain good physical condition sufficient to adequately and safely perform law enforcement duties.
- (e) Any personal action contributing to involvement in a preventable traffic collision, or other unsafe or improper driving habits or actions in the course of employment.
- (f) Violating office safety standards or safe working practices.

108.3.7 SECURITY

Unauthorized, intentional release of designated confidential information, materials, data, forms or reports.

108.3.8 SUPERVISION RESPONSIBILITY

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

108.4 INVESTIGATION OF DISCIPLINARY ALLEGATIONS

Regardless of the source of an allegation of misconduct, all such matters will be investigated in accordance with Personnel Complaint Procedure Policy Manual § 1020 and RCW 41.12.090.

(a) No person in the classified civil service who shall have been permanently appointed or inducted into civil service pursuant to RCW 41.12.090, shall be removed, suspended, demoted or discharged except for cause, and only upon:

1. Written accusation of the appointing power, or any citizen or taxpayer; a written statement of which accusation, in general terms, shall be served upon the accused, and a duplicate filed with the civil service commission.

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108.4.1 WRITTEN REPRIMANDS

Any employee wishing to formally appeal a written reprimand must submit a written request to the Corrections Chief within 10 days of receipt of the written reprimand. The Corrections Chief will then assign the appeal to an uninvolved supervisor of at least one rank above the rank of the supervisor issuing the original written reprimand.

Absent a written stipulation to the contrary, the employee will be provided with an evidentiary hearing before the assigned, uninvolved supervisor within 30 days. The decision of the assigned, uninvolved supervisor to sustain, modify or dismiss the written reprimand shall be considered final.

108.5 POST-INVESTIGATION PROCEDURES

108.5.1 CHIEF CORRECTIONS DEPUTY RESPONSIBILITIES

Upon receipt of any completed personnel investigation, the Corrections Chief shall review the entire investigative file, the employee's personnel file and any other relevant materials.

The Corrections Chief may make recommendations regarding the disposition of any allegations and the amount of discipline, if any, to be imposed.

- (a) Prior to forwarding recommendations to the Sheriff, the Corrections Chief may return the entire investigation to the assigned detective or supervisor for further investigation or action.
- (b) When forwarding any written recommendation to the Sheriff, the Corrections Chief shall include all relevant materials supporting the recommendation. Actual copies of an employee's existing personnel file need not be provided and may be incorporated by reference.

108.5.2 RESPONSIBILITIES OF THE SHERIFF

Upon receipt of any written recommendation for disciplinary action, the Sheriff shall review the recommendation and all accompanying materials.

The Sheriff may modify any recommendation and/or may return the file to the Corrections Chief for further investigation or action.

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

In the event that disciplinary action is recommended, the Sheriff shall provide the employee with written notice within one year of the date the alleged misconduct was discovered. That notice should include:

- (a) Specific charges set forth in separate counts, describing the conduct underlying each count
- (b) A separate recommendation of proposed discipline for each charge
- (c) A statement that the employee has been provided with or been given access to all of the materials considered by the Sheriff in recommending the proposed discipline

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- (d) An opportunity to respond orally or in writing to the Sheriff within five days of receiving the notice
 - 1. Upon a showing of good cause by the employee, the Sheriff may grant a reasonable extension of time for the employee to respond.
 - 2. If the employee elects to respond orally, the presentation shall be recorded by the Office. Upon request, the employee shall be provided with a copy of the recording.

108.6 EMPLOYEE RESPONSE

The pre-discipline process is intended to provide the accused with an opportunity to present a written or oral response after having had an opportunity to review the complaint and investigation, and report prior to imposition of any recommended discipline. The employee shall consider the following:

- (a) The presentation of the employee's response is not intended to be an adversarial or formal hearing and is not intended to be and opportunity to present testimony or witnesses.
- (b) The employee may be represented by and uninvolved representative or legal counsel.
- (c) The employee may suggest that further investigation could be conducted or the employee may offer any additional information or mitigating factors for the Sheriff to consider.
- (d) In the event that the Sheriff directs further investigation,, the employee shall be provided with the results of such subsequent investigation and will be offered an additional opportunity to present a written or oral response on any new issues addressed in the supplemental investigation prior to the

108.6.1 SHERIFF'S ACTION

The Sheriff shall review the record, including the employee's response unless its submission was waived before issuing a written decision that imposes, modifies, or rejects the recommended discipline. In the event that termination is imposed, the notice of discipline shall inform the employee of the reason for termination and the process to receive all remaining benefits.

the discipline shall become effective upon issuance of a written decision.

Notice of the discipline shall be served on the employee as follows:

- (a) Delivery to the employee by personal service or
- (b) Mailing via regular and certified mail to the employee's address of record when personal service is not readily available. Service is effective upon mailing.

108.7 RESIGNATIONS/RETIREMENTS PRIOR TO DISCIPLINE

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

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

108.8 POST-RESPONSE PROCEDURE

In situations resulting in the imposition of a suspension, punitive transfer, demotion or termination of a non-probationary employee, the employee shall have the right to an evidentiary appeal of the Sheriff's imposition of discipline pursuant to the operative labor agreement and personnel rules (RCW 41.14.120).

108.9 DISCIPLINARY ACTION AGAINST PROBATIONARY EMPLOYEES

In the event that a probationary employee is terminated solely for unsatisfactory performance or the failure to meet office standards, the employee shall have no right to appeal and the following shall be considered (RCW 41.14.130):

- (a) Probationary employees may be disciplined and/or released from employment without cause, notice, or adherence to the procedures set out in this policy; however, the Sheriff may allow the employee to review a complaint, investigation, and recommendation and to submit a response before discipline is imposed.
- (b) A probationary employee who is disciplined or terminated for misconduct may, when authorized by law, request a name-clearing hearing before the Sheriff or designee. A request for a name-clearing hearing shall be submitted, in writing, to the Sheriff within 10 days of delivery of the service of the disciplinary notice. The request should identify the specific finding being appealed with a brief statement explaining the reasons why the finding should be amended. Should a hearing be required, the terminated employee bears the burden of proof and may request a copy of the applicable investigation, present witnesses, and make a argument before the officer presiding at the name-clearing hearing. Should the probationary employee establish by a preponderance of evidence that a finding of misconduct should be rescinded, the reference to the finding shall be removed from the employee's record.
- (c) At all times during any investigation of allegations of misconduct involving a probationary deputy, such deputy shall be afforded all procedural rights set forth in state law and applicable Office policies.
- (d) A probationary employee's appeal of disciplinary action shall be limited to an opportunity for the employee to attempt to establish that the underlying allegations should not be sustained. Nothing in this policy or procedure, however, should be construed to establish any sort of property interest in or right to the employee's continuation of employment.
- (e) The burden of proof for any probationary employee's appeal of disciplinary action shall rest with the employee and will require proof by a preponderance of the evidence.
- (f) In the event that a probationary employee meets his/her burden of proof in such a disciplinary appeal, the Office shall remove all reference to the underlying allegations of misconduct from the employee's personnel file.

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- (g) In the event that a probationary employee fails to meet his/her burden of proof in such a disciplinary appeal, the employee shall have no further right to appeal beyond the Sheriff.

108.10 DIRECTIVES AND ORDERS

Members shall comply with lawful directives and orders from any office supervisor or person in a position of authority, absent a reasonable and bona fide justification.

108.10.1 SUPERVISOR RESPONSIBILITIES

Supervisors and managers are required to follow all policies and procedures and may be subject to discipline for:

- (a) Failure to be reasonably aware of the performance of their subordinates or to provide appropriate guidance and control.
- (b) Failure to promptly and fully report any known misconduct of a member to his/her immediate supervisor or to document such misconduct appropriately or as required by policy.
- (c) Directing a subordinate to violate a policy or directive, acquiesce to such a violation, or are indifferent to any such violation by a subordinate.
- (d) The unequal or disparate exercise of authority on the part of a supervisor toward any member for malicious or other improper purpose.

108.10.2 UNLAWFUL OR CONFLICTING ORDERS

Supervisors shall not knowingly issue orders or directives that, if carried out, would result in a violation of any law or office policy. Supervisors should not issue orders that conflict with any previous order without making reasonable clarification that the new order is intended to countermand the earlier order.

No member is required to obey any order that appears to be in direct conflict with any federal law, state law or local ordinance. Following a known unlawful order is not a defense and does not relieve the member from criminal or civil prosecution or administrative discipline. If the legality of an order is in doubt, the affected member shall ask the issuing supervisor to clarify the order or shall confer with a higher authority. The responsibility for refusal to obey rests with the member, who shall subsequently be required to justify the refusal.

Unless it would jeopardize the safety of any individual, members who are presented with a lawful order that is in conflict with a previous lawful order, office policy or other directive shall respectfully inform the issuing supervisor of the conflict. The issuing supervisor is responsible for either resolving the conflict or clarifying that the lawful order is intended to countermand the previous lawful order or directive, in which case the member is obliged to comply. Members who are compelled to follow a conflicting lawful order after having given the issuing supervisor the opportunity to correct the conflict, will not be held accountable for disobedience of the lawful order or directive that was initially issued.

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The person countermanding the original order shall notify, in writing, the person issuing the original order, indicating the action taken and the reason.

108.11 GENERAL STANDARDS

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

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

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

108.12 CAUSES FOR DISCIPLINE

The following are illustrative of causes for disciplinary action. This list is not intended to cover every possible type of misconduct and does not preclude the recommendation of disciplinary action for violation of other rules, standards, ethics and specific action or inaction that is detrimental to efficient office service.

108.12.1 ETHICS

- (a) Using or disclosing one's status as a member of the Skagit County Sheriff's Office in any way that could reasonably be perceived as an attempt to gain influence or authority for non-office business or activity.
- (b) The wrongful or unlawful exercise of authority on the part of any member for malicious purpose, personal gain, willful deceit or any other improper purpose.
- (c) The receipt or acceptance of a reward, fee or gift from any person for service incident to the performance of the member's duties (lawful subpoena fees and authorized work permits excepted).
- (d) Acceptance of fees, gifts or money contrary to the rules of this office and/or laws of the state.
- (e) Offer or acceptance of a bribe or gratuity.
- (f) Misappropriation or misuse of public funds, property, personnel or services.
- (g) Any other failure to abide by the standards of ethical conduct.

108.12.2 DISCRIMINATION, OPPRESSION, OR FAVORITISM

Unless required by law or policy, discriminating against, oppressing, or providing favoritism to any person because of actual or perceived characteristics such as race, ethnicity, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, economic status, cultural group, veteran status, marital status, and any other classification or status protected

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by law, or intentionally denying or impeding another in the exercise or enjoyment of any right, privilege, power, or immunity, knowing the conduct is unlawful.

108.12.3 RELATIONSHIPS

- (a) Unwelcome solicitation of a personal or sexual relationship while on-duty or through the use of one's official capacity.
- (b) Engaging in on-duty sexual activity including but not limited to sexual intercourse, excessive displays of public affection, or other sexual contact with other members, volunteers, contractors, or inmates.
- (c) Establishing or maintaining an inappropriate personal or financial relationship, as a result of an investigation, with an inmate or with a known victim, witness, suspect, or defendant while a case is being investigated or prosecuted, or as a direct result of any official contact.
- (d) Associating with or joining a criminal gang, organized crime, and/or criminal syndicate when the member knows or reasonably should know of the criminal nature of the organization. This includes any organization involved in a definable criminal activity or enterprise, except as specifically directed and authorized by this office.
- (e) Associating on a personal, rather than official, basis with persons who demonstrate recurring involvement in serious violations of state or federal laws after the member knows, or reasonably should know of such criminal activities, except as specifically directed and authorized by this office.

108.12.4 ATTENDANCE

- (a) Leaving the job to which the member is assigned during duty hours without reasonable excuse and proper permission and approval.
- (b) Unexcused or unauthorized absence or tardiness.
- (c) Excessive absenteeism or abuse of leave privileges.
- (d) Failure to report to work or to the place of assignment at the time specified and fully prepared to perform duties without a reasonable excuse.

108.12.5 UNAUTHORIZED ACCESS, DISCLOSURE, OR USE

- (a) Unauthorized and inappropriate intentional release of confidential or protected information, materials, data, forms, or reports obtained as a result of the member's position with this office.
- (b) Disclosing to any unauthorized person any active investigation, inmate, or critical incident information.
- (c) The use of any information, photograph, video, or other recording obtained or accessed as a result of employment or appointment to this office for personal or financial gain or without the express authorization of the Sheriff or the authorized designee.

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- (d) Loaning, selling, allowing unauthorized use, giving away, or appropriating any office property for personal use, personal gain, or any other improper or unauthorized use or purpose.
- (e) Using office resources in association with any portion of an independent civil action. These resources include but are not limited to, personnel, vehicles, equipment, and non-subpoenaed records.

108.12.6 EFFICIENCY

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

108.12.7 PERFORMANCE

- (a) Failure to disclose or misrepresenting material facts, or making any false or misleading statement on any application, examination form, or other official document, report, or form, or during the course of any work-related investigation.
- (b) The falsification of any work-related records, making misleading entries or statements with the intent to deceive or the willful and unauthorized removal, alteration, destruction, and/or mutilation of any office record, public record, book, paper, or document.
- (c) Failure to participate in, or giving false or misleading statements, or misrepresenting or omitting material information to a supervisor or other person in a position of authority, in connection with any investigation or in the reporting of any office-related business.
- (d) Being untruthful or knowingly making false, misleading, or malicious statements that are reasonably calculated to harm the reputation, authority, or official standing of this office or its members.
- (e) Disparaging remarks or conduct concerning duly constituted authority to the extent that such conduct disrupts the efficiency of this office or subverts the good order, efficiency, and discipline of this office or that would tend to discredit any of its members.
- (f) Unlawful gambling or unlawful betting at any time or any place. Legal gambling or betting under any of the following conditions:
 - 1. While on office premises.

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2. At any work site, while on-duty or while in uniform, or while using any office equipment or system.
 3. Gambling activity undertaken as part of a deputy's official duties and with the express knowledge and permission of a direct supervisor is exempt from this prohibition.
- (g) Improper political activity including:
1. Unauthorized attendance while on-duty at official legislative or political sessions.
 2. Solicitations, speeches, or distribution of campaign literature for or against any political candidate or position while on-duty, or on office property except as expressly authorized by county policy, the collective bargaining agreement, or the Sheriff.
- (h) Engaging in political activities during assigned working hours except as expressly authorized by county policy, the collective bargaining agreement, or the Sheriff.
- (i) Any act on- or off-duty that brings discredit to this office.

108.12.8 CONDUCT

- (a) Failure of any member to promptly and fully report activities on his/her part or the part of any other member where such activities resulted in contact with any other law enforcement agency or that may result in criminal prosecution or discipline under this policy.
- (b) Unreasonable and unwarranted force to a person encountered or a person under arrest.
- (c) Exceeding lawful peace officer powers by unreasonable, unlawful or excessive conduct.
- (d) Unauthorized or unlawful fighting, threatening or attempting to inflict unlawful bodily harm on another.
- (e) Engaging in horseplay that reasonably could result in injury or property damage.
- (f) Discourteous, disrespectful or discriminatory treatment of any member of the public or any member of this office or the county.
- (g) Use of obscene, indecent, profane or derogatory language while on-duty or in uniform.
- (h) Criminal, dishonest or disgraceful conduct, whether on- or off-duty, that adversely affects the member's relationship with this office.
- (i) Unauthorized possession of, loss of, or damage to office property or the property of others, or endangering it through carelessness or maliciousness.
- (j) Attempted or actual theft of office property; misappropriation or misuse of public funds, property, personnel or the services or property of others; unauthorized removal or possession of office property or the property of another person.

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- (k) Activity that is incompatible with a member's conditions of employment or appointment as established by law or that violates a provision of any collective bargaining agreement to including fraud in securing the appointment or hire.
- (l) Initiating any civil action for recovery of any damages or injuries incurred in the course and scope of employment or appointment without first notifying the Sheriff of such action.
- (m) Accepting gifts of any value or favors from current or former inmates or their families. Attempts on the part of a current inmate, former inmate or his/her family to send gifts or offer favors to employees or their families must be immediately reported to the employee's supervisor.
- (n) Allowing contraband articles including, but not limited to, weapons, cellular telephones or other wireless devices, clothing, food, illegal drugs, or tobacco in any jail facility.
- (o) Receiving from an inmate any articles to deliver outside the facility.
- (p) Any other on- or off-duty conduct which any member knows or reasonably should know is unbecoming a member of this office, is contrary to good order, efficiency or morale, or tends to reflect unfavorably upon this office or its members.

108.12.9 SAFETY

- (a) Failure to observe or violating office safety standards or safe working practices.
- (b) Failure to maintain current licenses or certifications required for the assignment or position (e.g., driver's license, first aid).
- (c) Failure to maintain good physical condition sufficient to adequately and safely perform law enforcement duties.
- (d) Unsafe firearm or other dangerous weapon handling, including loading or unloading firearms in an unsafe manner, either on- or off-duty.
- (e) Carrying, while on the premises of the work place, any firearm or other lethal weapon that is not authorized by the member's appointing authority.
- (f) Unsafe or improper driving habits or actions in the course of employment or appointment.
- (g) Any personal action contributing to a preventable traffic collision.
- (h) Concealing or knowingly failing to report any on-the-job or work-related accident or injury as soon as practicable but within 24 hours.

108.12.10 INTOXICANTS

- (a) Reporting for work or being at work while intoxicated or when the member's ability to perform assigned duties is impaired due to the use of alcohol, medication or drugs, whether legal, prescribed or illegal.
- (b) Possession or use of alcohol at any work site or while on-duty, except as authorized in the performance of an official assignment. A member who is authorized to consume alcohol is not permitted to do so to such a degree that it may impair on-duty performance.

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- (c) Unauthorized possession, use of, or attempting to bring a controlled substance, illegal drug or non-prescribed medication to any work site.

Discriminatory Harassment

109.1 PURPOSE AND SCOPE

The purpose of this policy is to prevent office members from being subjected to discriminatory harassment, including sexual harassment and retaliation. Nothing in this policy is intended to create a legal or employment right or duty that is not created by law.

109.2 POLICY

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

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

109.3 DEFINITIONS

Definitions related to this policy include:

109.3.1 DISCRIMINATION

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

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

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

109.3.2 RETALIATION

Retaliation is treating a person differently or engaging in acts of reprisal or intimidation against the person because the person has engaged in protected activity, filed a charge of discrimination,

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participated in an investigation, or opposed a discriminatory practice. Retaliation will not be tolerated.

109.3.3 SEXUAL HARASSMENT

The Office prohibits all forms of discrimination and discriminatory harassment, including sexual harassment. It is unlawful to harass an applicant or a member because of that person's sex.

Sexual harassment includes but is not limited to unwelcome sexual advances, requests for sexual favors, or other verbal, visual, or physical conduct of a sexual nature when:

- (a) Submission to such conduct is made either explicitly or implicitly as a term or condition of employment, position, or compensation.
- (b) Submission to, or rejection of, such conduct is used as the basis for any employment decisions affecting the member.
- (c) Such conduct has the purpose or effect of substantially interfering with a member's work performance or creating an intimidating, hostile, or offensive work environment.

109.3.4 WORKPLACE BULLYING

Workplace bullying is unreasonable or inappropriate behavior in the workplace or in the course of employment which could reasonably be regarded as intimidating, insulting, offensive, demeaning, or abusive to others. It will usually be repeated inappropriate behavior but can also consist of a single act. Either individuals or groups may be bullied. Normal, appropriate management practices and differences of opinion are not workplace bullying.

109.3.5 VIOLENCE IN THE WORKPLACE

A "violent Act" is an act by a third party or an employee that may range from verbal or physical threats of intimidation to assault or battery.

109.3.6 ADDITIONAL CONSIDERATIONS

Discrimination and discriminatory harassment do not include actions that are in accordance with established rules, principles, or standards, including:

- (a) Acts or omission of acts based solely upon bona fide occupational qualifications under the Equal Employment Opportunity Commission and Washington State Human Rights Commission guidelines.
- (b) Bona fide requests or demands by a supervisor that the member improve the member's work quality or output, that the member report to the job site on time, that the member comply with county or office rules or regulations, or any other appropriate work-related communication between supervisor and member.

109.4 RESPONSIBILITIES

This policy applies to all office members, who shall follow the intent of these guidelines in a manner that reflects office policy, professional standards, and the best interest of the Office and its mission.

Members are encouraged to promptly report any discriminatory, retaliatory, or harassing conduct or known violations of this policy to a supervisor. Any member who is not comfortable with reporting

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violations of this policy to the member's immediate supervisor may bypass the chain of command and make the report to a higher-ranking supervisor or manager. Complaints may also be filed with the Sheriff, the Director of Human Services, or the County Administrator.

Any member who believes, in good faith, that the member has been discriminated against, harassed, or subjected to retaliation, or who has observed harassment, discrimination, or retaliation, is encouraged to promptly report such conduct in accordance with the procedures set forth in this policy.

Supervisors and managers receiving information regarding alleged violations of this policy shall determine if there is any basis for the allegation and shall proceed with a resolution as stated below.

109.4.1 QUESTIONS OR CLARIFICATION

Members with questions regarding what constitutes discrimination, sexual harassment, or retaliation are encouraged to contact a supervisor, a manager, the Sheriff, the Director of Human Services, or the County Administrator for further information, direction, or clarification.

109.4.2 SUPERVISOR RESPONSIBILITIES

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

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

109.4.3 SUPERVISOR'S ROLE

Supervisors and managers shall be aware of the following:

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

Nothing in this section shall be construed to prevent supervisors or managers from discharging supervisory or management responsibilities, such as determining duty assignments, evaluating

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or counseling members, or issuing discipline in a manner that is consistent with established procedures.

109.4.4 WHISTLE-BLOWING

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

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

109.5 INVESTIGATION OF COMPLAINTS

Various methods of resolution exist. During the pendency of any such investigation, the supervisor of the involved member should take prompt and reasonable steps to mitigate or eliminate any continuing abusive or hostile work environment. It is the policy of the Office that all complaints of discrimination, retaliation, or harassment shall be fully documented and promptly and thoroughly investigated.

109.5.1 SUPERVISOR RESOLUTION

Members who believe they are experiencing discrimination, harassment, or retaliation should be encouraged to inform the individual that the behavior is unwelcome, offensive, unprofessional, or inappropriate. However, if the member feels uncomfortable or threatened or has difficulty expressing the member's concern, or if this does not resolve the concern, assistance should be sought from a supervisor or manager who is a rank higher than the alleged transgressor.

109.5.2 FORMAL INVESTIGATION

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

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

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

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

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109.5.3 DISPOSITION OF COMPLAINTS

Only one of the following four dispositions will be used to classify the disposition of an allegation of harassment:

Sustained - If the complaint is substantiated, this policy and procedure prohibiting discrimination/harassment will be reviewed with the offender. Appropriate disciplinary action and/or training, will be taken pursuant to the office disciplinary procedures.

Not Sustained - If there is insufficient evidence to either prove or disprove the allegation, both parties to the complaint will be informed of the reason for this disposition.

Unfounded - If it is determined that an act reported pursuant to this policy/procedure did not in fact occur, a finding of unfounded should be made.

Exonerated - If it is determined that an act reported pursuant to this policy/procedure did in fact occur, but was lawful and proper within the guidelines established here, a finding of exonerated should be made.

Should it be determined that the reporting employee filed an unfounded or false complaint in good faith or through a mistake of fact, the employee should receive counseling from a supervisor as to what constitutes discrimination and harassment.

If it is determined that the reporting employee maliciously filed the complaint knowing that it was false or frivolous at the time of the complaint, that employee shall be subject to the disciplinary process up to and including termination.

109.5.4 ALTERNATIVE COMPLAINT PROCESS

No provision of this policy shall be construed to prevent any member from seeking legal redress outside the Office. Members who believe that they have been harassed, discriminated against, or retaliated against are entitled to bring complaints of employment discrimination to federal, state, and/or local agencies responsible for investigating such allegations. Specific time limitations apply to the filing of such charges. Members are advised that proceeding with complaints under the provisions of this policy does not in any way affect those filing requirements.

109.6 DOCUMENTATION OF COMPLAINTS

All complaints or allegations shall be thoroughly documented on the appropriate forms and in a manner designated by the Sheriff. The outcome of all reports shall be:

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

109.6.1 NOTIFICATION OF DISPOSITION

The complainant and/or victim will be notified in writing of the disposition of the investigation and the actions taken to remedy or address the circumstances giving rise to the complaint.

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109.7 TRAINING

All new members shall be provided with access to a copy of this policy as part of their orientation.

All members shall receive annual training on the requirements of this policy.

109.8 GRIEVANCE PROCEDURE

Disputes arising out of the interpretation and enforcement of this policy should be resolved through the established Grievance Procedure Policy.

109.8.1 QUESTIONS REGARDING DISCRIMINATION OR SEXUAL HARASSMENT

Employees having questions are encouraged to contact a supervisor, Corrections Chief, the Sheriff, Director of Human Services, or the County Administrator.

Grievances

110.1 PURPOSE AND SCOPE

It is the policy of this department that all grievances be handled quickly and fairly without discrimination against employees who file a grievance whether or not there is a basis for the grievance. Our Department's philosophy is to promote a free verbal communication between employees and supervisors.

110.1.1 GRIEVANCE DEFINED

Grievance - Is any dispute involving the interpretation or application of any of the following documents by the person(s) affected:

- The employee bargaining agreement (Memorandum of Understanding)
- This Custody Manual
- Office rules and regulations governing personnel practices or working conditions
- Workplace issues that do not amount to misconduct under the Personnel Complaints Policy, such as fraud, waste, abuse of authority, gross mismanagement, or any inappropriate conduct or practices, including violations that may pose a threat to the health, safety, or well-being of members

Specifically outside the category of grievances are complaints related to alleged acts of sexual, racial, ethnic or other forms of unlawful harassment, as well as complaints related to allegations of discrimination on the basis of sex, race, religion, ethnic background and other lawfully protected status or activity are subject to the complaint options set forth in the Discriminatory Harassment Policy; and personnel complaints regarding any allegation of misconduct or improper job performance against any office employee that, if true, would constitute a violation of office policy or federal, state, or local law, as set forth in the Personnel Complaints Policy.

110.2 POLICY

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

110.3 PROCEDURE

Except as otherwise required under a collective bargaining agreement, if an employee believes that he/she has a grievance as defined above, then that employee shall observe the following procedure:

- (a) Attempt to resolve the issue through informal discussion with immediate supervisor.
- (b) If after a reasonable amount of time, generally seven days, the grievance cannot be settled by the immediate supervisor, the employee may request an interview with the Division Chief of the affected division or bureau.

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- (c) If a successful resolution is not found with the Division Chief, the employee may request a meeting with the Sheriff.
- (d) If the employee and the Sheriff are unable to arrive at a mutual solution, then the employee shall proceed as follows:

1. Submit in writing a written statement of the grievance and deliver one copy to the Sheriff and another copy to the immediate supervisor and include the following information:

- (a) The basis for the grievance (i.e., what are the facts of the case).
- (b) Allegation of the specific wrongful act and the harm done.
- (c) Identification of the specific policies, rules or regulations or allegedly violated.
- (d) What remedy you are seeking or goal you would like to accomplish from this grievance.
- (e) The employee shall receive a copy of the acknowledgment signed by the supervisor including the date and time of receipt.
- (f) The Sheriff will receive the grievance in writing. The Sheriff and the County Commissioners will review and analyze the facts or allegations and respond to the employee within 14 calendar days. The response will be in writing, and will affirm or deny the allegations. The response shall include any remedies if appropriate. The decision of the County Commissioners is considered final.

110.4 EMPLOYEE REPRESENTATION

Employees are entitled to have representation during the grievance process. The representative may be selected by the employee from the appropriate employee bargaining group.

110.5 GRIEVANCE RECORDS

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

Personnel Complaints

111.1 PURPOSE AND SCOPE

This policy provides guidelines for the reporting, investigation and disposition of complaints regarding the conduct of members of the Skagit County Sheriff's Office. This policy shall not apply to any questioning, counseling, instruction, informal verbal admonishment or other routine or unplanned contact of a member in the normal course of duty, by a supervisor or any other member, nor shall this policy apply to a criminal investigation.

111.2 POLICY

The Skagit County Sheriff's Office takes seriously all complaints regarding the service provided by the Office and the conduct of its members.

The Office will accept and address all complaints of misconduct in accordance with this policy and applicable federal, state and local laws; municipal and county rules; and the requirements of any collective bargaining agreements.

It is also the policy of this office to ensure that the community can report misconduct without concern for reprisal or retaliation.

111.3 PERSONNEL COMPLAINTS

Personnel complaints include any allegation of misconduct or improper job performance that, if true, would constitute a violation of office policy, federal, state or local law, policy or rule. Personnel complaints may be generated internally or by the public.

Inquiries about conduct or performance that, if true, would not violate office policy, federal, state or local law, policy or rule may be handled informally by a supervisor and shall not be considered a personnel complaint. Such inquiries generally include clarification regarding policy, procedures or the response to specific incidents by the Office

111.3.1 COMPLAINT CLASSIFICATIONS

Personnel complaints shall be classified in one of the following categories:

Informal - A matter in which the Shift Supervisor is satisfied that appropriate action has been taken by a supervisor of rank greater than the accused member.

Formal - A matter in which a supervisor determines that further action is warranted. Such complaints may be investigated by a supervisor of rank greater than the accused member or referred to the Internal Affairs Unit, depending on the seriousness and complexity of the investigation.

Incomplete - A matter in which the complaining party either refuses to cooperate or becomes unavailable after diligent follow-up investigation. At the discretion of the assigned supervisor or the Internal Affairs Unit, such matters may be further investigated depending on the seriousness of the complaint and the availability of sufficient information.

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111.3.2 SOURCES OF COMPLAINTS

The following applies to the source of complaints:

- (a) Individuals from the public may make complaints in any form, including in writing, by email, in person or by telephone.
- (b) Any office member becoming aware of alleged misconduct shall immediately notify a supervisor.
- (c) Supervisors shall initiate a complaint based upon observed misconduct or receipt from any source alleging misconduct that, if true, could result in disciplinary action.
- (d) Anonymous and third-party complaints should be accepted and investigated to the extent that sufficient information is provided.
- (e) Tort claims and lawsuits may generate a personnel complaint.

111.4 AVAILABILITY AND ACCEPTANCE OF COMPLAINTS

111.4.1 COMPLAINT FORMS

Personnel complaint forms will be maintained in a clearly visible location in the public area of any Office facility and be accessible through the office website. Forms may also be available at other county facilities.

Personnel complaint forms in languages other than English may also be provided, as determined necessary or practicable.

111.4.2 ACCEPTANCE

All complaints will be courteously accepted by any office member and promptly given to the appropriate supervisor. Although written complaints are preferred, a complaint may also be filed orally, either in person or by telephone. Such complaints will be directed to a supervisor. If a supervisor is not immediately available to take an oral complaint, the receiving member shall obtain contact information sufficient for the supervisor to contact the complainant. The supervisor, upon contact with the complainant, shall complete and submit a complaint form as appropriate.

Although not required, complainants should be encouraged to file complaints in person so that proper identification, signatures, photographs or physical evidence may be obtained as necessary.

111.5 DOCUMENTATION

Supervisors shall ensure that all formal and informal complaints are documented on a complaint form. The supervisor shall ensure that the nature of the complaint is defined as clearly as possible.

All complaints and inquiries should also be documented in a log that records and tracks complaints. The log shall include the nature of the complaint and the actions taken to address the complaint. On an annual basis, the Corrections Chief should audit the log and send an audit report to the Sheriff or the authorized designee.

111.6 ADMINISTRATIVE INVESTIGATIONS

Allegations of misconduct will be administratively investigated as follows.

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111.6.1 SUPERVISOR RESPONSIBILITIES

In general, the primary responsibility for the investigation of a personnel complaint shall rest with the member's immediate supervisor, unless the supervisor is the complainant, or the supervisor is the ultimate decision-maker regarding disciplinary action or has any personal involvement regarding the alleged misconduct. The Sheriff or the authorized designee may direct that another supervisor investigate any complaint.

A supervisor who becomes aware of alleged misconduct shall take reasonable steps to prevent aggravation of the situation.

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

- (a) Ensuring that upon receiving or initiating any formal complaint, a complaint form is completed.
 - 1. The original complaint form will be directed to the Shift Supervisor of the accused member, via the chain of command, who will take appropriate action and/or determine who will have responsibility for the investigation.
 - 2. In circumstances where the integrity of the investigation could be jeopardized by reducing the complaint to writing or where the confidentiality of a complainant is at issue, a supervisor shall orally report the matter to the member's Corrections Chief or the Sheriff, who will initiate appropriate action.
- (b) Responding to all complainants in a courteous and professional manner.
- (c) Resolving those personnel complaints that can be resolved immediately.
 - 1. Follow-up contact with the complainant should be made within 24 hours of the Office receiving the complaint.
 - 2. If the matter is resolved and no further action is required, the supervisor will note the resolution on a complaint form and forward the form to the Shift Supervisor.
- (d) Ensuring that upon receipt of a complaint involving allegations of a potentially serious nature, the Shift Supervisor and the Sheriff are notified via the chain of command as soon as practicable.
- (e) Promptly contacting the Department of Human Resources and the Shift Supervisor for direction regarding their roles in addressing a complaint that relates to sexual, racial, ethnic or other forms of prohibited harassment or discrimination.
- (f) Forwarding unresolved personnel complaints to the Shift Supervisor, who will determine whether to contact the complainant or assign the complaint for investigation.
- (g) Informing the complainant of the investigator's name and the complaint number within three days after assignment.
- (h) Investigating a complaint as follows:
 - 1. Making reasonable efforts to obtain names, addresses and telephone numbers of witnesses.
 - 2. When appropriate, ensuring immediate medical attention is provided and photographs of alleged injuries and accessible uninjured areas are taken.

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- (i) Ensuring that the procedural rights of the accused member are followed.
- (j) Ensuring interviews of the complainant are generally conducted during reasonable hours.

111.6.2 ADMINISTRATIVE INVESTIGATION PROCEDURES

Whether conducted by a supervisor or a member of the Internal Affairs Unit, the following applies to employees:

- (a) Interviews of an accused employee shall be conducted during reasonable hours and preferably when the employee is on-duty. If the employee is off-duty, he/she shall be compensated.
- (b) Unless waived by the employee, interviews of an accused employee shall be at the Skagit County Sheriff's Office or other reasonable and appropriate place.
- (c) No more than two interviewers should ask questions of an accused employee.
- (d) Prior to any interview, an employee should be informed of the nature of the investigation.
- (e) All interviews should be for a reasonable period and the employee's personal needs should be accommodated.
- (f) No employee should be subjected to offensive or threatening language, nor shall any promises, rewards or other inducements be used to obtain answers.
- (g) Any employee refusing to answer questions directly related to the investigation may be ordered to answer questions administratively and may be subject to discipline for failing to do so.
 - 1. An employee should be given an order to answer questions in an administrative investigation that might incriminate the employee in a criminal matter only after the employee has been given a *Garrity* advisement. Administrative investigators should consider the impact that compelling a statement from the employee may have on any related criminal investigation and should take reasonable steps to avoid creating any foreseeable conflicts between the two related investigations. This may include conferring with the person in charge of the criminal investigation (e.g., discussion of processes, timing, implications).
 - 2. No information or evidence administratively coerced from an employee may be provided to anyone involved in conducting the criminal investigation or to any prosecutor.
- (h) The interviewer should record all interviews of employees and witnesses. The employee may also record the interview. If the employee has been previously interviewed, a copy of that recorded interview should be provided to the employee prior to any subsequent interview.
- (i) All employees subjected to interviews that could result in discipline have the right to have an uninvolved representative present during the interview. However, in order to maintain the integrity of each individual's statement, involved employees shall not consult or meet with a representative or attorney collectively or in groups prior to being interviewed.

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- (j) All employees shall provide complete and truthful responses to questions posed during interviews.
- (k) No employee may be compelled to submit to a polygraph examination, nor shall any refusal to submit to such examination be mentioned in any investigation.
- (l) An employee covered by civil service shall be provided a written statement of all accusations with a duplicate statement filed with the civil service commission (RCW 41.12.090; RCW 41.14.120).

111.6.3 ADMINISTRATIVE INVESTIGATION FORMAT

Formal investigations of personnel complaints shall be thorough, complete and essentially follow this format:

Introduction - Include the identity of the members, the identity of the assigned investigators, the initial date and source of the complaint.

Synopsis - Provide a brief summary of the facts giving rise to the investigation.

Summary - List the allegations separately, including applicable policy sections, with a brief summary of the evidence relevant to each allegation. A separate recommended finding should be provided for each allegation.

Evidence - Each allegation should be set forth with the details of the evidence applicable to each allegation provided, including comprehensive summaries of member and witness statements. Other evidence related to each allegation should also be detailed in this section.

Conclusion - A recommendation regarding further action or disposition should be provided.

Exhibits - A separate list of exhibits (e.g., recordings, photos, documents) should be attached to the report.

111.6.4 DISPOSITIONS

Each personnel complaint shall be classified with one of the following dispositions:

Unfounded - When the investigation discloses that the alleged acts did not occur or did not involve office members. Complaints that are determined to be frivolous will fall within the classification of unfounded.

Exonerated - When the investigation discloses that the alleged act occurred but that the act was justified, lawful and/or proper.

Not sustained - When the investigation discloses that there is insufficient evidence to sustain the complaint or fully exonerate the member.

Sustained - When the investigation discloses sufficient evidence to establish that the act occurred and that it constituted misconduct.

If an investigation discloses misconduct or improper job performance that was not alleged in the original complaint, the investigator shall take appropriate action with regard to any additional allegations.

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111.6.5 COMPLETION OF INVESTIGATIONS

Every investigator or supervisor assigned to investigate a personnel complaint or other alleged misconduct shall proceed with due diligence in an effort to complete the investigation within one year from the date of discovery by an individual authorized to initiate an investigation.

111.6.6 NOTICE TO COMPLAINANT OF INVESTIGATION STATUS

The member conducting the investigation should provide the complainant with periodic updates on the status of the investigation, as appropriate.

111.7 ADMINISTRATIVE SEARCHES

Assigned lockers, storage spaces and other areas, including desks, offices and vehicles, may be searched as part of an administrative investigation upon a reasonable suspicion of misconduct.

Such areas may also be searched any time by a supervisor for non-investigative purposes, such as obtaining a needed report, radio or other document or equipment.

111.8 ADMINISTRATIVE LEAVE

When a complaint of misconduct is of a serious nature, or when circumstances indicate that allowing the accused to continue to work would adversely affect the mission of the Office, the Sheriff or the authorized designee may temporarily assign an accused employee to administrative leave. Any employee placed on administrative leave:

- (a) May be required to relinquish any office badge, identification, assigned weapons and any other office equipment.
- (b) Shall be required to continue to comply with all policies and lawful orders of a supervisor.
- (c) May be temporarily reassigned to a different shift, generally a normal business-hours shift, during the investigation. The employee may be required to remain available for contact at all times during such shift, and will report as ordered.

111.9 CRIMINAL INVESTIGATION

Where a member is accused of potential criminal conduct, a separate supervisor or investigator shall be assigned to investigate the criminal allegations apart from any administrative investigation. Any separate administrative investigation may parallel a criminal investigation.

The Sheriff shall be notified as soon as practicable when a member is accused of criminal conduct. The Sheriff may request a criminal investigation by an outside law enforcement agency.

A member accused of criminal conduct shall be provided with all rights afforded to a civilian. The member should not be administratively ordered to provide any information in the criminal investigation.

The Skagit County Sheriff's Office may release information concerning the arrest or detention of any member, including a deputy, that has not led to a conviction. No disciplinary action should be taken until an independent administrative investigation is conducted.

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111.10 POST-ADMINISTRATIVE INVESTIGATION PROCEDURES

Upon completion of a formal investigation, an investigation report should be forwarded to the Sheriff through the chain of command. Each level of command should review the report and include his/her comments in writing before forwarding the report. The Sheriff may accept or modify any classification or recommendation for disciplinary action.

111.10.1 FACILITY MANAGER RESPONSIBILITIES

Upon receipt of any completed personnel investigation, the Corrections Chief of the involved member shall review the entire investigative file, the member's personnel file and any other relevant materials.

The Corrections Chief may make recommendations regarding the disposition of any allegations and the amount of discipline, if any, to be imposed.

Prior to forwarding recommendations to the Sheriff, the Corrections Chief may return the entire investigation to the assigned investigator or supervisor for further investigation or action.

When forwarding any written recommendation to the Sheriff, the Corrections Chief shall include all relevant materials supporting the recommendation. Actual copies of a member's existing personnel file need not be provided and may be incorporated by reference.

111.10.2 SHERIFF RESPONSIBILITIES

Upon receipt of any written recommendation for disciplinary action, the Sheriff shall review the recommendation and all accompanying materials. The Sheriff may modify any recommendation and/or may return the file to the Corrections Chief for further investigation or action.

Once the Sheriff is satisfied that no further investigation or action is required by staff, the Sheriff shall determine the amount of discipline, if any, that should be imposed. In the event disciplinary action is proposed, the Sheriff shall provide the member with a written notice and the following:

- (a) Access to all of the materials considered by the Sheriff in recommending the proposed discipline.
- (b) An opportunity to respond orally or in writing to the Sheriff within five days of receiving the notice.
 - 1. Upon a showing of good cause by the member, the Sheriff may grant a reasonable extension of time for the member to respond.
 - 2. If the member elects to respond orally, the presentation shall be recorded by the Office. Upon request, the member shall be provided with a copy of the recording.

Once the member has completed his/her response or, if the member has elected to waive any such response, the Sheriff shall consider all information received in regard to the recommended discipline. The Sheriff shall render a timely written decision to the member and specify the grounds and reasons for discipline and the effective date of the discipline. Once the Sheriff has issued a written decision, the discipline shall become effective.

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111.10.3 NOTICE OF FINAL DISPOSITION TO THE COMPLAINANT

The Sheriff or the authorized designee should ensure that the complainant is notified of the disposition (i.e., sustained, not sustained, exonerated, unfounded) of the complaint.

111.11 PRE-DISCIPLINE EMPLOYEE RESPONSE

The pre-discipline process is intended to provide the accused employee with an opportunity to present a written or oral response to the Sheriff after having had an opportunity to review the supporting materials and prior to imposition of any recommended discipline. The employee shall consider the following:

- (a) The response is not intended to be an adversarial or formal hearing.
- (b) Although the employee may be represented by an uninvolved representative or legal counsel, the response is not designed to accommodate the presentation of testimony or witnesses.
- (c) The employee may suggest that further investigation could be conducted or the employee may offer any additional information or mitigating factors for the Sheriff to consider.
- (d) In the event that the Sheriff elects to cause further investigation to be conducted, the employee shall be provided with the results prior to the imposition of any discipline.
- (e) The employee may thereafter have the opportunity to further respond orally or in writing to the Sheriff on the limited issues of information raised in any subsequent materials.

111.12 RESIGNATIONS/RETIREMENTS PRIOR TO DISCIPLINE

In the event that a member tenders a written resignation or notice of retirement prior to the imposition of discipline, it shall be noted in the file. The tender of a resignation or retirement by itself shall not serve as grounds for the termination of any pending investigation or discipline.

111.13 POST-DISCIPLINE APPEAL RIGHTS

Non-probationary employees have the right to appeal a suspension without pay, punitive transfer, demotion, reduction in pay or step, or termination from employment. The employee has the right to appeal using the procedures established by any collective bargaining agreement, memorandum of understanding and/or personnel rules.

In the event of punitive action against an employee covered by civil service, the appeal process shall be in compliance with RCW 41.12.090 and RCW 41.14.120.

111.14 PROBATIONARY EMPLOYEES AND OTHER MEMBERS

At-will and probationary employees and members other than non-probationary employees may be disciplined and/or released from employment without adherence to any of the procedures set out in this policy, and without notice or cause at any time. These individuals are not entitled to any rights under this policy. However, any of these individuals released for misconduct should be

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afforded an opportunity solely to clear their names through a liberty interest hearing, which shall be limited to a single appearance before the Sheriff or the authorized designee.

In cases where an individual has been absent for more than a week or when additional time to review the individual is considered appropriate, the probationary period may be extended at the discretion of the Sheriff.

111.15 RETENTION OF PERSONNEL INVESTIGATION FILES

All personnel complaints shall be maintained in accordance with Washington state records retention guidelines.

111.16 NOTIFICATION TO CRIMINAL JUSTICE TRAINING COMMISSION CERTIFICATION BOARD

Upon termination of a peace officer for any reason, including resignation, the agency of termination shall, within 15 days of the termination, notify the Washington State Criminal Justice Training Commission (CJTC) on a personnel action report form provided by the commission. The agency of termination shall, upon request of the CJTC, provide such additional documentation or information as the commission deems necessary to determine whether the termination provides grounds for revocation of the peace officer's certification (RCW 43.101.135).

Anti-Retaliation

112.1 PURPOSE AND SCOPE

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

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

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

112.2 POLICY

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

112.3 RETALIATION PROHIBITED

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

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

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

Anti-Retaliation

112.4 COMPLAINTS OF RETALIATION

Any member who feels he/she has been retaliated against in violation of this policy should promptly report the matter to any supervisor, any command staff member, the Sheriff, or the county Director of Human Services.

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

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

112.5 SUPERVISOR RESPONSIBILITIES

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

The responsibilities of supervisors include but are not limited to:

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

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112.6 COMMAND STAFF RESPONSIBILITIES

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

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

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

112.7 WHISTLE-BLOWING

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

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

112.7.1 DISPLAY OF REPORTING PROCEDURES

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

112.8 RECORDS RETENTION AND RELEASE

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

112.9 TRAINING

This policy should be reviewed with each new member.

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

Chapter 2 - Organization and Administration

Drug- and Alcohol-Free Workplace

200.1 PURPOSE AND SCOPE

The purpose of this policy is to establish clear and uniform guidelines regarding drugs and alcohol in the workplace.

200.2 POLICY

It is the policy of this office to provide a drug- and alcohol-free workplace for all members.

200.2.1 PURCHASE OR POSSESSION OF DRUGS OR ALCOHOL ON-DUTY

Employees shall not purchase or possess alcohol or other controlled substances on office property, at work or while on-duty.

Employees shall not illegally manufacture any alcohol or drugs at any time.

200.2.2 USE OF PRESCRIBED MEDICATIONS

Employees who are medically required to take prescription medications during work hours shall ensure that no medications are taken that impair their ability to perform their work. Possession of medical marijuana or being under the influence of marijuana on- or off-duty is prohibited and may lead to disciplinary action.

Any employee who is required to take any medication with side effects which might impair his/her ability to fully and safely perform all requirements of the position shall report the need for such medication to the immediate supervisor. No employee shall be permitted to work or drive an office-owned or leased vehicle while taking such potentially impairing medication without a written release from a physician.

200.3 GENERAL GUIDELINES

Alcohol and drug use in the workplace or on office time can endanger the health and safety of office members and the public. Such use shall not be tolerated (41 USC § 8103).

Members who have consumed an amount of an alcoholic beverage or taken any medication, or combination thereof, that would tend to adversely affect their mental or physical abilities shall not report for duty. Affected members shall notify the Shift Supervisor or appropriate supervisor as soon as the member is aware that he/she will not be able to report to work. If the member is unable to make the notification, every effort should be made to have a representative contact the supervisor in a timely manner. If the member is adversely affected while on-duty, he/she shall be immediately removed and released from work (see Work Restrictions in this policy).

200.3.1 USE OF MEDICATIONS

Members should avoid taking any medications that will impair their ability to safely and completely perform their duties. Any member who is medically required or has a need to take any such medication shall report that need to his/her immediate supervisor prior to commencing any on-duty status.

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No member shall be permitted to work or drive a vehicle owned or leased by the Office while taking any medication that has the potential to impair his/her abilities, without a written release from his/her physician.

Possession of medical marijuana or being under the influence of marijuana on- or off-duty is prohibited and may lead to disciplinary action (RCW 69.51A.060).

200.4 MEMBER RESPONSIBILITIES

Members shall report for work in an appropriate mental and physical condition. Members are prohibited from purchasing, manufacturing, distributing, dispensing, possessing, or using controlled substances or alcohol on office premises or on office time (41 USC § 8103). The lawful possession or use of prescribed medications or over-the-counter remedies is excluded from this prohibition.

Members who are authorized to consume alcohol as part of a special assignment shall not do so the extent of impairing on-duty performance.

Members shall notify a supervisor immediately if they observe behavior or other evidence they believe demonstrates that a fellow member poses a risk to the health and safety of the member or others due to drug or alcohol use.

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

200.5 EMPLOYEE ASSISTANCE PROGRAM

There may be available a voluntary employee assistance program to assist those who wish to seek help for alcohol and drug problems (41 USC § 8103). Insurance coverage that provides treatment for drug and alcohol abuse also may be available. Employees should contact the Department of Human Resources, their insurance providers, or the employee assistance program for additional information. It is the responsibility of each employee to seek assistance before alcohol or drug problems lead to performance problems.

200.6 WORK RESTRICTIONS

If a member informs a supervisor that he/she has consumed any alcohol, drug or medication that could interfere with a safe and efficient job performance, the member may be required to obtain clearance from his/her physician before continuing to work.

If the supervisor reasonably believes, based on objective facts, that a member is impaired by the consumption of alcohol or other drugs, the supervisor shall prevent the member from continuing work and shall ensure that he/she is safely transported away from the Office.

200.7 REQUESTING SCREENING TESTS

A supervisor may request an employee to submit to a screening test under any of the following circumstances:

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- (a) The supervisor reasonably believes, based upon objective facts, that the employee is under the influence of alcohol or drugs that are impairing his/her ability to perform duties safely and efficiently.
- (b) The employee discharges a firearm, other than by accident, in the performance of his/her duties.
- (c) During the performance of his/her duties, the employee drives a motor vehicle and becomes involved in an incident that results in bodily injury to him/herself or another person, or substantial damage to property.

200.7.1 SUPERVISOR RESPONSIBILITY

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

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

200.7.2 SCREENING TEST REFUSAL

An employee may be subject to disciplinary action if he/she:

- (a) Fails or refuses to submit to a screening test as requested.
- (b) After taking a screening test that indicates the presence of a controlled substance, fails to provide proof within 72 hours after being requested that he/she took the controlled substance as directed, pursuant to a current and lawful prescription issued in his/her name.
- (c) Violates any provisions of this policy.

200.8 COMPLIANCE WITH THE DRUG-FREE WORKPLACE ACT

No later than 30 days following notice of any drug statute conviction for a violation occurring in the workplace involving a member, the Office will take appropriate disciplinary action, up to and including dismissal, and/or requiring the member to satisfactorily participate in a drug abuse assistance or rehabilitation program (41 USC § 8104).

200.9 CONFIDENTIALITY

The Office recognizes the confidentiality and privacy due to its members. Disclosure of any information relating to substance abuse treatment, except on a need-to-know basis, shall only be with the express written consent of the member involved or pursuant to lawful process.

The written results of any screening tests and all documents generated by the employee assistance program are considered confidential medical records and shall be maintained separately from the employee's other personnel files.

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201.1 PURPOSE AND SCOPE

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

201.2 POLICY

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

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

201.3 BUDGET PLAN

The Corrections Chief will establish a system of quarterly projections of expenditures for personnel, operating expenses, equipment and capital projects. A record of a historical pattern of expenditures along with a justification for new expenditures should be used as the supporting documentation in the development of the budget plan.

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

201.4 FISCAL ACCOUNTING AND MANAGEMENT OF APPROVED BUDGET

The Accountant is responsible for monitoring the facility's progress toward meeting its budget objectives throughout the fiscal year. Data on key performance indicators should be collected and evaluated at regular intervals and reviewed by the Sheriff and the Corrections Chief's budget officials and other policy-makers. Reports should contain at a minimum the following information:

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

When the Corrections Chief receives the monthly budget report, he/she should review all of the expenditure accounts for risk indicators, such as:

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- Significant variations in expenditures in an account used consistently, where the amounts charged are expected to vary little, if any, from month to month.
- Expenditures that are significantly beyond the forecasted amounts or whether the year-to-date percentages expended are significantly higher than the percentage of time elapsed.
- Large balances of/or long-term outstanding encumbrances.

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

201.4.1 PAYMENT REQUESTS FOR STATE INMATES

Any detention facility housing an inmate who is the financial responsibility of the state shall complete the Department of Corrections form noting the identity of the inmate, the type of state responsibility, the method of notification for availability for movement and the number of days for which the state is financially responsible (RCW 70.48.450).

201.4.2 USE OF CASH FUNDS

The Accountant is responsible for documenting the use of cash funds, including receipts, supervisory approval and periodic audit.

201.5 TRANSFERRING FUNDS AMONG BUDGET CATEGORIES

Unless otherwise specified, the transfer of funds among budget categories may require the approval of the County Administrator.

201.6 FINANCIAL AUDITS

The Sheriff should ensure that a financial audit of the facility is conducted annually. The audit shall conform to generally accepted auditing standards.

201.6.1 FINANCIAL AUDITS OF THE INMATE WELFARE FUND

An annual financial audit of the Inmate Welfare Fund shall be conducted and shall include the office's budget and any monies placed into the Inmate Welfare Fund. The methods used for collecting, safeguarding and disbursing monies, including inmates' personal funds held by the facility, shall comply with accepted accounting procedures.

201.6.2 POSITION CONTROL

Position control is the process used by the Office to exercise control over the size and cost of its workforce. It ensures that any new, regular employee added to an agency's payroll basis is filling a position that has been approved and budgeted, and that the rate of pay for the position is within the salary range for the job classification in which the position resides (RCW 41.14.140).

This facility is a labor-intensive function and control of payroll expenditures is a crucial part of managing the facility budget. In order to exercise control of payroll expenditures, the Office will utilize a system of position control as part of its ongoing budget process.

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201.7 STAFFING PLAN

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

The Corrections Chief should adhere to the following strategies for the management of position control and personnel costs (RCW 41.14.140):

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

201.7.1 INSURANCE REQUIREMENTS

The Office shall ensure, by way of office risk managers, the procurement of adequate liability coverage of the correctional facility operations. Coverage shall include, at minimum, workers' compensation, civil liability and the bonds in accordance with applicable law.

201.7.2 PERFORMANCE MONITORING

Performance monitoring necessitates the establishment of benchmarks and performance targets. The Accountant shall develop budget benchmarks so that actual performance output can be

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compared with these targets to determine whether this facility is meeting the goals and objectives articulated in the budget.

A quarterly monitoring report assessing the effectiveness, efficiency and quality of custody operations will be provided to the Sheriff for the purpose of developing the budget for the following year.

Supervision of Inmates - Minimum Requirements

202.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure the safety and security of the facility through the application of appropriate staffing levels.

202.2 POLICY

It is the policy of this facility to ensure the safety and security of citizens, staff and inmates through compliance with state-mandated staffing requirements. In an effort to protect the dignity and privacy rights of the inmates and to comply with existing case law, at least one member of the same sex of each inmate represented in the population will be on-duty at all times.

202.3 SUPERVISION OF INMATES

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

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

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

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

The Corrections Chief or the authorized designee shall be responsible for developing staffing plans to comply with this policy. Records of staff deployment should be maintained in accordance with established records retention schedules.

202.4 SEPARATION OF DUTIES

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

Prohibition on Inmate Control

203.1 PURPOSE AND SCOPE

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

203.1.1 INMATE STATUS

An individual does not become an inmate (or pretrial detainee) until such time as the law enforcement officer responsible for the arrest and detention of the individual surrenders the individual to the jail along with sufficient legal documentation supporting the jail's authority to take custody of the individual.

203.2 POLICY

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

203.3 EDUCATION, DRUG OR ALCOHOL PROGRAM ASSISTANTS

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

Equipment Inventory and Supplies

204.1 PURPOSE AND SCOPE

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

204.2 POLICY

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

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

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

204.3 PURCHASING

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

Personnel with spending authority should adhere to the following strategies:

- (a) Be knowledgeable about the county's requirements and procedures for purchasing goods and services.
- (b) Establish a working relationship with this facility's Accountant.
- (c) Provide the Accountant with information describing the types of goods and services required to operate the facility.
- (d) Ensure that staff with spending authority follow procedures that outline the process for submission and approval of purchase requisitions.
- (e) Review purchase requisitions to verify the need, urgency and priority.
- (f) Monitor service contracts to ensure that this facility is receiving the scope and quality of services specified in the contract.
- (g) Regularly monitor expenditures to make certain the purchase of goods and services is charged to the appropriate accounts and within budget limits.
- (h) Keep purchase records to maintain the integrity and availability of purchasing documents, including requisitions, purchase orders, receiving reports and invoices.

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204.4 EQUIPMENT INVENTORY

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

Tool and Culinary Equipment Control

205.1 PURPOSE AND SCOPE

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

205.2 POLICY

It is the policy of this facility to securely store, inventory, control and monitor the use of tools and culinary equipment to ensure accountability and the secure use of these items.

205.2.1 CUSTODY TOOLS

Tools include all implements that are maintained within the secure perimeter of the facility to complete specific tasks. These tools include, but are not limited to, mops, brooms, dustpans and floor polishers.

All tools, culinary items or medical equipment shall be locked in secure cabinets or storage rooms when not in use. Tools should be inspected regularly for damage or wear and repaired or replaced as necessary.

Any time tools are brought into a secure area where inmates are present, staff supervising the area shall count the number of tools brought in to ensure that the same number of tools are taken out.

Any tool that is used within the secure perimeter of the facility must be closely monitored and controlled by the staff supervising the area so that it cannot be used as a weapon. Inmates who are assigned tasks that require these tools shall be closely supervised.

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

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

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

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205.2.2 MAINTENANCE OR CONSTRUCTION TOOLS

Maintenance or construction tools are those tools and equipment that are brought into and out of the secure perimeter of the facility by employees or contractors to facilitate repairs or construction of the physical plant. Only the tools and equipment needed specifically for the intended work will be permitted into the facility. All tools and equipment will be inventoried and a list of the tools will be provided to the control booth prior to any tools or equipment being brought inside the secure perimeter.

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

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

205.2.3 EXTERIOR-USE TOOLS

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

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

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

Any tool issued to an inmate will be logged with the inmate's name, the tool type and serial number documented. When an inmate worker is finished with that tool, the responsible staff member shall check the tool against the check-out log and document its return. Inmate workers shall not be permitted to pass tools between each other except under the direct supervision of a deputy.

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

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

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205.2.4 KITCHEN EQUIPMENT

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

All kitchen knives or metal tools with sharp edges shall be stored in a locked cabinet. There shall be an outline of the tool's assigned location in the cabinet so that any tool missing from the cabinet can be easily identified. When in use, all knives shall be tethered to the work area. All tools shall be returned to the secure cabinet when not in use.

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

Each tool issued will be assigned to an individual inmate and logged. The inmate's name and the tool type will be documented. When an inmate worker is finished with a tool, the tool shall be checked in with the deputy and documented. Inmate workers shall not be permitted to pass tools between each other except under the direct supervision of a deputy.

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

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

205.2.5 SERVING AND INDIVIDUAL EATING TOOLS

Serving tools and individual eating tools are those culinary tools located outside of the kitchen. Only inmate workers who are assigned to serve food shall be in control of serving tools. These tools shall be assigned to each inmate worker by the kitchen deputy prior to leaving the kitchen. The tool type shall be documented. Upon returning to the kitchen from serving meals, the inmate workers shall individually check their tools in with the kitchen deputy, who shall document each one.

In the event that a serving tool is missing, the kitchen deputy shall notify a supervisor and a search for the tool shall be initiated.

Eating utensils (forks/spoons/sporks) shall be counted by the deputy supervising the meal service prior to and at the completion of each meal. In the event that a utensil is missing, the housing unit shall be immediately locked down and a supervisor notified. A thorough search of the housing unit shall be initiated to locate the tool.

205.3 TOOL MAINTENANCE

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

Disposition of Evidence

206.1 PURPOSE AND SCOPE

Searches for contraband in this facility will frequently net evidence that can be used to prosecute individuals in a court of law or hold them accountable in a disciplinary hearing. The proper handling of evidence will ensure that it is stored in a secure manner and admissible in a court of law or disciplinary hearing. This policy will provide staff with direction on the proper handling of evidence and contraband.

206.2 POLICY

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

206.2.1 INITIAL SEIZURE OF EVIDENCE

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

- (a) Unload any firearm located in the approved loading/unloading area outside of the facility. If it is a revolver, the cylinder should be left open. If it is a semiautomatic pistol, the magazine shall be removed and the slide locked back in an open position. The cartridges and/or magazine will be packaged separately and booked with the firearm.
- (b) Sheath any knife or other stabbing instrument in its holster (if any), or attach (tape) stiff cardboard to completely cover the blade.
- (c) Place needles, such as syringes, into a hard plastic container that cannot be punctured by the needle.

206.2.2 PROPERTY BOOKING PROCEDURE

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

- (a) Complete the property form describing each item of property separately, listing all serial numbers, owner's name, finder's name and other identifying information or markings.
- (b) Mark each item of evidence with the booking employee's initials and the date booked using the appropriate method to prevent defacing or damaging the value of the property.
- (c) Complete an evidence/property tag and attach it to each package or envelope in which the property is stored.

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- (d) Place the case number in the upper right corner of the bag or in the appropriate field of the evidence/property tag.
- (e) The original property form shall be submitted with the case report. A copy shall be placed with the property in the temporary property locker or with the property if it is stored somewhere other than a property locker.
- (f) When the property is too large to be placed in a locker, the item may be retained in the secure supply room or another area that can be secured from unauthorized entry. Place the completed property form into a numbered locker indicating the location of the property.

206.2.3 CONTROLLED SUBSTANCES

In instances where controlled substances have been introduced into the facility, the contraband shall be seized, and immediately transferred to a commissioned law enforcement officer for investigation. At no time will controlled substances be retained in the facility.

206.2.4 EXCEPTIONAL HANDLING

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

206.2.5 RECORDING OF PROPERTY

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

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

Any changes in the location of property held by the Office shall be noted in the records management system.

206.2.6 PROPERTY CONTROL

Each time the evidence technician receives property or releases property to another person, he/she shall enter this information on the property control card. Deputies desiring property for court shall contact the evidence technician prior to the court day.

206.2.7 RESPONSIBILITY OF OTHER PERSONNEL

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

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

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206.2.8 TRANSFER OF EVIDENCE TO CRIME LABORATORY

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

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

206.2.9 STATUS OF PROPERTY

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

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

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

206.2.10 AUTHORITY TO RELEASE PROPERTY

The prosecutor, assigned detective, or a supervisor shall authorize the disposition or release of all evidence and property coming into the care and custody of the Office.

206.2.11 RELEASE OF PROPERTY

All reasonable attempts shall be made to identify the rightful owner of found property or evidence not needed for an investigation.

Release of property shall be made upon receipt of an authorized release form, listing the name and address of the person to whom the property is to be released. The release authorization shall be signed by the authorizing prosecutor, supervisor, or detective and must match the items listed on the property form or must specify the items to be released. Release of all property shall be documented on the property form.

With the exception of firearms and other property specifically regulated by statute, found property and property held for safekeeping shall be held for a minimum of 90 days. During such period, property personnel shall attempt to contact the rightful owner by telephone and/or mail when sufficient identifying information is available. Property not held for any other purpose and not claimed within 90 days after notification (or receipt, if notification is not feasible) may be auctioned to the highest bidder at a properly published public auction. If such property is not sold at auction or otherwise lawfully claimed, it may thereafter be destroyed in accordance with all applicable laws,

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ordinances and regulations. The final disposition of all such property shall be fully documented in related reports.

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

206.2.12 RESPONSIBILITY FOR CONTROLLED SUBSTANCES

The law enforcement authority will be responsible for the storage, control and destruction of all controlled substances coming into the custody of this office, including paraphernalia.

206.2.13 DISPOSITION OF PROPERTY

All property not held for evidence in a pending criminal investigation or proceeding, and held for six months or longer because the owner has not been located or has failed to claim the property, may be disposed of in compliance with existing laws, upon receipt of proper authorization for disposal. The evidence technician shall request a disposition or status on all property which has been held in excess of 120 days, and for which no disposition has been received from a supervisor or detective.

206.2.14 UNCLAIMED MONEY

All unclaimed money shall be turned over to the Evidence Technician and handled in accordance with current found property procedures.

Records and Data Practices

207.1 PURPOSE AND SCOPE

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

207.2 ACCESS TO CRIMINAL RECORDS

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

Access to confidential paper or electronically generated records in this facility is restricted at various locations according to job function and the need to know. Employees working in assigned areas will only have access to the information that is necessary for the performance of their duties. Granting access to other employees or anyone outside of the work area must meet with supervisory approval. All requests for information received from outside the Office shall be immediately forwarded to the Corrections Chief for personnel assigned to process records request under the Public Records Act RCW 42.56.

Custody staff, volunteers and contractors shall not access, disclose or permit the disclosure or use of such files, documents, reports, records, video or audio recordings or other confidential information except as required in the performance of their official duties and in accordance with office policies, statutes, ordinances and regulations related to data practices. Photographs and information concerning a person convicted of a sex offense as defined in RCW 9.94A.30 may be released as provided in RCW 4.24.550.

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

207.3 RETENTION OF RECORDS

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

207.4 STAFF TRAINING

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

Research Involving Inmates

208.1 PURPOSE AND SCOPE

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

208.2 POLICY

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

208.3 AUTHORIZATION REQUIREMENTS

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

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

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

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

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

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

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

208.4 LEGAL CONSIDERATIONS

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

208.5 INMATES IN COMMUNITY-BASED RESEARCH

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

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

208.6 HUMAN RESEARCH STUDIES

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

Inmate Records

209.1 PURPOSE AND SCOPE

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

209.2 POLICY

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

209.2.1 RECORD MAINTENANCE

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

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

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

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

209.2.2 RELEASE OF INMATE RECORDS

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

209.2.3 ELECTRONIC RECORD MAINTENANCE

All inmate records and data maintained in an electronic format shall be accessible only through a login/password-protected system capable of documenting by name, date and time any person who has accessed the information. The Corrections Chief shall be responsible for working with the information technology personnel to ensure the security of the data and to develop and maintain a copy of the security plan.

209.2.4 RECORDS RETENTION

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

209.3 INFORMATION SHARING REGARDING IMMIGRATION STATUS

State

Members shall not (RCW 10.93.160):

- (a) Inquire into or collect information about an individual's immigration or citizenship status, or place of birth unless there is a connection between such information and an investigation into a violation of state or local criminal law.
- (b) Provide information pursuant to notification requests from federal immigration authorities for the purposes of civil immigration enforcement, except as required by law.
- (c) Provide nonpublicly available personal information about an individual to federal immigration authorities in a noncriminal matter, except as required by state or federal law.
- (d) Give federal immigration authorities access to interview individuals about a noncriminal matter while they are in custody, except as required by state or federal law, a court order, or written consent of the individual.
- (e) Allow a federal immigration authority to conduct an interview regarding federal immigration violations with a person who is in custody if the person has not consented in writing to be interviewed. In order to obtain consent, the person shall be provided with an oral explanation and a written consent form that explains the purpose of

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the interview, that the interview is voluntary, and that the person may decline to be interviewed or may choose to be interviewed only with the person's attorney present.

- (f) Detain individuals solely for the purpose of determining their immigration status.
- (g) Take a person into custody or hold a person in custody:
 - 1. On an immigration hold request
 - 2. Based solely on a civil immigration warrant issued by a federal immigration authority
 - 3. Solely for the purposes of determining immigration status
- (h) If immigration-related information is restricted under RCW 10.93.160, or other Washington statute, collection, use or disclosure of the information may only be done if:
 - 1. required to comply with an identified state or federal law, or
 - 2. in response to a lawful court order. RCW 10.93.160(16)

209.3.1 NON-DISCLOSURE OF PERSONAL INFORMATION

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

Report Preparation

210.1 PURPOSE AND SCOPE

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

210.2 REPORT PREPARATION

Employees should ensure that reports are sufficiently detailed for their purpose and free from errors prior to submission. Reports shall be prepared by the staff assigned to investigate or document an incident, approved by a supervisor, and submitted to the Corrections Chief or the authorized designee in a timely manner. Reports related to any incident resulting in death, serious injury, or endangerment to staff, inmates, or a visitor; an escape; a major disturbance; a facility emergency; or an unsafe condition at the facility shall be submitted to the Corrections Chief as soon as practicable but within 24 hours of the incident. It is the responsibility of the assigned employee to ensure that all the above-listed reports meet this requirement or that supervisory approval has been obtained to delay the report. The supervisor must determine whether the report will be available in time for appropriate action to be taken, such as administrative notifications or resolution, investigative leads, or an inmate disciplinary proceeding.

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

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

210.3 REQUIRED REPORTING

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

210.3.1 CRIMINAL ACTIVITY REPORTING

When an employee responds to an incident, or as a result of self-initiated activity, and becomes aware of any activity where a crime has occurred, the employee is required to document the activity. The fact that a victim is not desirous of prosecution is not an exception to documentation.

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210.3.2 INCIDENT REPORTING

Incident reports generally serve as an in-house notation of occurrences in the facility and to initiate, document and support the inmate disciplinary process. The Office shall establish a filing system that differentiates between incident reports, crime reports, and disciplinary actions. This policy does not require the duplication of information on two different forms. Where both exist, cross-referencing facilitates retrieval of one or both.

Incidents that shall be documented using the appropriate approved report include:

- (a) Non-criminal incidents of rule violations by inmates.
- (b) Attempted suicide or suicidal ideation on the part of an inmate.
- (c) Non-criminal breaches of security or evidence of an escape attempt.
- (d) Non-criminal security threats, including intelligence related to correctional facility activities.
- (e) Significant incidents related to medical issues, health, or safety in the correctional facility.
- (f) Discovery of contraband in the possession of inmates or their housing areas.
- (g) Detaining or handcuffing any visitor at the facility.
- (h) Traffic collisions involving office vehicles.
- (i) Risk management incidents, including injuries to inmates and lost or damaged property.
- (j) Accidental injuries of staff, inmates, or the public.
- (k) Unusual occurrences.

210.3.3 DEATHS

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

Reporting of deaths will be handled in accordance with the Reporting In-Custody Deaths Policy.

210.3.4 INJURY OR DAMAGE BY OFFICE PERSONNEL

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

210.3.5 USE OF FORCE

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

210.4 GENERAL POLICY OF EXPEDITIOUS REPORTING

In general, all employees and supervisors shall act with promptness and efficiency in the preparation and processing of all reports. Incomplete reports, unorganized reports, or reports

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delayed without supervisory approval are not acceptable. Reports shall be processed according to established priorities or according to special priority necessary under exceptional circumstances.

210.5 REPORT CORRECTIONS

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

210.6 REPORT CHANGES OR ALTERATIONS

Reports that have been approved by a supervisor and submitted to the Records Division for filing and distribution shall not be modified or altered except by way of a supplemental report. Reviewed reports that have not yet been submitted to the Records Division may be corrected or modified by the authoring employee only with the knowledge and authorization of the reviewing supervisor. Reviewing supervisors should not alter reports. When modifications are required, these should be the responsibility of the authoring employee.

210.7 POLICY

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

210.8 ELECTRONIC SIGNATURES

The Office has established an electronic signature procedure for use by all employees. The Corrections Chief or the authorized designee shall be responsible for maintaining the electronic signature system and ensuring that each employee creates a unique, confidential password for his/her electronic signature.

- (a) Employees may only use their electronic signature for official reports or other official communications.
- (b) Each employee shall be responsible for the security and use of his/her electronic signature and shall promptly notify a supervisor if the electronic signature has or may have been compromised or misused.

Key and Electronic Access Device Control

211.1 PURPOSE AND SCOPE

The control and accountability of facility keys and electronic access devices are vital factors in maintaining a safe and secure environment for inmates, staff, volunteers, contractors and the public. This policy outlines the methods that the Office will use in maintaining strict security of its keys and electronic access devices. For ease of reference, the term “key” as used in this policy includes all physical means of access to or exit from the secure areas of the facility.

211.2 POLICY

It is the policy of this office that all keys used to access secure areas of the facility or to exit the secure areas of the facility are strictly controlled. Employees and supervisors will be held accountable for the security and safety of the facility. All key control activities shall be accurately documented on a daily basis.

211.2.1 KEY IDENTIFICATION

All keys that open any doors within the facility shall be marked with unique identification codes that will allow for quick inventory. Keys that are bundled together as a set shall be numbered or coded with a tag to identify that set and the number of keys on the ring. The identifying numbers or code on keys shall not correspond to numbers/codes on locks.

A separate secure document identifying all keys will be maintained.

211.2.2 KEYSSET CONTENTS

Keysets issued to staff for use within the secure perimeter of the facility shall not contain any key that would permit access to areas outside the secure perimeter. The armory key shall not be permitted inside the secure perimeter. Exterior door keys shall not be permitted inside the facility except during an emergency requiring access to the exterior doors.

211.2.3 KEY CONTROL

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

Under no circumstances shall an employee pass a key or keyset to another employee. All keys must be checked out through the control process. Employees shall not possess any key for which they have not been authorized.

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

The deputy assigned to Central Control shall, at the beginning and end of their respective shifts, inventory the facility keys. All discrepancies must be reported immediately to the supervisor. Under no circumstances will security keys be made available to inmates regardless of their status.

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211.2.4 LOCK POLICY

All security perimeter entrances, Central Control doors and cell doors shall be kept locked, except when used for admission or exit of employees, inmates or visitors, and in an emergency. Operators of sallyports shall ensure that only one of the doors of a sallyport is opened at any time for entry or exit purposes, except where the entry or exit of emergency personnel requires the operator to override the doors and allow for rapid entry or exit. Each time the override function is engaged, the officer must submit a written report to the on-duty supervisor prior to the end of his/her shift.

211.2.5 TESTING

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

211.2.6 EXTERIOR DOOR AND ARMORY KEYS

Keys for exterior doors to the facility and the armory shall be kept in a secure location, outside of the facility's secure perimeter.

211.2.7 MISSING KEYS

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

A methodical and thorough search of the entire facility will be made by the on-duty staff. Additional staff may be called to assist with the search. If, after a thorough search, the key or keyset is not located, the Corrections Chief will determine whether to re-key any locks that may have been compromised, and whether this should be done immediately.

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

211.2.8 DAMAGED KEYS OR LOCKS

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

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211.3 KEY CONTROL RECORDS

A shift roster will be maintained for the accounting and security of all keysets. Each shift is responsible for reporting any key malfunctions or missing keysets. Key control measures shall be documented by the control room staff on logs, and the records retained in accordance with established records retention schedules.

211.4 EMERGENCY KEY SET

At least one key set containing every key for the facility shall be kept separate from all other key sets in a secure location and made quickly accessible to the Corrections Chief, Shift Supervisor, or an authorized designee in the event of an emergency.

211.5 ELECTRONIC ACCESS DEVICES

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

Daily Activity Logs and Shift Reports

212.1 PURPOSE AND SCOPE

Accurate and legible records are vital to the management of the facility. They provide a means for managers to review events and emergency situations that have occurred within the facility.

This policy provides guidance for creating and maintaining accurate and legible records necessary for the management of the facility.

212.2 POLICY

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

212.3 PROCEDURES

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

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

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

212.4 SHIFT ACTIVITY LOG

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

- Personnel on-duty
- Bookings and releases
- Formal counts

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Daily Activity Logs and Shift Reports

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

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

212.5 SHIFT REPORT

Each member assigned to a security post, as well as the supervisor, shall prepare a shift report for the oncoming staff. This report shall include the following:

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

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Daily Activity Logs and Shift Reports

- Unusual occurrences

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

212.6 SUPERVISOR RESPONSIBILITIES

Supervisors shall review the daily activity log and shift report during the course of each shift. Supervisors shall sign and include the date and time of review on each log or report. When appropriate, supervisors should include comments in the logbook with regard to an incident or unusual occurrence in the facility.

Whenever a major event in the facility requires a coordinated command response, the Incident Commander (IC) should designate someone to keep a running log that identifies, at a minimum, the following:

- Date and time the incident began
- Specific location of the incident
- Times of significant response measures taken during the incident
- Name, identification number and time of arrival of personnel on-scene
- Orders issued by the IC
- Significant events that occurred as a result of the incident

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

Personnel Records

213.1 PURPOSE AND SCOPE

This policy governs the maintenance, retention and access to the personnel files of employees in accordance with established law. The personnel records of all employees contain confidential information and shall not be released or information disclosed from them except as prescribed below. This policy applies to all past and current personnel (RCW 42.56.230).

213.1.1 PERSONNEL FILES DEFINED

Personnel records - Any file maintained under an individual's name by his/her employing agency and containing records relating to any of the following:

- (a) Personal data, including marital status, family members, educational and employment history, home address, or similar information
- (b) Medical or psychological history
- (c) Election of employee benefits or affiliations
- (d) Employee advancement, appraisal, discipline, training, or employee performance reports
- (e) Complaints or investigation of complaints against the employee alleging misconduct or performance deficiencies, whether filed by a citizen or another agency or department
- (f) Any dispositions of such complaints
- (g) Any other information, the disclosure of which would constitute an unwarranted invasion of personal privacy

213.2 PERSONNEL RECORD LOCATIONS

Employee records will generally be maintained in any of the following:

Office file - That file which is maintained in the office of the Sheriff as a permanent record of an employee's service with this office.

Division file - Any file that is separately maintained internally by an employee's supervisor for the purpose of completing timely performance evaluations.

Supervisor log entries - Any written comment, excluding actual performance evaluations, made by a supervisor concerning the conduct of an employee of this office.

Training file - Any file that documents the training records of an employee.

Internal affairs file - Those files that contain complaints of employee misconduct and all materials relating to an investigation into such allegations, regardless of disposition.

Medical files - The file that contains only medical information relating to an employee's ability to perform the essential functions of his/her job or other health-related matters. This file is maintained separately from any other files.

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Pre-employment personnel files, including background information, psychological evaluations and polygraph results, will also be maintained in the office of the Sheriff or his/her designee or by the Department of Human Resources. Such files shall be kept separately from other personnel files.

213.3 REQUESTS FOR DISCLOSURE OF PERSONNEL FILES

Requests for the disclosure of any information contained in any personnel record may be made by mail, email, fax, orally, or in person. Since the format of such requests may be strictly governed by law with specific responses required, all such requests shall be promptly brought to the attention of the Shift Supervisor, the custodian of records, or other person charged with the maintenance of such records (WAC 44-14-03006).

The responsible person shall further ensure that an appropriate response to the request is made in a timely manner, in accordance with applicable law. In many cases this will require assistance of legal counsel, as the disclosure of personnel, medical, and similar files can constitute an unwarranted invasion of personal privacy or be subject to other protections.

All requests for disclosure that result in access to an employee's personnel file shall be logged in the corresponding file.

213.3.1 SUBPOENAS

A subpoena duce tecum for personnel files may be issued by a lawyer or a court. Any subpoena duce tecum should be promptly forwarded to:

- (a) the shift supervisor,
- (b) the custodian(s) of the requested records,
- (c) the employee whose records have been subpoenaed who may independently seek to quash the subpoena, and
- (d) the Skagit County Prosecutor's Office

All questions regarding compliance with any subpoena or subpoena duces tecum should be promptly referred to the Prosecuting Attorney's Office. The prosecuting attorney may seek to quash the subpoena or restrict disclosure.

213.3.2 RELEASE OF CONFIDENTIAL INFORMATION

Except as provided by this policy or pursuant to lawful process, information contained in any personnel file shall not be disclosed to any unauthorized person without the prior written consent of the involved employee, written authorization of the Sheriff or the authorized designee, or unless otherwise required by law.

Any person who willfully, maliciously, and with the intent to obstruct justice or the due administration of the laws, publishes, disseminates or otherwise discloses confidential personnel information without legal authority may be subject to prosecution and disciplinary action.

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213.3.3 REQUESTS FOR DISCLOSURE OF FORMER EMPLOYEE FILES

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

213.3.4 NOTICE TO MEMBER

Upon receipt of a request for information located exclusively in a member's personnel records, the custodian of records is responsible for providing notice to the member, the union representing the member, and to the requestor, that includes (RCW 42.56.250):

- (a) The date of the request.
- (b) The nature of the requested record relating to the member.
- (c) That information in the record will be released if not exempt from disclosure at least 10 days from the date the notice is made.
- (d) That the member may seek to enjoin release of the records under RCW 42.56.540 (court protection of public records).

213.4 EMPLOYEE ACCESS TO OWN FILE

Any employee may request access to his/her own personnel file during normal business hours. The request should be directed to the individual responsible for maintaining such files. Any employee seeking the removal of any item from his/her personnel file shall file a written request to the Sheriff through the chain of command. The Office may thereafter remove any such item if appropriate, or within 30 days provide the employee with a written explanation as to why the contested item will not be removed. If the contested item is not removed, the employee's request and the office's written response shall be retained with the contested item in the employee's personnel file (RCW 49.12.240).

Employees may be restricted from accessing files containing:

- (a) Ongoing internal affairs investigations to the extent that it could jeopardize or compromise the investigation pending final disposition or notice to the employee of the intent to discipline.
- (b) Confidential portions of internal affairs files that have not been sustained against the employee.
- (c) Records relating to a possible criminal investigation.
- (d) Letters of reference.
- (e) Ratings, reports, or records that were obtained prior to the employee's employment.
- (f) Ratings, reports, or records that were prepared by identifiable examination committee members, or were obtained in connection with a promotional exam; this includes test questions, scoring keys, and other examination data used for employment.

Employees, former employees, and job applicants, upon request, may receive a copy of any instrument the person signed that is related to his/her application or employment.

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213.5 TYPES OF PERSONNEL FILES

Employee personnel files can be located in any of the following places.

213.5.1 Office FILE

The Office file should contain but is not limited to the following:

- (a) Performance evaluation reports annually completed by the appropriate supervisors and signed by the affected employee shall be permanently maintained.
- (a) Records of all training (original or photocopies of available certificates, transcripts, diplomas, and other documentation) and education:
 - 1. It shall be the responsibility of the involved employee to provide the Training Sergeant or immediate supervisor with evidence of completed training/education in a timely manner.
 - 2. The Training Sergeant or supervisor shall ensure that copies of such training records are placed in the employee's office file.
- (b) Disciplinary action:
 - 1. Disciplinary action resulting from sustained internally initiated complaints or observation of misconduct shall be maintained in the individual employee's office file at least three years.
 - 2. Investigations of complaints that result in a finding of not-sustained, unfounded, or exonerated shall not be placed in the employee's office file, but will be separately maintained for the appropriate retention period in the internal affairs file.
- (c) Adverse comments, such as supervisor log entries, may be retained in the office file or division file, after the employee has had the opportunity to read and initial the comment, for a period up to two years.
 - 1. Any such employee response shall be attached to and retained with the original adverse comment.
 - 2. If an employee refuses to initial or sign an adverse comment, at least one supervisor should note the date and time of such refusal on the original comment. Such a refusal, however, shall not be deemed insubordination nor shall it prohibit the entry of the adverse comment into the employee's file.
- (d) Commendations shall be retained in the employee's office file, with a copy provided to the employee.
- (e) Personnel action reports reflecting assignments, promotions, and other changes in the employee's employment status shall be maintained in the office file.

213.5.2 DIVISION FILE

The Division File should contain but is not limited to:

- (a) Supervisor log entries, notices to correct, and other materials intended to serve as a foundation for the completion of timely performance evaluations.

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1. All materials intended for this interim file shall be provided to the employee prior to being placed in the file.
2. Duplicate copies of items that will also be included in the employee's office file may be placed in this interim file in anticipation of completing any upcoming performance evaluation.
3. Once the permanent performance evaluation form has been finalized, the underlying foundation material and/or duplicate copies may be purged in accordance with this policy.

All rules of confidentiality and disclosure shall apply equally to the division file.

213.5.3 INTERNAL AFFAIRS UNIT FILE

Internal affairs files shall be maintained under the exclusive control of the Internal Affairs Unit in conjunction with the office of the Sheriff. Access to these files may only be approved by the Sheriff or the supervisor of the Internal Affairs Unit. These files shall contain:

- (a) The complete investigation of all formal complaints of employee misconduct, regardless of disposition.
 1. Each investigation file shall be sequentially numbered within a calendar year (e.g., yy-001, yy-002).
 2. Investigation files arising from a complaint regarding any employee shall be maintained no less than two years.
- (b) Investigations that result in other than a sustained finding shall be maintained for the minimum statutory period but may not be used by the Office to adversely affect an employee's career.

213.5.4 TRAINING FILES

An individual training file shall be maintained by the Training Unit for each employee. Training files will contain records of all training (original or photocopies of available certificates, transcripts, diplomas and other documentation) and education.

- (a) It shall be the responsibility of the involved employee to provide the Training Sergeant or immediate supervisor with evidence of completed training/education in a timely manner.
- (b) The Training Sergeant or supervisor shall ensure that copies of such training records are placed in the employee's training file.

213.5.5 MEDICAL FILE

A medical file shall be maintained separately from all other files and shall contain all documents relating to the employee's medical condition and history, including, but not limited to:

- (a) Materials relating to medical leaves of absence.
- (b) Documents relating to workers' compensation claims or receipt of short- or long-term disability benefits.

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- (c) Fitness-for-duty examinations, psychological and physical examinations, follow-up inquiries and related documents.
- (d) Medical release forms, doctor's slips and attendance records that reveal an employee's medical condition.
- (e) Any other documents or material that reveals the employee's medical history or medical condition, including past, present or potential psychological or physical limitations.

213.6 PURGING OF FILES

All disciplinary files and investigations of complaints not pending litigation or other ongoing legal proceedings may be purged no sooner than two years from the underlying complaint date.

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

213.7 BRADY MATERIAL IN PERSONNEL FILES

The purpose of this section is to establish a procedure for identifying and releasing potentially exculpatory information to a defendant in a criminal prosecution. Information that a reasonable person, knowing all relevant circumstances could view as impairing the credibility of the officer is subject to disclosure in a criminal prosecution. This includes information that:

- tends to show the defendant did not do it
- tends to establish a defense
- tends to negate guilt or mitigate offense
- shows bias toward ethnic groups, gender, LGBTQ, etc.
- reports an act of dishonesty
- shows incompetent job performance such as acts that affect the integrity of an investigation

If a finding of misconduct or act(s) that may constitute potentially impeaching evidence is sustained during an investigation, a copy of the report shall be forwarded to the Prosecutor who will determine whether to add the employee's name to the Prosecutor's potential impeachment disclosure list.

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If an employee is a potential witness in any criminal case, a qualified supervisor shall examine the witness's personnel file to determine whether it contains information that qualifies as potential impeachment disclosure evidence. The Prosecuting Attorney or the Chief Criminal Deputy Prosecutor shall be notified if potential impeachment information is discovered. Questions about what information should be disclosed will be made by the Prosecuting Attorney or the Chief Criminal Deputy Prosecutor. The Prosecutor's decision to disclose is based on the quality and nature of the allegations and supporting evidence. It is not based on the status of and allegations, investigation and disclosure may be required for pending investigations, unsubstantiated allegations and uninvestigated allegations.

213.8 CONFIDENTIALITY OF ALL PERSONNEL FILES

In general, unless expressly stated by statutory exception, personnel files are subject to public disclosure. To the extent possible, all personnel records, whether or not subject to public disclosure, should be maintained as private records. Access to personnel files should be limited to only those local government employees who are needed to maintain the files and those who have a legitimate need for access or legal right to access. All of the personnel records listed in PERSONNEL RECORD LOCATIONS shall be deemed private, and access to such files will be limited to only those Department or county employees who are needed to maintain the files and those who have a legitimate need for access. Nothing in this section is intended to preclude review of personnel files by the County Administrator, Prosecuting Attorney, or other attorneys or representatives of the county in connection with official business.

Employee Compensation

214.1 PURPOSE AND SCOPE

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

214.2 POLICY

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

All compensation actions shall be in accordance with civil service rules, labor codes and MOUs for pay and benefits, and subject to fiscal conditions (RCW 41.14.150).

Administrative and Supervisory Inspections

215.1 PURPOSE AND SCOPE

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

215.2 POLICY

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

215.3 INSPECTIONS

The Corrections Chief is responsible for ensuring that scheduled and unscheduled inspections, visits and contacts are implemented to address, at minimum, the following:

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

215.3.1 AREAS TO BE INSPECTED

Supervisor inspections should occur in all occupied areas of the facility on a daily basis, including weekends and holidays. Inspections should be conducted randomly and special effort should be given to tour and informally inspect the following areas:

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

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215.4 INSPECTIONS OF SECURITY EQUIPMENT

The Corrections Chief shall be responsible for designating a qualified person to conduct weekly inspections of all security devices, identifying those in need of repair or maintenance and providing a written report of the results of the inspection. The Corrections Chief shall document all action taken to correct identified deficiencies, including maintenance records, and shall retain those records in accordance with established records retention schedules (WAC 44-14-03005).

215.5 DOCUMENTATION AND REPORTING

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

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

Perimeter Security

216.1 PURPOSE AND SCOPE

The purpose of this policy is to establish this facility's security perimeters, to ensure that incarcerated inmates remain inside the perimeter, and that visitor, vendor, volunteer and employee access is granted only with proper authorization and through designated safety vestibules and sallyports. The secure perimeter of this facility will provide protection from the escape of persons being processed, held or housed, and will act as a defense against the entry of unauthorized persons. It shall also be maintained to prevent contraband from entering the secure areas of the facility.

216.2 POLICY

All entry points to the secure perimeter of the facility shall be monitored and controlled continuously by Central Control staff.

216.2.1 VISITORS

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

216.3 PROCEDURE

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

Suspicious activity at or near the secure perimeter shall be immediately reported to the Shift Supervisor and Central Control. Individuals suspected to be in violation of any law or who are observed loitering on or around the premises may be contacted and questioned to determine the circumstances of their presence or actions. When required, Central Control shall initiate an appropriate law enforcement response.

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

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

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

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

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

Accessibility - Facility and Equipment

217.1 PURPOSE AND SCOPE

The Skagit County Sheriff's Office prohibits discrimination of persons with disabilities by making reasonable accommodations to ensure that all parts of the facility have accessible routes into the facility and program areas by staff and the general public, in compliance with the Americans with Disabilities Act (ADA).

217.1.1 DISABILITY DEFINED

The ADA defines a disability as a physical or mental impairment that substantially limits one or more major life activities. These include, but are not limited to, any disability that would substantially limit the mobility of an individual or an impairment of vision and/or hearing, speaking or performing manual tasks that require some level of dexterity. Additionally, disability includes a physical or mental impairment that would inhibit a person's ability to meet the requirements established by the Office for conducting visitation or other business in the facility.

217.2 POLICY

The Skagit County Sheriff's Office adheres to the ADA and all other applicable federal and state laws, regulations and guidelines in providing reasonable accommodations to ensure that all parts of the facility are reasonably accessible to the public and usable by staff and visitors with disabilities.

217.2.1 ACCOMMODATIONS

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

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

News Media Relations

218.1 PURPOSE AND SCOPE

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

218.2 POLICY

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

218.2.1 MEDIA REQUEST

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

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

218.3 MEDIA ACCESS

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

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

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and security of the inmates, staff or the facility itself. All information released to the media should be coordinated through the Public Information Officer or other designated spokesperson.

- (c) Media interviews with individuals who are in custody shall not be permitted without the approval of the Sheriff and the express consent of the person in custody. The supervisor shall obtain a signed waiver from the inmate prior to being interviewed, photographed or videotaped.

218.3.1 PROVIDING ADVANCE INFORMATION

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

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

218.4 SCOPE OF INFORMATION SUBJECT TO RELEASE

The Office will maintain a daily log of individuals who are currently in custody or were recently booked. Unless restricted by law and except to the extent that disclosure of a particular item of information would endanger the safety of a person involved in an investigation or would endanger the successful completion of the investigation or a related investigation, the following information on inmates and persons booked is considered public information and can be released upon request (RCW 70.48.100):

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

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- (j) Court appearance dates
- (k) Arresting agency

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

Any information related to the safety, security and maintenance of order shall be redacted before being provided to the general public. Applicable regulations for the operation of a custody facility can be made available for review by the public and inmates. Inmates can request a copy through the inmate programs staff.

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

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

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

218.4.1 RESTRICTED INFORMATION

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

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

- (a) Confidential personnel information concerning staff and volunteers of the Office.
- (b) Criminal history information.
- (c) Information that would tend to endanger the safety of any individual or jeopardize the successful completion of any ongoing investigation.
- (d) Information pertaining to pending litigation involving this office.
- (e) Information obtained in confidence.
- (f) Any information that is otherwise privileged or restricted under state or federal law.

Community Relations - Public Information Plan

219.1 PURPOSE AND SCOPE

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

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

219.2 RESPONSIBILITIES

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

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

This information is to be made available at the facility's front desk and assembled into a binder or clearly posted for public viewing. Additionally, a copy should be made available in this facility's library or provided by other means for use by inmates. At the discretion of the Sheriff, the information may also be made available electronically. No information will be released on persons whose booking process is not completed.

219.3 PROHIBITED MATERIALS

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

219.4 TOURS OF THE CUSTODY FACILITY

Tours of this facility may be arranged through the Corrections Chief. Authorized tours are subject to facility rules and restrictions.

Additionally, persons who tour this facility must be of an appropriate age as determined by the Sheriff.

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Community Relations - Public Information Plan

219.5 CONTACTING THE CUSTODY FACILITY

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

Victim Notification of Inmate Release

220.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process by which the victims of certain crimes are notified when the inmate held for those crimes is released from the facility. This proactive effort is intended to enhance the safety of crime victims.

220.1.1 VICTIM DEFINED

For the purposes of this policy, a victim is a person who suffers from the destructive or injurious, serious illegal act of another.

220.2 POLICY

It is the policy of this office that, in accordance with the laws of this jurisdiction, victims of certain crimes, law enforcement agencies and others shall be notified by the facility staff any time an inmate held for the related crimes is released from this facility, discharged from home confinement or if the inmate escapes from custody. Notifications shall be made either upon the expiration of the sentence, disposition or release to probation.

220.3 PROCEDURE

Staff shall ensure that victim information is included with the arrest information. Additional notification requests from other concerned parties that are known during the booking process should be documented in the appropriate section of the inmate's booking file.

In the event that an individual contacts this facility and requests release notification on any inmate housed in this facility, staff shall notify a supervisor. The supervisor shall obtain the individual's contact information and request guidance from the arresting agency.

220.4 NOTIFICATION

The Shift Supervisor or the authorized designee shall make a reasonable and good faith effort to verbally notify the following prior to an inmate's release or in the event of the inmate's escape: victims; law enforcement agencies known to be involved in the case (if different from this office); any affected persons at the victim's request; and any sexual assault program, local battered women's or domestic abuse program. Additionally, the victim shall be notified when the inmate is captured and returned to custody.

Notification may be made in person, by direct contact on the telephone or by letter. A notification shall only be left on a messaging system if the victim has indicated that such notification is acceptable or if staff cannot make contact with the victim.

If contact cannot be made and no suitable means exists to leave a message with the person to be notified, the Shift Supervisor or the authorized designee shall request the local law enforcement agency having jurisdiction where the person resides to perform a welfare check. A subsequent attempt shall be made to contact the person using the number listed in the notification request. All attempts to contact shall be documented on the victim notification request form.

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Victim Notification of Inmate Release

Notifications of victims will consist of the following:

- (a) The conditions of release, if any
- (b) The time of release
- (c) The time, date and place of the next scheduled court appearance of the arrested person and the victim's right to be present at the court appearance
- (d) If the arrested person is charged with domestic abuse, the location and telephone number of the area battered women's shelter as designated by the Department of Corrections

As soon as reasonably practicable after the arrested person is released, the Corrections Chief shall ensure that a written notice is personally delivered or mailed to the victim containing the information in (b) and (c) of the list above.

Unless ordered by the court or a supervisor, no victim information shall be provided to any inmate by any employee or volunteer of this facility. Any unauthorized access or release of victim information is a direct violation of victim confidentiality and applicable policies, and may be subject to disciplinary action, up to and including termination from employment and/or criminal prosecution.

Community Service Program

221.1 PURPOSE AND SCOPE

The purpose of this policy is to identify community resources that may be used to strengthen the programs of the Skagit County Sheriff's Office by providing work opportunities to the inmates and needed services to the community.

221.2 POLICY

The Corrections Chief or the authorized designee is responsible for establishing relationships with the community that will provide support programs and productive opportunities for the inmates.

A community service program should provide labor for maintenance of equipment and facilities owned by municipal corporations including, but not limited to: the county, cities, towns, school districts, municipal transit etc. Activities that benefit individuals, businesses or other entities that are not considered a public works project are prohibited. Any such program shall be subject to the following guidelines:

- (a) The program complies with all statutes, ordinances, regulations, labor agreements, permissions or restrictions relating to inmates whenever they are assigned to public works and community service projects.
- (b) There is an availability of inmates who, as a matter of classification, are deemed to be eligible for participation in a community service program.
- (c) The number of work opportunities available in the community will determine the availability of opportunities to participate in a community service program.
- (d) Staff assigned to manage the program should strive to develop work assignments that give inmates an opportunity to develop good work habits and attitudes that can be applied to jobs obtained after release.
- (e) Program opportunities are based on victim and community input.

Failure to abide by the rules that identify legitimate work programs and sites may be a violation of law. Knowingly violating any statutes, ordinances, rules and regulations may result in termination and/or prosecution.

221.3 SELECTION PROCESS

The selection process for inmates desiring to participate in a community service program is as follows:

- (a) All inmates must submit to a screening process, including a criminal history check, to ensure that past criminal history is compatible with work in non-secure areas.

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Community Service Program

1. A classification process that clearly describes the criteria for program participation will be developed by the supervisor in charge of the program.
- (b) Inmates may be charged a fee for participation in the program in order to offset the cost of administration and staffing.
- (c) The program policy, procedures and practices provide that the inmate workday approximate the workday in the community. The normal work hours are six to eight hours per shift and must include adequate break and meal time.
- (d) Inmate performance while in the program is regularly evaluated and recorded. Poor performance in the work program or rule violations may render the inmate ineligible for the work program. Any violation of work rules may result in disciplinary action that may include the loss of credits previously awarded for good behavior and work time. Inmates who do not comply with program work rules, or for some other reason cannot work, will be reclassified in accordance with the policies and procedures of the Skagit County Sheriff's Office.
- (e) The working conditions for any inmate must comply with all applicable federal, state or local work safety laws and regulations.

Vehicle Safety

222.1 PURPOSE AND SCOPE

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

222.2 USE AND SECURITY OF OFFICE VEHICLES

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

222.2.1 USE OF SEAT BELTS

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

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

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

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

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

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

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

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222.2.2 VEHICLE SECURITY

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

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

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

222.3 VEHICLE INSPECTIONS

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

222.4 VEHICLE SAFETY REPAIRS

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

Anyone authorized to drive office vehicles is responsible for inspecting the interior and exterior of any assigned vehicle before placing the vehicle into service and again at the conclusion of his/her shift. Any previously unreported damage, mechanical problems, unauthorized contents or other problems with the vehicle shall be promptly reported to a supervisor and documented as appropriate.

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

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

222.5 USE OF PERSONAL VEHICLES

The use of personal vehicles for official business must be approved by the Corrections Chief. The Corrections Chief or the authorized designee shall verify that the personal vehicle meets the state's insurance requirements. All policies and procedures applicable to facility vehicles shall apply to the personal vehicle while it is being used for official business.

222.6 COLLISION DAMAGE, ABUSE, AND MISUSE

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

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

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

222.7 TOLL ROAD USE

Authorized on-duty emergency vehicles are exempt from incurring toll road charges. An authorized emergency vehicle is an on-duty vehicle of the office which is equipped with emergency lights and siren and used to respond to emergency calls (WAC 468-270-030; WAC 468-270-085; WAC 468-270-105).

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

- (a) Members operating office-owned vehicles that are not authorized emergency vehicles shall stop and pay the appropriate toll charge.
- (b) Members may submit for reimbursement from the Office for any toll fees.
- (c) Members in unauthorized emergency vehicles passing through a toll plaza or booth during a response to an emergency shall draft a memo to his/her supervisor within five working days, explaining the circumstances.

222.8 POLICY

The Skagit County Sheriff's Office provides vehicles for official business use and may assign take-home vehicles based on its determination of operational efficiency, economic impact to the Office, tactical deployments, and other considerations.

Fitness for Duty

223.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure that all deputies of this office are fit for duty and able to perform their job functions upon hire, and remain fit for duty throughout their employment.

223.2 POLICY

It shall be the policy of this office that all deputies undergo a physical examination to include a medical history prior to assignment. This policy requires all deputies to be free from any physical, emotional or mental condition that might adversely affect their ability to effectively perform their duties throughout their employment.

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

223.3 SUPERVISOR RESPONSIBILITIES

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

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Fitness for Duty

223.4 NONWORK-RELATED CONDITIONS

Any employee suffering from a nonwork-related condition that warrants a temporary relief from duty may be required to use sick leave or other paid time off to obtain medical treatment or other reasonable relief from symptoms. If the condition is a serious health condition of the employee or a qualified family member, the employee's supervisor should facilitate the employee's contact with the appropriate person to initiate the leave process under the Family Medical Leave Act.

223.5 WORK-RELATED CONDITIONS

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

Upon the recommendation of the Corrections Chief or unit supervisor, and with the concurrence of a Division Chief, any employee whose actions or use of force in an official capacity result in death or serious injury to another may be temporarily removed from regularly assigned duties and/or placed on paid administrative leave for the well-being of the employee, and until such time as the following may be completed:

- (a) Preliminary determination that the employee's condition appears to be in compliance with policy and appropriate for the circumstances.
- (b) The employee has had the opportunity to receive necessary counseling and/or psychological clearance to return to full duty.

223.6 PHYSICAL AND PSYCHOLOGICAL EXAMINATIONS

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

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- (e) Any employee ordered to receive a fitness for duty examination shall comply with the terms of the order and cooperate fully with the examining physician or therapist regarding any clinical interview, tests administered or other procedures. Any failure to comply with such an order and any failure to cooperate with the examining physician or therapist, including signing of releases, may be deemed insubordination and shall be subject to discipline, up to and including termination.
- (f) Once an employee has been deemed fit for duty by the examining physician or therapist, the employee will be notified to resume his/her duties.

223.7 APPEALS

An employee whose salary is reduced or withheld due to a fitness for duty exam shall be entitled to an administrative appeal.

223.8 MEDICAL RECORDS

All employee medical information and records shall be treated as confidential and stored in the employee's separate medical file.

Staffing Plan

224.1 PURPOSE AND SCOPE

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

224.2 POLICY

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

224.3 STAFFING PLAN REQUIREMENTS

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

At minimum, the staffing plan will include the following:

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

224.4 STAFFING ANALYSIS

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

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

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

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Staffing Plan

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

224.4.1 DATA COLLECTION FOR ANALYSIS

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

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

224.5 REPORTING

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

Employee Speech, Expression and Social Networking

225.1 PURPOSE AND SCOPE

This policy is intended to address issues associated with employee use of social networking sites and to provide guidelines for the regulation and balancing of employee speech and expression with the legitimate needs of the Office.

Nothing in this policy is intended to prohibit or infringe upon any employee's communication, speech or expression that has been clearly established as protected or privileged.

225.1.1 APPLICABILITY

This policy applies to all forms of communication including, but not limited to, film, video, print media, public or private speech, use of all Internet services, including the World Wide Web, e-mail, file transfer, remote computer access, news services, social networking, social media, instant messaging/texting, blogs, forums, video and other file-sharing sites.

225.2 POLICY

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

225.3 SAFETY

Employees should consider carefully the implications of their speech or any other form of expression when using the Internet. Speech and expression that may negatively affect the safety of the Skagit County Sheriff's Office employees, such as posting personal information in a public forum, can result in compromising an employee's home address or family ties. Employees should therefore not disseminate or post any information on any forum or medium that could reasonably be anticipated to compromise the safety or privacy of any employee, an employee's family or associates.

225.4 PROHIBITED SPEECH, EXPRESSION AND CONDUCT

To meet the Office's safety, performance and public-trust needs, the following is prohibited:

- (a) Speech or expression made pursuant to an official duty that tends to compromise or damage the mission, function, reputation or professionalism of the Office or its employees.

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- (b) Speech or expression that, while not made pursuant to an official duty, is significantly linked to, or related to, the Office and tends to compromise or damage the mission, function, reputation or professionalism of the Office or its employees.
- (c) Speech or expression that could reasonably be foreseen as creating a negative impact on the credibility of the employee as a witness. For example, posting statements or expressions to a website that glorify or endorse dishonesty, unlawful discrimination or illegal behavior.
- (d) Speech or expression of any form that could reasonably be foreseen as creating a negative impact on the safety of the employees of the correctional facility. For example, a statement on a blog that provides specific details as to how and when prisoner transportations are made could reasonably be foreseen as potentially jeopardizing employees by informing criminals of details that could facilitate an escape or attempted escape.
- (e) Speech or expression that is contrary to the canons of the Law Enforcement Code of Ethics as adopted by the Office.
- (f) Use or disclosure, through whatever means, of any information, photograph, video or other recording obtained or accessible as a result of employment with the correctional facility for financial or personal gain, or any disclosure of such materials without the expressed authorization of the Sheriff or his/her designee.
- (g) Posting, transmitting or disseminating any photographs, video or audio recordings, likenesses or images of office logos, emblems, uniforms, badges, patches, marked vehicles, equipment or other material that specifically identifies the Office on any personal or social networking or other website or web page, without the express written permission of the Sheriff.
- (h) Failure to take reasonable and prompt action to remove any content that is in violation of this policy and/or posted by others from any web page or website maintained by the employee (e.g., social or personal website).
- (i) Accessing websites for non-authorized purposes, or use of any personal communication device, game device or media device, whether personally or office-owned, for personal purposes while on-duty, except in the following circumstances:
 - 1. When brief personal communication may be warranted by the circumstances (e.g., inform family of extended hours).
 - 2. During authorized breaks, however, such usage should be limited as much as practicable to areas out of sight and sound of the public and shall not be disruptive to the work environment.

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Employee Speech, Expression and Social Networking

225.4.1 UNAUTHORIZED ENDORSEMENTS AND ADVERTISEMENTS

Unless specifically authorized by the Sheriff, employees may not represent the Office or identify themselves in any way as being affiliated with the Office in order to do any of the following:

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

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

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

225.5 PRIVACY EXPECTATION

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

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

All messages, pictures and attachments transmitted, accessed or received over office networks are considered office records and, therefore, are the property of the Office. The Office reserves the right to access, audit and disclose for whatever reason all messages, including attachments, that have been transmitted, accessed or received through any office system or device, or any such information placed into any office storage area or device. This includes records of all key strokes or web-browsing history made at any office computer or over any office network. The fact that access to a database, service or website requires a user name or password will not create an expectation of privacy if it is accessed through an office computer or network.

Information Technology Use

226.1 PURPOSE AND SCOPE

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

226.1.1 DEFINITIONS

Definitions related to this policy include:

Computer system - All computers (on-site and portable), electronic devices, hardware, software, and resources owned, leased, rented or licensed by the Skagit County Sheriff's Office that are provided for official use by its members. This includes all access to, and use of, Internet Service Providers (ISP) or other service providers provided by or through the Office or office funding.

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

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

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

226.2 POLICY

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

226.3 PRIVACY EXPECTATION

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

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

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226.4 RESTRICTED USE

The office's computer system is restricted to those who are authorized and have passed a background investigation. Members shall not access computers, devices, software or systems for which they have not received prior authorization or the required training. Members shall immediately report unauthorized access or use of computers, devices, software or systems by another member to the Shift Supervisor.

Members shall not use another person's access passwords, logon information and other individual security data, protocols and procedures unless directed to do so by the Shift Supervisor.

226.4.1 SOFTWARE

Each workstation should have an up-to-date copy of the office-approved security software. Members shall not copy or duplicate any copyrighted or licensed software except for a single copy for backup purposes, in accordance with the software company's copyright and license agreement.

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

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

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

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

226.4.2 HARDWARE

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

226.4.3 INTERNET USE

Internet access provided by or through the Office shall be strictly limited to office-related activities. Internet sites containing information that is not appropriate or applicable to office use and which

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shall not be intentionally accessed include, but are not limited to, adult forums, pornography, gambling, chat rooms, and similar or related Internet sites. Certain exceptions may be permitted with the express approval of the Shift Supervisor as a function of a member's assignment.

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

226.4.4 OFF-DUTY USE

Members shall only use technological resources related to their job while on-duty or in conjunction with specific on-call assignments unless specifically authorized by the Shift Supervisor. This includes the use of telephones, cell phones, texting, email or any other "off-the-clock" work-related activities.

226.5 PROTECTION OF SYSTEMS AND FILES

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

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

It is prohibited for a member to allow an unauthorized user to access the computer system at any time or for any reason. Members shall promptly report any unauthorized access to the computer system or suspected intrusion from outside sources (including the Internet) to the Shift Supervisor.

226.6 INSPECTION OR REVIEW

The Shift Supervisor or the authorized designee has the express authority to inspect or review the computer system, all temporary or permanent files, related electronic systems or devices, and any contents thereof, whether such inspection or review is in the ordinary course of his/her duties or based on cause.

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

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

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226.7 SECURITY OF DATA

The Sheriff will select a member of the Office to oversee the security of data.

The responsibilities of this position include, but are not limited to:

- (a) Developing and maintaining security practices and procedures that control access to systems and data to those who are authorized and who have passed background investigation as applicable.
- (b) Securing and protecting workstations and data from with security such as anti-virus, anti-malware, anti- spyware, firewalls, etc.
- (c) Backing-up data at least weekly and securely storing back-up data.
- (d) Developing and maintaining practices and procedures for appropriate destruction of data.

Firearms

227.1 PURPOSE AND SCOPE

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

This policy does not apply to issues related to the use of a firearm that are addressed in the Use of Force policy.

This policy only applies to those members who are authorized to carry firearms.

227.2 POLICY

The Skagit County Sheriff's Office will equip its members with firearms to address the risks posed to the public and office members by violent and sometimes well-armed persons. The Office will ensure firearms are appropriate and in good working order and that relevant training is provided as resources allow.

227.3 AUTHORIZED FIREARMS, AMMUNITION AND OTHER WEAPONS

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

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

227.3.1 AMMUNITION

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

227.4 EQUIPMENT

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

227.4.1 REPAIRS OR MODIFICATIONS

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

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Firearms

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

227.4.2 HOLSTERS

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

227.5 SAFE HANDLING, INSPECTION AND STORAGE

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

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

227.5.1 INSPECTION AND STORAGE

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

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

227.5.2 STORAGE AT HOME

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

227.5.3 ALCOHOL AND DRUGS

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

227.6 FIREARM DISCHARGE

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

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

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

227.6.1 WARNING AND OTHER SHOTS

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

227.7 FLYING WHILE ARMED

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

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

227.8 CARRYING FIREARMS OUT OF STATE

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

- (a) The deputy shall carry his/her Skagit County Sheriff's Office identification card whenever carrying such firearm.
- (b) The deputy may not be the subject of any current disciplinary action.

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

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

Payroll Records

228.1 PURPOSE AND SCOPE

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

228.2 POLICY

The Skagit County Sheriff's Office maintains timely and accurate payroll records.

228.3 RESPONSIBILITIES FOR COMPLETION OF PAYROLL RECORDS

All employees are responsible for the accurate and timely submission of payroll records for the payment of wages. Completed time cards shall be submitted to a supervisor for approval prior to submission to Administrative Services.

228.4 TIME SHEET REQUIREMENTS

All employees are paid in two pay periods per month, from the first day of the month through the fifteenth day of the month and for the sixteenth day of the month through the last calendar day of the month. Pay checks shall be issued no later than 10 days after the conclusion of each pay period, with certain exceptions such as holidays. Time sheets shall be completed and submitted to Administrative Services no later than noon on the last working day at the end of each pay period, unless specified otherwise.

228.5 RECORDS

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

Occupational Disease and Work-Related Injury Reporting

231.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidance regarding the timely reporting of occupational diseases, post-traumatic stress disorder (PTSD), and work-related injuries.

231.1.1 DEFINITIONS

Definitions related to this policy include:

Occupational disease or work-related injury - An injury, disease, PTSD, or infection while acting in the course of employment (RCW 51.08.013; RCW 51.08.100; RCW 51.08.140; RCW 51.08.142).

231.2 POLICY

The Skagit County Sheriff's Office will address occupational diseases and work-related injuries appropriately, and will comply with applicable state workers' compensation requirements (RCW 51.28.010 et seq.).

231.3 RESPONSIBILITIES

231.3.1 MEMBER RESPONSIBILITIES

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

231.3.2 SUPERVISOR RESPONSIBILITIES

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

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

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

231.3.3 CORRECTIONS CHIEF RESPONSIBILITIES

The Corrections Chief who receives a report of an occupational disease or work-related injury should review the report for accuracy and determine what additional action should be taken. The report shall then be forwarded to the Sheriff, the county's risk management entity, and the Administrative Division Chief to ensure any required Department of Labor and Industries reporting is made as required in the accident, illness, and injury prevention plan identified in the Accident, Illness, and Injury Prevention Policy.

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231.3.4 SHERIFF RESPONSIBILITIES

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

231.4 OTHER DISEASE OR INJURY

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

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

231.5 SETTLEMENT OFFERS

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

231.5.1 NO SETTLEMENT WITHOUT PRIOR APPROVAL

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

Chapter 3 - Recruitment Selection and Planning

Employee Orientation

300.1 PURPOSE AND SCOPE

The purpose of this policy is to define the parameters for new employee orientation. The purpose of the orientation is to provide new employees with basic information about the facility and the environment in which they will be working. Orientation is not meant to supplant other basic training required by law, ordinance or regulations.

300.2 NEW EMPLOYEE ORIENTATION

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

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

300.3 EMPLOYEE ACKNOWLEDGEMENTS

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

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

Continuing Professional Education

301.1 PURPOSE AND SCOPE

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

301.1.1 PHILOSOPHY

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

The Office encourages all personnel to participate in formal education on a continuing basis.

301.2 OBJECTIVES

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

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

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

301.3 REQUIRED TRAINING

With the exception of the year that the staff member is enrolled in a core training module, all staff members shall complete any required annual training.

Training for Managers and Supervisors

302.1 PURPOSE AND SCOPE

This policy establishes training requirements and guidelines for supervisory and management staff, and encourages all personnel to participate in basic and continuing professional training.

302.2 POLICY

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

302.3 TRAINING OBJECTIVES

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

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

302.4 TRAINING FOR NEW MANAGERS AND SUPERVISORS

All managers and supervisors (full- or part-time) are required to have management and supervision training as specified by the Washington State Criminal Justice Training Commission (WSCJTC) within the first year of their appointment. Supervisors are encouraged to thereafter train annually on topics that are intended or approved for the first-level supervisor position.

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

302.5 TRAINING RECORDS

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

It shall be the responsibility of the Training Sergeant to ensure that the following is maintained on file for all training provided by the Office:

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

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- The name of the person coordinating the training

It shall be the responsibility of the involved employee to provide his/her immediate supervisor or the Training Sergeant with evidence of completed training or education in a timely manner. The Training Sergeant shall ensure that copies of such training records are placed in the employee's training file and retained in accordance with established records retention schedules (WAC-14-03005).

Jail Training Officer Program

303.1 PURPOSE AND SCOPE

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

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

303.2 TRAINING OFFICER

The Field Training Officer (FTO) is an experienced deputy trained in the art and science of supervising, training and evaluating entry-level deputies in the application of their previously acquired knowledge and skills.

303.2.1 SELECTION PROCESS

Field Training Officers will be selected based on the following requirements:

- (a) A desire to perform the training mission
- (b) A minimum level of experience as determined by the Chief of Corrections
- (c) A demonstrated ability to be a positive role model
- (d) Successfully passed an internal selection process
- (e) An evaluation by supervisors and current FTOs

303.2.2 TRAINING

All FTOs shall successfully complete a minimum 40-hour CJTC course of instruction prior to being assigned a trainee.

All FTOs should complete a 24-hour update course every three years while assigned to the position of FTO.

303.3 TRAINING OFFICER RESPONSIBILITIES

- (a) FTOs shall complete and submit a written evaluation on the performance of their assigned trainee to the FTO's immediate supervisor on a daily basis.
- (b) FTOs shall review the performance evaluations with the trainee each day.
- (c) A detailed end-of-phase performance evaluation on the assigned trainee shall be completed by the FTO at the end of each phase of training.
- (d) FTOs shall be responsible for signing off all completed topics contained in the Training Manual, noting the methods of learning and evaluating the performance of the assigned trainee.

Jail Training Officer Program

303.4 TRAINING OFFICER PROGRAM SUPERVISOR

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

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

Training

304.1 PURPOSE AND SCOPE

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

304.2 MINIMUM TRAINING REQUIREMENTS

All deputies, full- or part-time, shall successfully complete orientation and training as described in RCW 43.101.220 and in accordance with WAC 139-10-210, within six months from the date of assignment.

Individuals assigned to work in the facility prior to completing the required training may do so only when under the direct supervision of a fully trained deputy.

304.3 CORRECTIONAL FACILITY TRAINING PROGRAM PHASES

The correctional facility training program is designed to build upon the conceptual foundation taught in the basic academy, whereupon the theoretical knowledge gained in the academy can be molded into a practical skill set. The correctional facility training program consists of the five phases described below.

304.3.1 FIRST PHASE - FACILITY ORIENTATION

The trainee will be assigned to a Training Officer (TO). The TO will, at a minimum:

- (a) Brief the trainee on the purpose, scope and responsibilities expected during the training program.
- (b) Explain the evaluation system and acquaint the trainee with the rating forms that will be used.
- (c) Provide the trainee with any required equipment or materials.
- (d) Tour the entire facility and support services with the trainee.
- (e) Introduce the trainee to the Corrections Chief and key supervisory, administrative and support personnel.

304.3.2 SECOND PHASE - SHADOWING

In this phase the trainee will be exposed to the many duties at each post, including transportation and special functions, by observing the TO demonstrate how each task is to be performed. The TO should provide instruction to the trainee and encourage the trainee to ask questions.

Time should be made available during this phase to allow the trainee to study policies and procedures, directives, post orders and any other materials deemed necessary by the TO.

The TO will monitor the trainee's progress by asking questions and administering tests on the materials and demonstrations that have been provided to the trainee.

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The work performance of the trainee will be evaluated and recorded daily by the TO. Areas of deficiency will be discussed and remedial training provided if deemed necessary by the TO.

304.3.3 THIRD PHASE - HANDS-ON WITH CLOSE SUPERVISION

During this phase the TO will instruct the trainee in each required activity at each post, including transportation and special functions. Once each task is demonstrated, the trainee will be directed to perform each activity under the close supervision of the TO.

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

The work performance of the trainee will be evaluated and recorded daily by the TO. Areas of deficiency will be discussed and remedial training provided if deemed necessary by the TO.

304.3.4 FOURTH PHASE - SOLO WITH MONITORING

During this phase the trainee will be directed to work solo in each area that training has been provided.

The solo activities of the trainee will be monitored by the TO and a supervisor.

The work performance of the trainee will be evaluated and recorded by the TO. Areas of deficiency will be discussed and remedial training provided if deemed necessary by the TO.

304.3.5 FIFTH PHASE - WORKING INDEPENDENTLY WITH SUPERVISION

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

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

304.4 PROBATIONARY PERIOD EVALUATION

Probationary employees will receive a written evaluation of their job skills and learning progress at least once a month or at the completion of each phase of training, whichever occurs first. Prior to passing the probationary period, each probationary employee will receive a final evaluation. These evaluations shall be in writing and discussed with the employee by his/her supervisor. The final evaluation shall be made a part of the employee's personnel record.

304.5 POLICY

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

Specialized Training

305.1 PURPOSE AND SCOPE

Deputies who are assigned to specialized positions or units will receive training commensurate with the complexity of their specialty and must be able to demonstrate proficiency in the specific skills related to their specialized function.

305.2 QUALIFICATIONS

To be eligible for assignment to a specialized position or unit, deputies are required to be off probation and to generally have at least three years of experience as a deputy.

305.3 TRAINING

The Training Sergeant is responsible for ensuring that all personnel who are assigned to a specialized position or unit should receive training as needed comensurate with the responsibilities.

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

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

Firearms Training

306.1 PURPOSE AND SCOPE

This policy is intended to ensure that all personnel legally assigned a firearm will develop proficiency in the use, care and safety of firearms through a regular training schedule in accordance with all laws and regulations.

306.2 FIREARMS TRAINING

All personnel authorized to use firearms shall receive training in accordance with state law before being assigned to a post involving the possible use of such weapons (RCW 10.93.020).

Notwithstanding any statutory and regulatory requirements, at a minimum, firearms training will cover the laws, use, safety, safety equipment and care of firearms and the constraints on their use.

Whenever possible, the Office will use courses certified by a competent government or standards-setting organization. Whenever training is provided by the Office, the Training Sergeant should ensure that a course outline and/or lesson plan, a roster signed and dated by those in attendance and the name of the person coordinating the event are on file.

Personnel who are authorized to carry a firearm in the performance of their duties are required to maintain proficiency with firearms used in the course of their assignment. All custody personnel who carry firearms are required to qualify annually with their duty weapon on an approved range course.

The Rangemaster shall keep accurate records of qualifications, repairs, maintenance, and training records as directed by the Training Sergeant. In addition to regular qualification schedules, the Rangemaster shall be responsible for providing all affected personnel with annual practical training that is designed to simulate situations that may occur in a custody facility setting. At least annually, all personnel carrying a firearm will receive training on the Use of Force Policy and demonstrate their knowledge and understanding by passing either a performance or written test.

306.3 FIREARMS NON-QUALIFICATION

If any staff member is unable to qualify for any reason, including injury, illness, duty status or scheduling conflict, that staff member shall submit a memorandum to his/her immediate supervisor prior to the end of the required shooting period.

Members who repeatedly fail to qualify will be relieved from the assignment that authorized a firearm; appropriate disciplinary action may follow.

Personnel who fail to qualify on their first shooting attempt shall be provided remedial training until proficiency is demonstrated, and will be subject to the following requirements:

- (a) Additional range assignments may be required until consistent weapon proficiency is demonstrated.

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- (b) Members shall be given credit for a range qualification after remedial training and a qualifying score is obtained.
- (c) No range credit will be given for the following:
 - 1. Unauthorized range makeup
 - 2. Failure to qualify after remedial training

306.4 LIMITED COMMISSION EMPLOYEES

Limited commissioned employees may carry an office handgun while on duty with approval of the Sheriff.

If approved, the requesting employee is required to complete all office approved training and must meet office qualification standards, prior to carrying the handgun.

Limited commission employees will not be required to carry a handgun unless required by their position.

Limited commissioned employees shall not carry their department issued firearm off duty.

Limited commissioned employees shall abide by the policies related to use of force and firearms set forth in the Sheriff's Office Policy Manuals unless specifically outlined in this section.

Limited commissioned employees may use deadly force in accordance with current state law.

Limited commission employees shall not carry or use any office firearm or specialty impact weapon without permission from the Sheriff or his designee and not until all required office training is completed.

Limited commission employees who choose to be armed will not be used to augment or assist other law enforcement officers with incidents or situations that are not primarily related to their job position.

Limited commission employees shall qualify at least annually with the department owned weapon.

Chemical Agent Training

307.1 PURPOSE AND SCOPE

The Office authorizes the use of selected chemical agent control devices in order to reduce altercation-related injuries to deputies and inmates. This policy establishes the required training for deputies to be authorized to carry and use these devices, and identifies the appropriate treatment of individuals exposed to a chemical agent.

307.2 CHEMICAL AGENT TRAINING

Only deputies trained and having shown adequate proficiency in the use of any control device and the Use of Force Policy are authorized to carry the device.

- (a) All initial and proficiency training for control devices will be documented in the deputy's training file.
- (b) Deputies failing to demonstrate proficiency with chemical agents or knowledge of this Use of Force Policy will be provided remedial training. If, after two remedial training sessions, a deputy fails to demonstrate proficiency with chemical agents or knowledge of this office's Use of Force Policy, the deputy will not be authorized to use the devices and may be subject to discipline.
- (c) The Training Sergeant shall be responsible for ensuring that all personnel who are authorized to use chemical agents have also been trained in the proper medical treatment of persons who have been affected by the use of chemical agents. Training should include the initial treatment, i.e., providing the proper solution to cleanse the affected area and knowing when to summon medical personnel for more severe effects.

307.3 PROFICIENCY TESTING

The Training Sergeant shall ensure that all training delivered to staff should also test proficiency in order to document that the employee understands the subject matter, and that proficiency training is monitored and documented by a certified weapons or tactical instructor.

307.4 TRAINING RECORDS

It shall be the responsibility of the Training Sergeant to ensure that the following is maintained on file for all training provided by the Office:

- A course outline or lesson plan
- A roster signed and dated by those in attendance
- The name of the person coordinating the training

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The Training Sergeant shall ensure that copies of such training records are placed in the employee's training file and retained in accordance with established records retention schedules (WAC 44-14-03005).

307.5 REVIEW, INSPECTION AND APPROVAL

Every control device will be periodically inspected by the Office Rangemaster or the designated instructor for a particular control device.

Prison Rape Elimination Act Training

308.1 PURPOSE AND SCOPE

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

308.2 POLICY

The Skagit County Sheriff's Office endeavors to comply with the training standards in the PREA Rule and to ensure that all staff, volunteers and contractors are aware of their responsibilities and that staff, volunteers, contractors and inmates are aware of the policies and procedures of the facility as they relate to PREA.

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

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

308.3 MEMBER TRAINING

All staff, volunteers and contractors who may have contact with inmates shall receive office-approved training on the prevention and detection of sexual abuse and sexual harassment within this facility. The Training Sergeant shall ensure that the staff receives training and testing in prevention and intervention techniques, that they have sufficient knowledge to answer any questions the arrestees and inmates may have regarding sexual assault or abuse, and that they are familiar enough with the reporting process to take an initial report of a sexual assault or abuse. The Training Sergeant shall be responsible for developing and administering this training, covering at minimum (28 CFR 115.31; 28 CFR 115.32):

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

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- The right of inmates to be free from retaliation for reporting sexual abuse and sexual harassment.
- How to detect and respond to signs of threatened and actual sexual abuse.
- How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex or gender non-conforming inmates.
- How to comply with relevant laws related to mandatory reporting of sexual abuse and sexual harassment to outside authorities.
- How to avoid inappropriate relationships with inmates.

Training shall be tailored according to the sex of the inmates at the facility. Staff should receive additional training on security measures and the separation of male and female populations in the same facility if the staff has been reassigned from a facility that houses only male or female inmates.

Training should include written testing to validate knowledge and understanding of the material. The Training Sergeant shall document, through signature or electronic verification, that staff, volunteers and contractors have received and understand the training. The Training Unit will maintain training records on all staff receiving training in accordance with procedures developed by the Training Sergeant.

The Training Sergeant shall ensure that members undergo annual refresher training that covers the office's sexual abuse and sexual harassment policies and related procedures (28 CFR 115.31).

308.4 SPECIALIZED MEDICAL TRAINING

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

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

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

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

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308.5 SPECIALIZED INVESTIGATIVE TRAINING

Specialized investigative training for investigators shall include the uniform evidence protocol to maximize potential for obtaining useable physical evidence; techniques for interviewing sexual abuse victims; proper use of *Miranda* and *Garrity* warnings; sexual abuse evidence collection in confinement settings; and the criteria and evidence required to substantiate a case for administrative action or referral for prosecution (28 CFR 115.21; 28 CFR 115.34).

Health Care Provider Orientation

309.1 PURPOSE AND SCOPE

The purpose of this policy is to establish an orientation period for all new health care staff working in the facility, in cooperation with the health care service staff. The goal is to improve the competency of the health care staff and the effectiveness of the care delivered, as well as to maintain the safety and security of the custody environment and to comply with all applicable laws, regulations and national health care standards.

309.2 NEW HEALTH CARE STAFF ORIENTATION

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

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

309.3 HEALTH CARE STAFF REFRESHER TRAINING

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

309.4 FACILITY-SPECIFIC TRAINING

The Training Sergeant should include these staff members in training and training exercises relative to facility safety and security including, but not limited to, the following:

- Emergency medical triage in the facility
- Emergency evacuation routes and procedures
- Communication systems during facility emergencies

Health Care Provider Orientation

- Security during facility emergencies
- Qualified health care professional response during "officer down" incidents
- Responding to critical facility emergencies
- Facility hostage policy and medical response tactics
- Medical emergency transportation procedures
- Media relations

309.5 TESTING

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

309.6 TRAINING RECORDS

The Training Sergeant, in coordination with the Responsible Physician, shall be responsible for developing and maintaining training records in accordance with established records retention schedules (WAC 44-14-03005).

Volunteer Program

310.1 PURPOSE AND SCOPE

It is the policy of this office to use qualified volunteers to assist in the daily operation through their contribution of services to the inmates and the families of inmates, and to serve as a link between the facility and the community. Volunteers are intended to supplement and support, rather than supplant deputies and other personnel. Volunteers can be an important part of any organization and are proven to be a valuable asset to corrections institutions.

310.1.1 DEFINITION OF VOLUNTEER

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

310.2 VOLUNTEER PROGRAM MANAGEMENT

310.2.1 PROGRAM COORDINATOR

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

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

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

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

310.2.2 RECRUITMENT

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

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

310.2.3 SCREENING

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

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

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

310.2.4 SELECTION AND PLACEMENT

Service as a volunteer with the Office shall begin with an official notice of acceptance or appointment to a volunteer position. Notice may only be given by an authorized representative of the Office, normally the program coordinator. No volunteer should begin any assignment until he/she has been officially accepted for the position. Each volunteer should complete all required enrollment paperwork and will receive a copy of his/her position description and agreement of service with the Office.

Volunteers should be placed only in assignments or programs that are consistent with their knowledge, skills, abilities and the needs of the facility.

310.2.5 TRAINING

The program coordinator or the authorized designee shall be responsible for developing and maintaining training curriculum and any related forms specific to volunteer assignments. The program coordinator or the authorized designee shall be responsible for ensuring that volunteers

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are provided with an orientation program to acquaint them with the Office, personnel, and policies and procedures that have a direct impact on their work assignment. The training/orientation will include, but not be limited to, the following topics:

- (a) Office policies and procedures
- (b) Rules related to contraband in the facility
- (c) Prohibition on carrying weapons in the facility
- (d) Volunteer/offender relationship and general rules of conduct
- (e) Safety and emergency information
- (f) An overview and history of the Office

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

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

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

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

310.2.6 FITNESS FOR DUTY

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

Volunteers shall report to their supervisor any changes in status that may affect their ability to fulfill their duties. This includes, but is not limited to, the following:

- (a) Driver's license status, if driving is part of the duties of the assignment
- (b) Any medical condition that might impair the volunteer's ability to perform the duties of the position
- (c) Arrests
- (d) Criminal investigations
- (e) The detention of family members, work associates or immediate friends

All volunteers shall adhere to the guidelines set forth by this office regarding drug and alcohol use.

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310.2.7 DRESS CODE

As representatives of the Office, volunteers should present a professional image to the community. Volunteers shall dress appropriately for the conditions and performance of their duties.

Volunteers shall conform to office-approved dress in accordance with their duty assignment. Uniforms authorized for volunteers should be readily distinguishable from those worn by deputies. The uniform or identifiable parts of the uniform shall not be worn while off-duty. However, volunteers may choose to wear the uniform while in transit to or from official office assignments or functions, provided an outer garment is worn over the uniform shirt to avoid bringing attention to the volunteer while he/she is off-duty.

Volunteers shall be required to return any issued uniform or office property at the termination of service.

310.3 SUPERVISION OF VOLUNTEERS

Each volunteer who is accepted to a position with the Office and assigned to the correctional facility must have a clearly identified supervisor who is responsible for direct management of that volunteer. This supervisor will be responsible for day-to-day management and guidance of the work of the volunteer and should be available to the volunteer for consultation and assistance.

A volunteer may be assigned and act as a supervisor of other volunteers, provided that the supervising volunteer is under the direct supervision of a paid staff member.

Functional supervision of volunteers is the responsibility of the supervisor in charge of the unit where the volunteer is assigned. The following are some considerations to keep in mind while supervising volunteers:

- (a) Take the time to introduce volunteers to employees on all levels.
- (b) Ensure volunteers have work space and necessary office supplies.
- (c) Make sure the work is challenging. Do not hesitate to give them an assignment or task that will tap these valuable resources.

310.4 HEALTH CARE VOLUNTEERS

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

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

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

310.5 CONFIDENTIALITY

With appropriate security clearance, volunteers may have access to confidential information, such as criminal histories or investigative files. Unless otherwise directed by a supervisor or office policy, all information shall be considered confidential. Only that information specifically identified and approved by authorized personnel shall be released. Confidential information shall be given only to persons who have a need and a right to know, as determined by office policy and supervisory personnel.

Each volunteer will be required to sign a nondisclosure agreement before being given an assignment with the Office. Subsequent unauthorized disclosure of any confidential information, verbally, in writing or by any other means, by the volunteer is grounds for immediate dismissal and possible criminal prosecution.

Volunteers shall not address public gatherings, appear on radio or television, prepare any article for publication, act as correspondents to a newspaper or other periodical, release or divulge any information concerning the activities of the Office, or maintain that they represent the Office in such matters without permission from the proper office personnel.

310.6 PROPERTY AND EQUIPMENT

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

310.6.1 VEHICLE USE

Volunteers assigned to duties that require the use of a vehicle must first complete the following:

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

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

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

310.6.2 TELECOMMUNICATION SYSTEMS USAGE

Volunteers with access to law enforcement telecommunication systems shall successfully complete all mandated access training and radio procedures training prior to using any such equipment. Volunteers shall comply with all policies and procedures related to the use of such

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equipment. The program coordinator should ensure that appropriate training is provided for volunteers whenever necessary.

310.7 DISCIPLINARY PROCEDURES/TERMINATION

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

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

310.7.1 EXIT INTERVIEWS

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

310.8 EVALUATION

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

310.9 VOLUNTEER REGISTRATION

All volunteers shall be registered with the Office for insurance purposes. The facility shall maintain an identification record for each volunteer that includes a photograph, home address, current telephone numbers, background certification, training/orientation certifications, and list of special skills, languages spoken or volunteer specialty.

Briefing Training

311.1 PURPOSE AND SCOPE

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

311.2 POLICY

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

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

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

311.3 COMPUTER-BASED TRAINING OPTIONS

The Lexipol Daily Training Bulletins (DTBs) is a web-based system that provides training on the Skagit County Sheriff's Office Custody Manual and other important topics. Generally, one training bulletin is available for each day of the month. However, the number of DTBs may be adjusted by the Training Sergeant.

Personnel assigned to participate in DTBs should only use the password and login name assigned to them by the Training Sergeant. Personnel should not share their password with others and should frequently change their password to protect the security of the system. After each session, employees should logoff the system to prevent unauthorized access. The content of the DTBs is copyrighted material and shall not be shared with others outside of the Office.

Employees who are assigned to participate in the DTB program should complete each DTB at the beginning of their shift or as otherwise directed by their supervisor. Employees should not allow uncompleted DTBs to build up over time. Personnel may be required to complete DTBs missed during extended absences (e.g., vacation, medical leave) upon returning to duty. Although the

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DTB system can be accessed from any Internet-active computer, employees shall only take DTBs as part of their on-duty assignment as there will be no authorization for taking or viewing DTBs while off-duty.

Supervisors will be responsible for monitoring the progress of personnel under their command to ensure compliance with this policy.

311.4 TRAINING RECORDS

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

Training Plan

312.1 PURPOSE AND SCOPE

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

312.2 POLICY

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

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

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

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

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

312.3 TRAINING SERGEANT

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

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

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

312.4 TRAINING RECORDS

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

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

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

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

Training records shall contain the following information:

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

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

312.5 COURSE CERTIFICATION/QUALITY ASSURANCE

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

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

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

312.6 TRAINING PROCEDURES

- (a) All employees assigned to attend training shall attend as scheduled, unless previously excused by their immediate supervisor or the Training Sergeant. Excused absences from mandatory training should be limited to the following:
 - 1. Court appearances

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2. Authorized vacation
 3. Sick leave
 4. Physical limitations preventing the employee's participation
 5. Emergency situations
 6. Leave under state or federal law (e.g., Family Medical Leave Act)
- (b) When an employee is unable to attend mandatory training, that employee shall:
1. Notify his/her supervisor as soon as possible but no later than one hour prior to the start of training.
 2. Document his/her absence in a memorandum to the supervisor.
 3. Make arrangements through the supervisor and the Training Sergeant to attend the required training on an alternate date.

Support Personnel Training

313.1 PURPOSE AND SCOPE

The Office has developed a training program for professional support and contractor personnel, whether full- or part-time, to increase competency in their assigned tasks and to help ensure that all support personnel understand the issues that are unique to their position as it relates to this facility. This policy establishes minimum training guidelines for those employees and contractors.

313.2 TRAINING SERGEANT RESPONSIBILITIES

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

313.3 PART-TIME PERSONNEL

General service personnel working part-time shall receive formal orientation and training commensurate with the scope of their work assignments, as determined by the Corrections Chief, before assignment to duties within the facility. At a minimum the orientation should cover institutional rules, security and operational issues. General service and contract personnel who fail to successfully complete all required training shall not be permitted to work in the secure portions of the facility.

313.4 PERSONNEL WITH MINIMAL INMATE CONTACT

New professional support and contractor personnel who have minimal inmate contact should receive training during the first year of employment.

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

- Custody policies and procedures
- Emergency response procedures
- Job specific training
- Washington State Criminal Justice Training Commission (WSCJTC) Support Services Academy (subject to course offerings and available funding)

Support Personnel Training

313.5 PERSONNEL WITH REGULAR INMATE CONTACT

All new professional and support employees, including contractors, who have regular or daily inmate contact, shall receive training during the first year of employment prior to being independently assigned to a particular job function.

Regular inmate contact is defined as tasks that involve the direct provision of services to inmates (e.g. custody assistants, vocational supervisors, teachers, food service, commissary, chaplain) but that does not involve the custodial supervision of inmates involving discipline and control.

Training topics shall include, but not be limited to, the following:

- Security procedures and regulations
- Planning
- Development and implementation of treatment and recreation programs
- Supervision of inmates
- Signs of suicide risk
- Suicide precautions
- Use of force regulations and tactics
- Report writing
- Inmate rules and regulations
- Key control
- Rights and responsibilities of inmates
- Safety procedures
- All emergency plans and procedures
- Interpersonal relations
- Social/cultural lifestyles of the inmate population
- Cultural diversity for understanding staff and inmates
- Communication skills
- Cardiopulmonary resuscitation (CPR/first aid)
- Universal precautions for the prevention of disease
- Counseling techniques
- Interaction of the elements of the criminal justice system
- Sexual harassment/sexual misconduct awareness

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Support Personnel Training

313.6 TESTING

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

Performance Evaluations

314.1 PURPOSE AND SCOPE

This policy provides guidelines for the Skagit County Sheriff's Office performance evaluation system.

314.2 POLICY

The Skagit County Sheriff's Office shall use a performance evaluation system to measure, document and recognize work performance. The performance evaluation will serve as an objective guide for the recognition of good work and the development of a process for improvement.

The Office evaluates employees in a non-discriminatory manner based upon job-related factors specific to the employee's position, without regard to sex, race, color, national origin, religion, age, disability or other protected classes.

A formal written review of the work performance of each employee will be conducted at least annually.

314.3 TYPES OF EVALUATIONS

The Office shall use the following types of evaluations:

Regular - An evaluation completed at regular intervals by the employee's immediate supervisor. Employees who have been promoted should be evaluated as established by the Department of Human Resources or, minimally, on the anniversary of the date of the last promotion.

When an employee transfers to a different assignment in the middle of an evaluation period and less than six months has transpired since the transfer, the evaluation should be completed by the current supervisor with input from the previous supervisor.

Special - An evaluation that may be completed at any time the supervisor and Division Chief or the authorized designee determine an evaluation is necessary to address less than standard performance. The evaluation may include a plan for follow-up action (e.g., performance improvement plan (PIP), remedial training, retraining).

314.3.1 RATINGS

When completing an evaluation, the supervisor will identify the rating category that best describes the employee's performance. The definition of each rating category is as follows:

Outstanding - Performance is well beyond that required for the position. It is exceptional performance, definitely superior or extraordinary.

Exceeds standards - Performance is better than demonstrated by a competent employee. It is performance superior to what is required, but is not of such nature to warrant a rating of outstanding.

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Meets standards - Performance of a competent employee. It is satisfactory performance that meets the standards required of the position.

Needs improvement - Performance is less than the standards required of the position. A needs improvement rating shall be thoroughly discussed with the employee.

Unsatisfactory - Performance is inferior to the standards required of the position. It is inadequate or undesirable performance that cannot be allowed to continue.

Supervisor comments may be included in the evaluation to document the employee's strengths, weaknesses and requirements for improvement. Any job dimension rating marked as unsatisfactory or outstanding shall be substantiated with supervisor comments.

314.3.2 PERFORMANCE IMPROVEMENT PLAN

Employees who receive an unsatisfactory rating may be subject to a PIP. The PIP shall delineate areas that need improvement, any improvement measures and a timetable in which to demonstrate improvement. The issuing supervisor shall meet with the employee to review his/her performance and the status of the PIP at least monthly.

314.4 EVALUATION PROCESS

Supervisors should meet with the employees they supervise at the beginning of the evaluation period to discuss expectations and establish performance standards. Each supervisor should discuss the tasks of the position, standards of expected performance and the evaluation criteria with each employee.

Performance evaluations cover a specific period and should be based upon documented performance dimensions that are applicable to the duties and authorities granted to the employee during that period. Evaluations should be completed by each employee's immediate supervisor. Other supervisors directly familiar with the employee's performance during the rating period should be consulted by the evaluating supervisor for input.

Assessment of an employee's job performance is an ongoing process. Continued coaching and feedback provides supervisors and employees with opportunities to correct performance issues as they arise and to acknowledge good work. Periodic discussions with the employee during the course of the evaluation period are encouraged. Supervisors should document all discussions in the prescribed manner.

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

All supervisors shall receive training on performance evaluations within one year of a supervisory appointment.

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314.5 EVALUATION FREQUENCY

Supervisors shall ensure that all employees they supervise are evaluated at least once every year on the anniversary of the employee's date of appointment or hire.

Those employees who are required to successfully complete a probationary period should be evaluated monthly.

314.6 EVALUATION INTERVIEW

When the supervisor has completed his/her evaluation, a private discussion of the evaluation should be scheduled with the employee. The supervisor should discuss the evaluation ratings and respond to any questions the employee may have. The supervisor should provide relevant counseling regarding advancement, specialty positions and training opportunities. Any performance areas in need of improvement and goals for reaching the expected level of performance should be identified and discussed. If the employee has reasonable objections to any of the ratings, the supervisor may make appropriate adjustments to the evaluation. The reason for such adjustments shall be documented.

Employees may write comments in an identified section of the evaluation. The supervisor and employee will sign and date the evaluation.

314.6.1 DISCRIMINATORY HARASSMENT FORM

At the time of each employee's annual evaluation, the supervisor shall provide access to and require the employee to read the county harassment and discrimination policies and the Skagit County Sheriff's Office Discriminatory Harassment Policy. The supervisor shall give the employee a form to be completed and returned that acknowledges the following:

- (a) The employee understands the harassment and discrimination policies.
- (b) The employee has had all questions regarding the policies sufficiently addressed.
- (c) The employee knows how to report alleged harassment and discrimination policy violations.
- (d) Whether the employee has been the subject of, or witness to, any unreported conduct that may violate the discrimination or harassment policies.

The completed form should be returned to the supervisor (or other authorized individual if the employee is uncomfortable returning the form to the presenting supervisor) within one week. If the employee has expressed any questions or concerns, the receiving supervisor or other authorized individual shall ensure that appropriate follow-up action is taken.

314.7 APPEAL

An employee who disagrees with his/her evaluation may provide a formal written response that will be attached to the evaluation, or may request an appeal.

To request an appeal, the employee shall forward a written memorandum within three days to the evaluating supervisor's Division Chief or the authorized designee. The memorandum shall identify the specific basis for the appeal and include any relevant information for the reviewer to consider.

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314.8 CHAIN OF REVIEW

The signed performance evaluation and any employee attachment should be forwarded to the evaluating supervisor's Division Chief or the authorized designee. The Division Chief or the authorized designee shall review the evaluation for fairness, impartiality, uniformity and consistency, and shall consider any written response or appeal made by the employee.

The Division Chief or the authorized designee should evaluate the supervisor on the quality of ratings given.

314.9 RETENTION AND DISTRIBUTION

The original performance evaluation and any original correspondence related to an appeal shall be maintained by the Office in accordance with the Personnel Records Policy.

A copy of the evaluation and any documentation of a related appeal shall be provided to the employee and also forwarded to the Skagit Department of Human Resources.

Reporting of Employee Arrests, Convictions and Court Orders

315.1 PURPOSE AND SCOPE

The purpose of this policy is to describe the notification requirements and procedures that members must follow when certain arrests, convictions and court orders restrict their ability to perform the official duties and responsibilities of the Skagit County Sheriff's Office. This policy will also describe the notification requirements and procedures that certain retired deputies must follow when an arrest, conviction or court order disqualifies them from possessing a firearm.

315.2 POLICY

The Skagit County Sheriff's Office requires disclosure of member arrests, convictions and certain court orders to maintain the high standards, ethics and integrity in its workforce, and to ensure compatibility with the duties and responsibilities of the Office.

315.3 DOMESTIC VIOLENCE CONVICTIONS AND RESTRAINING ORDERS

Federal and Washington law prohibit individuals convicted of certain offenses and individuals subject to certain court orders from lawfully possessing firearms. Such convictions and court orders often involve allegations of the use or attempted use of force, or threatened use of a weapon on any individual in a domestic relationship (e.g., spouse, cohabitant, parent, child) (18 USC § 922; RCW 9.41.040).

All members and retired deputies with identification cards issued by the Office are responsible for ensuring that they have not been disqualified from possessing firearms by any such conviction or court order, and shall promptly report any such conviction or court order to a supervisor, as provided in this policy.

315.4 OTHER CRIMINAL CONVICTIONS AND COURT ORDERS

Washington law prohibits individuals convicted of serious felonies enumerated in RCW 9.41.040 from lawfully possessing firearms.

While legal restrictions may or may not be imposed by statute or by the courts upon conviction of any criminal offense, criminal conduct by members of this office may be inherently in conflict with law enforcement duties and the public trust, and shall be reported as provided in this policy.

315.5 REPORTING PROCEDURE

All members and all retired deputies with an identification card issued by the Office shall immediately notify their supervisors (retired deputies should immediately notify the Shift Supervisor or the Sheriff) in writing of any past or current criminal detention, arrest, charge or conviction in any state or foreign country, regardless of whether the matter was dropped or rejected, is currently pending or is on appeal, and regardless of the penalty or sentence, if any.

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Reporting of Employee Arrests, Convictions and Court Orders

All members and all retired deputies with an identification card issued by the Office shall immediately notify their supervisors (retired deputies should immediately notify the Shift Supervisor or the Sheriff) in writing if they become the subject of a domestic violence-related order or any court order that prevents the member or retired deputy from possessing a firearm.

Any member whose criminal arrest, conviction or court order restricts or prohibits that member from fully and properly performing his/her duties, including carrying a firearm, may be disciplined. This includes, but is not limited to, being placed on administrative leave, reassignment and/or termination. Any effort to remove such disqualification or restriction shall remain entirely the responsibility of the member, on his/her own time and at his/her own expense.

Any employee failing to provide prompt written notice pursuant to this policy shall be subject to discipline, up to and including termination.

Retired deputies may have their identification cards rescinded or modified, as may be appropriate.

Chapter 4 - Emergency Planning

Facility Emergencies

400.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a response to emergencies that take place in the facility and to train personnel annually on the emergency response plan. This policy is intended to protect the community, employees, visitors, inmates and all others who enter the correctional facility.

400.1.1 DEFINITIONS

Definitions related to this policy include:

Contraband - Any item or article inside the facility that was not issued by the facility, purchased from the commissary, purchased through approved channels, approved for use by correctional facility administration or that compromises overall facility security. Items that are modified from their intended use or are found in excessive quantities are also considered contraband.

Disturbance - Any action or inaction by an inmate or group of inmates that disrupts the normal operation of the correctional facility in a housing module and/or other area of the facility. A disturbance may be a one-on-one inmate altercation, a single inmate violently attacking cell furnishings or the physical plant, a single inmate-on-staff assault, or an inmate actively resisting staff's verbal or physical directions.

Escape - Occurs when an inmate leaves or fails to return to the secure perimeter of the correctional facility without lawful release, proper authorization or assigned escort.

Hunger strike - One or more inmates refusing to eat for two or more consecutive meals. A refusal to eat is may be associated with a grievance or an unmet demand. It can disrupt the safety and security of the facility if it is allowed to increase in the number of inmates participating or if it becomes known to the general inmate population.

Internal security - The ability of the custody staff to control or influence the behavior of inmates in a manner that protects inmates from one another or themselves, that protects the staff from inmates, protects facility property and reduces the risk of, or quickly gains control of, disturbances or riots.

Lockdown - A course of action used to control the movement of inmates. Generally, all inmates who are uninvolved in the event that created the need for a lockdown shall be directed to their housing units/cells and locked inside. Inmates who are being transported in hallways shall be secured in either an appropriate holding cell or their housing unit/cell.

Perimeter security - The ability of a facility to prevent escapes and to safely confine its population within the limits of the facility grounds. In general, this includes the outside walls or fences, the inner walls, rooms and activity areas.

Riot - Violent behavior by an inmate or group of inmates that creates a significant likelihood of damage to property, injury to persons and/or substantially obstructs normal correctional facility operations.

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The Corrections Chief or the authorized designee is responsible for developing and implementing emergency response plans and designing the initial training and annual retraining for all staff. In the event of an emergency inside the facility, the staff, inmates, visitors, volunteers and contractors are as safe as reasonably possible, and the facility continues to operate and fulfill its primary mission.

This policy shall be reviewed annually and updated as necessary. The emergency response plan shall be made available to the staff, volunteers and contractors working in the facility as needed.

The staff shall be trained annually on this policy. The facility emergency plan and all training shall be documented by the Training Sergeant and retained in accordance with established records retention schedules (WAC 44-14-03005).

400.3 FACILITY EMERGENCY PLAN

The facility emergency plan is intended to provide the staff with current methods, guidelines and training for addressing emergency events that may threaten the security of the facility or compromise the safety of staff, inmates or the community. This plan is also intended to provide information on specific assignments and tasks for personnel. Where appropriate, the plan will include persons and emergency departments to be notified. The following procedures should be utilized when responding to an emergency within the facility.

400.4 LOCKDOWN

Upon detecting any significant incident that threatens the security of the facility, such as a riot or hostage situation, staff shall immediately notify Central Control and the Shift Supervisor. The Shift Supervisor, or in his/her absence Central Control, may determine whether to order a partial or full lockdown of the facility and shall notify the Corrections Chief as soon as practicable.

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

400.4.1 COMMUNICATION

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

400.5 HUNGER STRIKE

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

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

400.5.1 NOTIFICATION OF QUALIFIED HEALTH CARE PROFESSIONALS

The Corrections Chief or the authorized designee should notify the Responsible Physician to review, coordinate and document any medical actions taken, based upon protocols and/or at the direction of qualified health care professionals, in response to a hunger strike.

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

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

400.5.2 RESPONSE TO HUNGER STRIKES

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

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

400.5.3 LEGAL GUIDANCE

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

400.6 RESPONSE TO DISTURBANCES

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

400.6.1 NOTIFICATIONS

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

400.6.2 NOTIFICATION OF QUALIFIED HEALTH CARE PROFESSIONALS

The Corrections Chief or the authorized designee should notify the appropriate medical staff in order to review, coordinate and document medical actions based upon protocols and/or at the direction of qualified medical practitioners in response to a disturbance.

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400.6.3 REPORTING

The Shift Supervisor or Corrections Chief should direct that an incident report be completed containing the details of the disturbance no later than the end of the shift. If appropriate, a crime report shall be initiated and prosecution sought.

400.7 RIOTS

Riots occur when three or more unruly inmates forcibly and/or violently take control or attempt to take control of any area within the confines of the correctional facility.

Staff should make reasonable attempts to prevent inmate-on-inmate violence but should take measures to avoid being engulfed in the problem, thereby exacerbating the situation.

400.7.1 RESPONSE TO RIOTS

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

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

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

Other housing units must be secured, with sufficient staff remaining at their posts to continue to supervise the unaffected units. When the riot has been suppressed, all involved staff must immediately return to their assigned posts. Incident reports shall be completed by all staff involved prior to leaving the facility.

400.7.2 QUALIFIED HEALTH CARE PROFESSIONAL RESPONSE

A supervisor or the authorized designee should notify the qualified health care professionals and identify a staging area for medical emergency responders and for medical triage should it appear to be necessary.

The Responsible Physician or the authorized designee should be included in developing the response plan as it relates to the potential for a medical response, medical triage and treatment activities, and the safety and security of medical personnel during the incident.

400.7.3 NOTIFICATIONS

As soon as practicable, the Shift Supervisor or a responsible staff member shall notify the Corrections Chief, who in turn, shall notify the Sheriff.

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400.7.4 REPORTING

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

400.7.5 DEBRIEFING

All responding staff, including medical responders, shall be debriefed on the incident as soon as practicable after the conclusion of the emergency incident. The staff shall examine the incident from the perspective of what worked, what actions were less than optimal and how the response to a future incident might be improved.

If appropriate, the details of the incident will be used to develop a training course for responding to facility disturbances. The goal of any debriefing process is the opportunity for continuous improvement. The debriefing should be focused on the incident and an improved response. A moderator should be used to ensure that no individual or group involved in the response is publicly ridiculed.

400.8 HOSTAGES

The Office does not recognize the taking of hostages as a reason to relinquish control of the correctional facility environment. It is the policy of the Skagit County Sheriff's Office to use all available resources necessary to bring about a successful end to a hostage situation.

400.8.1 RESPONSE TO HOSTAGE INCIDENT

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

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

400.8.2 NOTIFICATION OF QUALIFIED HEALTH CARE PROFESSIONALS

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

400.8.3 HOSTAGE RESCUE

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

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400.8.4 REPORTING AND DEBRIEFING

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

400.9 ESCAPES

Upon being made aware that an escape may or did occur, the staff member should immediately notify Central Control. Central Control should notify the Shift Supervisor or Corrections Chief. As soon as practicable, the Corrections Chief should notify the Sheriff.

Once the escape is verified and immediate actions taken inside the facility (lockdown, etc.), the Shift Supervisor should notify 911 dispatch to alert all local law enforcement agencies.

400.9.1 INMATE COUNTS

As soon as the facility is fully locked down, a full inmate/wristband count should be taken.

All inmates who are outside of the secure perimeter of the facility (e.g., court, work details) should be located and identified. Any missing inmate should have his/her identity disclosed and his/her facility record should be accessed by the Corrections Chief or designee. The Corrections Chief or designee should review the facility record for the missing inmate to identify information useful for capture.

400.9.2 SEARCH

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

A flyer with the inmate's name, description, the inmate's latest picture, classification status and charges shall be created, and supplied it to the custody staff and local law enforcement. Local law enforcement should also be given the inmate's last known address and a list of his/her associates.

400.9.3 REPORTING

The Shift Supervisor or a designated staff member should submit an incident report to the Corrections Chief. A crime report should also be written regarding the escape. The incident report should focus on events and physical plant weaknesses that contributed to the escape. The Corrections Chief should review the reports, interview involved parties and develop action plans to minimize the risk of future occurrences.

400.10 CIVIL DISTURBANCES OUTSIDE OF THE JAIL

Upon being notified that correctional facility space will be needed in response to a civil disturbance involving mass arrests, the Shift Supervisor should notify the Corrections Chief. The Corrections Chief should make the determination regarding the magnitude of the event and whether it warrants notification of the Sheriff.

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

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

400.11 NATURAL DISASTERS

The Corrections Chief or authorized designee should develop a plan to address natural disasters (e.g., fires, earthquakes, floods) and the possible effect on the safety and security of continuing to house inmates in the correctional facility. The plan should include procedures for continuing to house inmates in the facility; identification of alternative facilities outside the boundaries of the natural disaster and the potential capacity of those facilities; inmate transportation options; and contact information for allied agencies. The plan should be reviewed at least annually and revised if necessary.

400.12 REVIEW OF EMERGENCY PROCEDURES

The Corrections Chief should ensure that there is a review of emergency procedures at least annually. This review should be documented with reports submitted to the Corrections Chief or the authorized designee within 10 days of the review. This review should also include the signatures or initials of all facility staff. At a minimum, the review shall include the following:

- Assignment of persons to specific tasks in emergency situations
- Instructions in the use of the alarm systems and signals
- Systems for the notification of appropriate persons outside of the facility
- Information on the location and use of emergency equipment in the facility
- Specification of evacuation routes and procedures

Emergency Planning

401.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a plan to appropriately respond to emergencies within the facility and to ensure all affected personnel receive timely training regarding response to emergencies. Specific emergency response plans are contained elsewhere in this chapter.

401.2 POLICY

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

401.3 EMERGENCY PLAN REQUIREMENTS

The Corrections Chief is responsible for developing contingency plans that minimally include the following:

- (a) Training requirements for staff on emergency preparedness, including their role in implementing the facility's emergency plans.
- (b) Updating of emergency plans as needed and a review of each plan at least annually.

401.4 TRAINING

This facility will provide emergency preparedness training as part of orientation training for all personnel assigned to the facility and for those who may be required to respond to the facility in an emergency. The staff shall also receive refresher training at least annually in the emergency planning policies and procedures contained in the manual. The Training Sergeant is responsible for developing and delivering appropriate initial training and annual refresher training.

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

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

The Training Sergeant shall forward an annual report to the Sheriff and Corrections Chief on the status of emergency planning training. Any training deficiencies identified in this report should be rectified within 90 days of the report.

Emergency Staffing Plan

402.1 PURPOSE AND SCOPE

The facility must operate at all times as a safe and secure environment, regardless of staffing levels. Consequently, contingency plans must be made in advance for any staffing emergency or planned job action, regardless of the length of the staffing deficit.

The purpose of this policy is to establish roles and responsibilities for creating and implementing emergency staffing plans, providing appropriate emergency staffing training to supervisory and management personnel, and identifying an update schedule and distribution list for the plan, as identified by the Sheriff or the authorized designee.

402.2 POLICY

It is the policy of this office to be prepared to operate a safe and secure facility in the event of a staffing emergency. Staffing emergencies that could negatively affect the good order the facility may include, but are not limited to, an outbreak of infectious disease, a work stoppage or strike by the staff, a natural disaster or other disruption. The Sheriff, Corrections Chief or the authorized designee shall be responsible for ensuring that an appropriate emergency staffing plan exists.

402.2.1 EMERGENCY STAFFING

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

- The facility may go to a lockdown. Minimum activities, including visiting, exercise and other programs will be suspended if necessary. Meals, cleaning, medical services, court transportation and attorney visits will continue. Other activities will be assessed by the Corrections Chief on a case-by-case basis.
- Supervisory and management personnel may have time-off cancelled or rescheduled for the duration of the staffing emergency.
- Staff from other areas of the office who have custody experience may be used to fill vacancies in the facility.
- Assistance from allied agencies may be requested to help management and supervisors in safely staffing the facility.
- Contracting with surrounding facilities may be necessary if adequate staffing cannot be obtained to safely operate the facility.
- In the event of a health-related staffing emergency, the office Exposure Control Officer and medical staff shall be notified in accordance with the Communicable Diseases Policy.

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402.2.2 LEGAL ASSISTANCE

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

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

402.2.3 TRAINING

The Corrections Chief or the authorized designee should be responsible for:

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

Fire Safety Plan

403.1 PURPOSE AND SCOPE

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

403.2 POLICY

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

The Corrections Chief shall ensure that a fire alarm and automatic detection system are installed, maintained and periodically tested. Any variance, exception or equivalency issues must be approved by the fire jurisdiction authorities, and must not constitute a serious life-safety threat to the occupants of the facility.

403.2.1 FIRE CODES

The Office shall conform to all federal, state and local fire safety codes.

403.2.2 FIRE PREVENTION RESPONSIBILITY

All staff, volunteers and contractors who work in the facility are responsible for the prevention of fires. They should be trained and given the tools to carry out the tasks necessary to reduce the risk of fire.

403.3 FIRE SUPPRESSION PRE-PLANNING

The Corrections Chief shall, in cooperation with the local fire department or other qualified entity, develop a plan for responding to a fire. The plan shall include, but not be limited to:

- (a) A fire suppression pre-plan by the local fire department, to be included as part of this policy.
- (b) Fire prevention, safety inspection plans and record retention schedules developed by designated staff or as required by applicable law.
- (c) Documentation of all fire prevention inspections, all orders to correct and all proofs of correction should be maintained for a minimum of two years or as otherwise required by law.
- (d) An evacuation plan (see the Evacuation Plan Policy).
- (e) A plan for the emergency housing of inmates in case of fire.
- (f) The cross-training of responders and facility staff via drills, should occur at least quarterly, if practicable.

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Fire Safety Plan

403.4 FIRE PREVENTION EQUIPMENT

All required fire alarms, sprinklers and detection devices shall be in good working order at all times.

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

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

403.5 FIREFIGHTING EQUIPMENT

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

While the staff is not trained as fully qualified firefighters, the Corrections Chief or the authorized designee will ensure that the staff is trained to initially respond to a fire with the purpose of facilitating the safety of the occupants, including evacuation, if necessary.

403.5.1 SELF-CONTAINED BREATHING APPARATUS (SCBA)

The facility should maintain sufficient quantities of self-contained breathing apparatus (SCBA) for staff to initially respond to a fire with the purpose of facilitating the safety of the occupants, including evacuation, if necessary. The Corrections Chief or the authorized designee is responsible for developing and implementing a written respiratory protection program that includes fit testing and training.

403.6 FIRE TRAINING

The Training Sergeant is responsible for ensuring that within the first six months of assignment to the facility all staff members receive training on the use of the SCBA sufficient to demonstrate proficiency. The staff should also be trained in the use of the facility's firefighting equipment sufficient to demonstrate proficiency. The staff should receive refresher training at least annually on the use of firefighting equipment.

Each shift will have at least one designated staff member who is trained to maintain the facility's firefighting equipment, including the SCBA.

403.7 INSPECTIONS

The Office shall be inspected by an appointed staff member, who is qualified to perform fire and safety inspections on a monthly basis to ensure that fire safety standards are maintained. These inspections will be focused on, but not limited to, fire prevention, staff training and proficiency, firefighting equipment availability and functionality, alarms, fire detectors, fire safety equipment, and staff familiarity with prevention and suppression techniques, suppression pre-planning, SCBA use, emergency response, fire safety equipment use and the evacuation plan.

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

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

403.7.1 FURNISHINGS

All furnishings allowed in the facility shall meet fire authority standards for fire performance characteristics. Prior to the introduction of any furnishing into the facility, the staff shall receive clearance from the local fire authority as to its appropriateness.

403.7.2 FLAMMABLE, TOXIC AND CAUSTIC MATERIALS

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

403.8 EMERGENCY HOUSING OF INMATES

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

Emergency Power and Communications

404.1 PURPOSE AND SCOPE

The Skagit County Sheriff's Office facility must continue to operate as a safe and secure environment regardless of emergencies, including electrical outages. The purpose of this policy is to establish guidelines regarding back-up power and communication systems, and the inspection, preventive maintenance and testing of the systems to ensure a seamless transition in the event of a loss of power.

404.2 POLICY

It is the policy of this office to ensure that power to critical systems and communications continues to operate within the facility in the event of a loss of power.

404.2.1 PREVENTIVE MAINTENANCE

It is the responsibility of the Sheriff and Corrections Chief to ensure that there is sufficient emergency power to operate all essential lighting, security equipment, safety equipment and communications systems. The emergency power system should have sufficient fuel to allow the facility to operate continuously for a three-day period, if necessary, without external resources.

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

404.2.2 SAFETY AND SECURITY

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

404.2.3 INSPECTION AND TESTING

The Corrections Chief is responsible for scheduled testing of emergency power systems. The power system manufacturer should be contacted for the required testing intervals and load information. The emergency power system should be load-tested in accordance with the manufacturer's recommendations or at least quarterly. The results of the testing and inspections shall be documented and a report forwarded to the Corrections Chief.

All emergency equipment and systems, including power generators should be inspected and tested by the Corrections Chief or the authorized designee at least weekly.

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Emergency Power and Communications

All emergency equipment and systems should be inspected by a qualified individual at least quarterly. Each inspection and testing process shall be documented and the results included in a report to the Corrections Chief.

Evacuation Plan

405.1 PURPOSE AND SCOPE

The purpose of this policy is to promote planning and to establish procedures, responsibilities and training requirements for the staff of the Skagit County Sheriff's Office Correctional Facility in case of fire and other emergency evacuations.

405.2 POLICY

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

405.3 EVACUATION PLAN

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

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

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

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

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

405.3.1 EXITS

All exits in this facility should be distinctly and permanently marked. Exit signs and directional arrows for traffic flow will be clearly visible and maintained in all public areas of the facility.

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Evacuation Plan

Except for temporary reasons, such as maintenance or repairs, all exits to the facility shall remain free from obstacles at all times regardless of the frequency of use. It is the duty of all staff to remove any obstructions that block, either partially or completely, staff's ability to observe or use any exit.

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

405.3.2 EVACUATION PLANS AND ROUTES

Plans for evacuation routes will be posted in all public areas of the facility. All custody staff will be familiar with evacuation routes for inmates.

405.3.3 EMERGENCY HOUSING OF INMATES

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

405.4 TRAINING DRILLS

The Corrections Chief should ensure that drills of the evacuation plan are conducted at least annually on each shift and for all facility locations. Drills will include staff and volunteers. The local fire agency may be invited to participate in one or more drills annually. Nonviolent and compliant inmates may participate. Violent and/or dangerous inmates or those known to be a flight risk will not be involved in the drills.

Drills should be designed to ensure that all staff members are proficient in their duties during each type of evacuation. Each drill should be documented as to its scope and participants. Upon completion of the drill, each staff member will be required to complete a written test to document knowledge and to show proficiency.

Chapter 5 - Inmate Management

Population Management System

500.1 PURPOSE AND SCOPE

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

500.2 POLICY

It is the policy of this facility that an inmate population management system should be established and maintained to account for the admission, processing and release of inmates. The Corrections Chief or the authorized designee is responsible for ensuring that detailed daily reports of the facility's inmate population are completed and maintained by the staff. The reports shall reflect the average daily population of sentenced and non-sentenced inmates by categories of adult male, adult female, juvenile male and juvenile female. The Corrections Chief should collect and submit the data to the Sheriff in a monthly report within 10 working days of the end of each month. The Sheriff or the authorized designee should maintain the data in an accessible format for historical purposes, trend analysis and to respond to funding opportunities.

500.2.1 DATA COLLECTION

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

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

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

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

Inmate Counts

501.1 PURPOSE AND SCOPE

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

501.2 POLICY

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

501.3 PROCEDURE

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

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

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

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

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

All counts shall be noted in Spillman, noting the Shift Supervisor. Counts shall be maintained for a period of time prescribed by statute, ordinance or policy.

Inmate Reception

502.1 PURPOSE AND SCOPE

The Skagit County Sheriff's Office has a legal and methodical process for the reception of arrestees into this facility. This policy establishes guidelines for security needs, the classification process, identification of medical/mental health issues and the seizure and storage of personal property. **Arrestees require reception at such time as they are surrendered by a law enforcement agency as provided in Policy 203.1.1.**

502.2 POLICY

This office shall use the following standardized policies when receiving arrestees to be booked into this facility. This is to ensure security within the facility and that arrestees are properly booked and afforded their applicable rights.

502.3 PRE-BOOKING SCREENING

All arrestees shall be screened prior to booking to ensure the arrestee is medically acceptable for admission and that all arrest or commitment paperwork is present to qualify the arrestee for booking. Required paperwork may include the following:

- (a) Arrest reports
- (b) Probable cause declarations
- (c) Warrants or court orders
- (d) Victim notification information
- (e) Special needs related to religious practices, such as diet, clothing and appearance (see the Religious Programs Policy)
- (f) Accommodation requests related to disabilities (see the Inmates with Disabilities Policy)
- (g) Information regarding suicidal statements or actions

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

Prior to accepting custody of an arrestee who claims to have been arrested due to a mistake of the arrestee's true identity or an arrestee who claims that identity theft led to the issuance of a warrant in the arrestee's name, staff shall make reasonable efforts to investigate the arrestee's claim of identity fraud or mistake. Staff shall notify a supervisor when an arrestee makes a claim of mistaken identity or identity fraud.

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502.3.1 RECEIVING ARRESTEES

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

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

502.4 SEARCHES BEFORE ADMISSION

All arrestees and their property shall be searched for contraband by the booking deputy before being accepted for booking. All contraband items will be handled according to facility policy. Items of possible evidentiary value may be turned over to the arresting or transporting deputy for processing or processed according to the facility's rules for handling evidence. Approved personal property and clothing will be accepted. Items not approved will be returned to the arresting or transporting deputy prior to the arrestee being accepted for booking. A description of the items returned to the arresting or transporting deputy shall be documented on the arrestee's booking record.

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

502.5 ADMISSION PROCESS

A unique booking number shall be obtained specific to the current admission. Photographs and fingerprints shall be taken.

The admission process should include an attempt to gather a comprehensive record of each arrestee, including the following:

- Identifying information, including name and any known aliases or monikers
- Current or last known address and telephone number
- Date and time of arrest
- Date and time of admission
- Name, rank, agency and signature of the arresting deputy and transporting deputy, if different
- Health insurance information
- Legal authority for confinement, including specific charges, arrest warrant information and court of jurisdiction
- Sex

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- Age
- Date and place of birth
- Race
- Height and weight
- Occupation and current or most recent employment
- Preferred emergency contact, including name, address, telephone number and relationship to inmate
- Driver license number and state where issued, state identification number or passport number
- Social Security number
- Additional information concerning special custody requirements or special needs
- Local, state and federal criminal history records
- Fingerprints (RCW 43.43.745)
- Photographs, fingerprints and notation of any marks or physical characteristics unique to the inmate, such as scars, birthmarks, deformities or tattoos
- Medical, dental and mental health screening records, including suicide risk
- Inventory of all personal property including clothing, jewelry and money
- A record of personal telephone calls made at the time of booking or the time the opportunity was provided to place calls if the calls were not made
- Name of booking staff member

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

502.5.1 LEGAL BASIS FOR DETENTION

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

502.6 TRANSITION FROM RECEPTION TO GENERAL POPULATION

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

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

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502.6.1 MONITORING FOR SIGNS OF INTOXICATION AND WITHDRAWAL

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

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

502.6.2 INMATE SEPARATION

Inmates should be kept separate from the general population during the admission process. Newly admitted inmates should be separated according to the facility's classification plan.

502.7 INMATE PROPERTY CONTROL

All property received from inmates at the time of booking shall be inventoried. A receipt should be signed by the inmate and the booking deputy and referenced to the booking number before the admission is completed. The original copy of the property receipt will be retained and placed in the inmate's file and/or with the property. A second copy will be presented to the inmate at the time of booking.

Excess personal clothing should be mailed to, picked up by, or transported to designated family members or to a person of the inmate's choosing, or stored in containers designed for this purpose.

502.7.1 VERIFICATION OF INMATE'S MONEY

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

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

502.7.2 PROPERTY STORAGE

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

502.8 SHOWERING AND CLOTHING EXCHANGE

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

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502.9 INMATE TELEPHONE CALLS

Every inmate, whether adult or juvenile, detained in this facility shall be entitled to at least three completed telephone calls immediately upon being admitted and no later than three hours after arrest. The calls may be of a duration that reasonably allows the inmate to make necessary arrangements for matters that he/she may be unable to complete as a result of being arrested. The calls are not intended to be lengthy conversations and the custody staff may use their judgment in determining the reasonable duration of the calls. If it is determined that the person is a custodial parent with responsibility for a minor child, the person shall be entitled to make such additional telephone calls as reasonably necessary for the purpose of arranging care for the minor child.

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

502.9.1 TELEPHONE CALL PROCEDURES

The Office will pay the cost of local calls. Long distance calls will be paid by the inmate, using calling cards or by calling collect.

Calls between the inmate and his/her attorney shall be deemed confidential and shall not be monitored, eavesdropped upon or recorded (RCW 9.73.095(4)).

The provisions of RCW 9.73.095 shall be posted in bold block type in a conspicuous place within the custody facility.

502.9.2 ONGOING TELEPHONE ACCESS

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

502.10 IMMIGRATION DETAINERS

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

502.10.1 IMMIGRATION INQUIRIES

Deputies shall not (RCW 10.93.160):

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

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

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502.10.2 IMMIGRATION OFFICIAL INTERVIEWS

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

Permission may be granted to a federal immigration official to conduct an interview regarding federal immigration violations with an inmate if the inmate consents in writing to be interviewed. The Skagit County Sheriff's Office shall provide the inmate with an oral explanation and a written consent form that explains the purpose of the interview, the interview is voluntary, and that the inmate may decline to be interviewed or choose to be interviewed with the inmate's attorney present. The form must explicitly state that the inmate will not be punished or suffer retaliation for declining to be interviewed. The form shall minimally be available in English and Spanish. The form shall be explained orally to an inmate who is unable to read the form or if necessary, explained by an interpreter from the Washington State Police (WSP) communications center language line or other WSP resources (RCW 10.93.160).

Inmate Handbook and Orientation

503.1 PURPOSE AND SCOPE

This policy provides for the orientation of inmates booked into the Skagit County Sheriff's Office facility. The purpose of the orientation is to inform inmates of the correctional facility routine, rules, inmate rights and services.

503.2 POLICY

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

503.2.1 INITIAL ORIENTATION

To assist with the inmate's transition into a custody environment, the orientation will include the following topics, supplemented by a more detailed inmate handbook that will be provided to each inmate:

- (a) Facility rules and disciplinary sanctions
- (b) Correspondence, visiting, and telephone rules
- (c) Availability of personal care items and opportunities for personal hygiene
- (d) Inmate grievance procedure
- (e) Co-pays, fees, and charges
- (f) Medical, dental, and mental health services
- (g) Possibilities for pretrial release
- (h) Programs and activities, including application procedures
- (i) Classification/housing assignments and appeal procedures
- (j) Court appearance, where scheduled, if known
- (k) Sexual abuse and sexual harassment information including the following (28 CFR 115.33):
 - 1. Facility's zero-tolerance policy
 - 2. Prevention and intervention
 - 3. Instruction on how inmates can avoid being victims of sexual abuse and sexual harassment through self-protection techniques
 - 4. Reporting sexual abuse or sexual harassment incidents, including how to report such incidents anonymously
 - 5. Treatment and counseling for victims of sexual abuse or sexual harassment

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

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

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

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

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

503.2.2 ORIENTATION FOR NON-READERS, VISUALLY IMPAIRED AND DEAF OR HARD-OF-HEARING INMATES

Inmates who cannot read, are visually impaired or have intellectual, psychiatric or speech disabilities or limited reading skills, shall have materials read to them by a staff member or presented to them using audible recorded media (28 CFR 115.16).

Inmates who are deaf or hard of hearing shall be provided with interpretation services. Reasonable efforts should be made by the staff to assist the inmate in understanding the information.

503.3 FEMALE INMATES

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

503.4 HEALTH SERVICES

Upon booking in the facility, staff should provide all inmates with the orientation handbook and a verbal explanation of the procedure to access health care services. This information should be provided in a language understood by the inmate.

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This communication will be documented in the inmate booking file as part of the standard intake procedure. The information to be communicated will include the following:

- Frequency of routine sick-call services
- Use of the proper forms for requesting health care services
- Use of the emergency notification system
- Medical co-payment guidelines

503.4.1 FEMALE INMATES

Information contained in Chapter 181, Laws of 2010 shall be provided to all female inmates of childbearing age during intake.

In addition, the Corrections Chief or the authorized designee shall place a notice containing the requirements of Chapter 181, Laws of 2010 in locations where medical care is provided within the facility and provide notice of the requirements to the appropriate staff. Appropriate staff shall include all medical staff and staff who are involved in the transportation of pregnant inmates as well as other staff deemed appropriate by the Corrections Chief (RCW 70.48.501).

503.5 ACCESS TO THE GRIEVANCE SYSTEM

Upon booking in the facility, the intake deputy shall provide all inmates with the orientation handbook and a verbal explanation of the procedure to access the grievance system. This shall be provided in a language understood by the inmate.

This communication shall be documented in the inmate booking file as part of the standard intake procedure. The information to be communicated shall include the following:

- Use of the proper forms to submit a complaint
- Appropriate use of the grievance system
- Time frame for a response to the grievance
- Consequences for abuse of the grievance system

503.6 STAFF TRAINING

Jail staff should be trained in an integrated approach to the identification and preliminary investigation of sexual assault cases and when to contact law enforcement for a criminal investigation.

Inmate Safety Checks

504.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a requirement for conducting visual safety checks at least every 60 minutes for all inmates, and for creating and maintaining a log to document all safety checks.

504.2 POLICY

It is the policy of the Skagit County Sheriff's Office that all correctional staff shall conduct safety checks at least once every 60 minutes on all inmates, or more frequently as determined by inmate custody status and/or housing classification.

Safety checks shall be made through direct visual observation. Cameras and monitors may supplement the required visual observation safety checks but they shall not replace the need for direct visual observation. Safety checks will be clearly documented on permanent logs in accordance with the office Daily Activity Logs and Shift Reports Policy.

504.3 SAFETY CHECKS

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

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

Special Management Inmates Plan

505.1 PURPOSE AND SCOPE

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

505.1.1 DEFINITIONS

Definitions related to this policy include:

Administrative segregation - The physical separation of an inmate who is prone to escape or assault staff or other inmates, or one who is mentally deficient, in need of medical isolation or infirmity status.

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

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

505.2 POLICY

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

505.3 SPECIAL MANAGEMENT INMATES HOUSING CRITERIA

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

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

- In protective custody or court-imposed segregation
- Exhibiting mental health concerns
- An escape threat
- A serious violence threat
- Known to have gang affiliation
- A known management problem
- A suicide risk

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- Exhibiting medical issues
- Physically impaired

505.4 CIRCUMSTANCES REQUIRING IMMEDIATE SEGREGATION

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

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

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

505.4.1 REVIEW PROCESS

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

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

505.5 PROTECTIVE CUSTODY

The deputy responsible for assigning classifications to incoming inmates shall clearly document the reason an inmate should be placed into protective custody. Inmates in need of protective

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custody may be placed in a segregation unit when there is documentation that the protective custody is warranted and segregation is the least restrictive alternative reasonably available.

Inmates who are in protective custody shall receive all services and programs that are available to inmates in general population and that are deemed a privilege. Any deviation from allowing usually authorized items or activities shall be documented on the inmate's file.

505.6 MAINTENANCE OF PRIVILEGES

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

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

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

505.7 REVIEW OF STATUS

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

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

505.7.1 STATE INMATES

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

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Immediately after placement in non-disciplinary segregation, the Shift Supervisor or the authorized hearing officer will inform the inmate in writing of the reason for the inmate's segregation and the date, time and place of the initial review meeting.

Within two days of placement in segregation, the Corrections Chief, Shift Supervisor or the authorized hearing officer will meet with the segregated inmate and give the inmate an opportunity to respond to the written reasons for the inmate's segregation placement. The Shift Supervisor or authorized hearing officer will submit a report to the Corrections Chief that shall include the reasons for segregation, the inmate's response and any information supporting protective custody, special restrictions, monitoring of special medications or diets and a recommendation of whether to continue the segregation (WAC 137-32-010).

505.8 HEALTH EVALUATION REQUIREMENTS

After notification from staff that an inmate is being placed in segregation, the Shift Supervisor shall ensure that the following occurs:

- (a) A qualified health care professional shall review the inmate's health record to determine whether existing medical, dental or mental health needs contraindicate the placement or require special accommodations.
- (b) If contraindications or special accommodations are noted, the qualified health care professional shall inform the Shift Supervisor and coordinate the appropriate plan for the inmate based on the safety needs of the facility and the medical needs of the inmate.

505.8.1 MEDICAL AND MENTAL HEALTH CONSIDERATIONS

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

- (a) Unless medical attention is needed more frequently, each inmate in segregation should receive a daily visit by medical staff. A medical assessment should be documented in the inmate's medical file.
- (b) A qualified health care professional shall also conduct weekly rounds.

When an inmate is classified as a special management inmate due to the presence of a serious mental illness and is placed in a segregation setting, the staff shall document this in the inmate's file and notify a qualified health care professional. When an inmate is expected to remain in segregation for more than a month (based upon disciplinary decisions, protective needs or other factors), a qualified health care professional shall be notified.

Where reasonably practicable a qualified health care professional should provide screening for suicide risk during the first three business days following admission to the segregation unit.

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Additionally a qualified health care professional should visit all inmates housed in segregation demonstrating health/mental health issues once during each week that the inmate remains in segregated confinement.

505.9 SAFETY CHECKS

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

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

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

- (a) A daily visit by the Corrections Chief or the authorized designee.
- (b) Visits by members of the program staff, upon request.
- (c) Visits by a qualified health care professional three times per week, unless medical attention is needed more frequently.

All management, program staff and qualified health care professional visits shall be documented in the appropriate records and logs and retained in accordance with established records retention schedules (WAC 44-14-03005).

505.10 LOG PROCEDURES

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

- Inmate name
- Inmate identification number
- Housing location
- Classification status
- Date admitted
- Date and time of entry and exit from the cell
- Type of infraction or reason for admission
- Tentative release date

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- Any special medical or psychiatric problems or needs
- Counseling for behavior

Log entries should be legible, entered promptly and provide sufficient detail to adequately reflect the events of the day for future reference.

The date and time of the observation or incident and the name and identification number of the staff member making the log entry shall be included on each entry.

Supervisors should review the logs frequently during the shift and enter comments as appropriate. At minimum, supervisors should enter the date and time of each review.

All safety checks will be documented in detail and should include the exact time of the safety check and the identification information of the employee conducting the check. All documentation will be gathered and placed into the inmate booking file.

505.10.1 LOG INSPECTION AND ARCHIVAL OF LOGS

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

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

505.11 STAFF SELECTION CRITERIA

To qualify for an assignment in which one is solely responsible for the supervision of special management inmates, the employee must demonstrate that he/she has:

- (a) Successfully completed his/her probationary period.
- (b) Attained a minimum of six months experience supervising inmates.
- (c) A history of maturity and tolerance.
- (d) Expressed an interest in working with special management inmates.
- (e) The ability to manage difficult inmates through conflict management skills.
- (f) Received satisfactory ratings in the three most recent performance evaluations.

505.11.1 STAFF ASSIGNMENT

Staff assignments to a special management inmates unit will be made by the Corrections Chief or the authorized designee and are subject to continuous review. The special management inmates unit manager may rotate staff whenever he/she determines that it is in the best interest of the employee or the facility.

Staff assigned to units with special management inmates should be closely supervised. Staff assigned to these units may rotate to other duties upon request.

Nothing in this section prohibits a probationary employee from working in a special management inmates unit under direct supervision of a training officer as a part of the training program.

Management of Weapons and Control Devices

506.1 PURPOSE AND SCOPE

This office is committed to reducing the potential for injury when confronted by violent inmates. This policy will address the availability, control, training and use of lethal and non-lethal weapons.

506.2 POLICY

It is the policy of the Skagit County Sheriff's Office that the presence and the use of weapons and non-lethal weapons in the correctional facility will be tightly controlled and supervised. Staff will be properly trained in the use of such weapons and will be authorized in their use only when it reasonably appears necessary to prevent injury to staff, inmates or others, or to prevent escape.

506.3 USE OF WEAPONS AND CONTROL DEVICES

Weapons and control devices shall only be possessed and used in accordance with this policy and the office policies that address the use of force.

506.3.1 FIREARMS

With the exception as described below, armed personnel shall secure all firearms in gun lockers located at the entry points prior to entering the secure perimeter. Firearms shall not be stored inside the secure perimeter at any time. Personnel shall use the clearing barrels located outside of the facility's secure perimeter to facilitate the safe loading and unloading of firearms.

Firearms shall only be allowed in the secure perimeter of the facility when it is necessary to protect the safety and security of staff, inmates, contractors, volunteers or the public. Firearms shall only be allowed inside the secure perimeter with the approval of the Corrections Chief or designee and under the direct supervision of a supervisor.

506.3.2 CHEMICAL AGENTS

Chemical agents shall only be used in the facility as authorized by the Corrections Chief or the authorized designee. The use of chemical agents can minimize the potential for injury to deputies, inmates or other persons and should only be used in situations where such force reasonably appears justified and necessary in accordance with the Use of Force Policy. Oleoresin capsicum (OC) spray should not be used in the medical unit or other designated areas where inmates are assigned to respiratory isolation.

Office-approved OC spray or foams may be possessed and used only by staff members who have received office-authorized training in its use.

Persons who have been affected by the use of chemical agents should be promptly provided with the proper solution to decontaminate the affected areas. Those persons who complain of severe effects shall be afforded a medical examination by medical personnel.

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506.3.3 IMPACT WEAPONS

Impact or striking weapons, such as batons, side-handle batons and telescoping batons, shall not be possessed by staff inside the facility's secure perimeter unless directed by the Corrections Chief or Shift Supervisor.

The need to immediately incapacitate the inmate must be weighed against the risk of causing serious injury. The head, neck, throat, spine, heart, kidneys and groin should not be intentionally targeted except when the deputy reasonably believes the inmate may cause serious bodily injury or death to the deputy or others.

506.3.4 KINETIC ENERGY PROJECTILES

Kinetic energy projectiles, when used properly, are less likely to result in death or serious physical injury. Certain munitions can be used in an attempt to de-escalate a potentially deadly situation because of their reduced potential for death or serious physical injury.

Projectile firing weapons, such as the 35mm rubber baton and the bean bag shotgun shall only be possessed and used by staff who have been trained in the use of these weapons and designated by the Corrections Chief.

506.3.5 ELECTRONIC CONTROL DEVICES (ECD)

The handheld electronic control device (ECD) may only be carried by personnel who have completed office-approved training and have been authorized by the Corrections Chief. The ECD may only be used in accordance with the office use of force and ECD policies.

Other ECDs, such as stun cuffs and stun belts, shall only be used when it appears reasonably necessary to control an inmate who poses a serious threat to safety or security, and only with the approval of a supervisor. These devices shall not be used to punish or torment. Only office-trained personnel authorized by the Corrections Chief shall deploy and use these devices.

Prior judicial approval should be obtained for any use of ECD in court holding facilities, if the device will be worn in the courtroom.

506.3.6 PEPPER PROJECTILE SYSTEMS

Pepper projectile systems are plastic spheres filled with a derivative of OC powder. A compressed gas launcher delivers the projectiles with enough force to burst the projectiles on impact, releasing the OC powder. Although classified as a non-lethal weapon, the potential exists for the projectiles to inflict injury when they strike the head, neck, spine and groin. Therefore, personnel deploying the pepper projectile system should not intentionally target those areas except when the deputy reasonably believes the inmate may cause serious bodily injury or death to the deputy or others. The use of the pepper projectile system is subject to the following requirements:

- (a) Deputies encountering a situation that requires the use of the pepper projectile system shall notify a supervisor as soon as practicable. The supervisor shall respond to all such deployments. The supervisor shall make all notifications and reports as required by the Use of Force Policy.

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- (b) Only office-trained personnel and those designated by the Corrections Chief will be allowed to possess and deploy the pepper projectile system.
- (c) Each deployment of a pepper projectile system shall be documented and, if reasonably practicable, recorded on video. This includes situations where the launcher was directed toward the inmate, regardless of whether the launcher was used. Only non-incident deployments are exempt from the evaluation form requirement (e.g., training, product demonstrations).

506.3.7 STUN MUNITIONS AND RUBBER BALL GRENADES

Stun munitions or rubber ball grenades may only be utilized with supervisor approval. Consideration should be given to the use of these devices as they relate to the tight confines of a correctional facility setting.

506.4 STORAGE OF WEAPONS AND CONTROL DEVICES

The armory shall be located in a secure and readily accessible repository outside of inmate housing and activity areas. It shall be secured at all times. Access to the armory shall be limited by the Corrections Chief or the authorized designee. Only personnel who have received office approved training in the maintenance of the stored equipment and who have been designated by the Corrections Chief are authorized to be inside the armory.

The following equipment shall be stored in a secure location:

- (a) All office-approved weapons
- (b) All office-approved control devices and associated supplies, with the exception of the ECD

The following equipment should be stored in secured locations:

- (a) All security equipment, such as helmets, face shields, and handheld shields

Explosive materials will be stored in a safe approved by the Department of Alcohol, Tobacco, Firearms and Explosives, and in compliance with 27 CFR § 555.201-224.

506.4.1 WEAPONS LOCKER

There should be a secure weapons locker located outside of the secure perimeter of the correctional facility.

506.4.2 REVIEW, INSPECTION AND APPROVAL

Every control device will be periodically inspected for serviceability and expiration dates by the Rangemaster or the designated instructor for a particular control device. The Rangemaster or the designated instructor is responsible to ensure replacement of outdated or unserviceable items.

506.5 TRAINING FOR CONTROL DEVICES

Only deputies trained and having shown adequate proficiency in the use of any control device and this agency's Use of Force Policy are authorized to carry or use such devices. Proficiency training must be monitored and documented by a certified weapons or tactics instructor.

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Management of Weapons and Control Devices

- (a) Training for all control devices should occur every two years at a minimum.
- (b) All training and proficiency for control devices will be documented in the deputy's training file. Written testing should be used when practical to validate knowledge. An employee not achieving a perfect score on a written test will be provided with remedial instruction until the employee answers all questions correctly.
- (c) Deputies who fail to demonstrate proficiency with the weapon or knowledge of this agency's Use of Force Policy will be given remedial training. If, after two additional attempts, a deputy still cannot demonstrate proficiency with a weapon or knowledge of this agency's Use of Force Policy, the deputy may be subject to discipline.

506.5.1 REPETITIVE BRIEFING TRAINING

Shift Supervisors should conduct and document regular periodic briefings concerning the policy and use of weapons and control devices.

Any test sheets or documentation of performance should be forwarded to the Training Sergeant. They will be included in the employee's training record.

Inmate Classification

507.1 PURPOSE AND SCOPE

This policy describes the Skagit County Sheriff's Office's classification process, which is designed to identify security and health issues so that inmates may be held in such a way as to foster a safe and secure facility.

507.1.1 DEFINITIONS

Definitions related to this policy include:

Civil detainee - Any person held in custody for a reason other than for criminal matters.

507.2 POLICY

All arrestees and detainees entering this facility will be processed to determine whether they will be housed in the facility, cited and released, released on their own recognizance (O.R.) or bail, or released back to the community through an appropriate release mechanism, including alternatives to incarceration programs, such as electronic supervision.

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

507.3 CLASSIFICATION PLAN

The Corrections Chief or authorized designee should create and maintain a classification plan to guide staff in the processing of individuals brought into the facility.

The plan should include an initial screening process, as well as a process for determining appropriate housing assignments (28 CFR 115.42). The plan should include use of an objective screening instrument, procedures for making decisions about classification and housing assignments, intake and housing forms and a process to ensure that all classification and housing records are maintained in each inmate's permanent file. The plan should include an evaluation of the following criteria:

- Age
- Sex
- Current charges
- Behavior during arrest and intake process
- Criminal and incarceration history
- Mental and emotional stability
- Potential risk of safety to others or self
- Special management inmate status
- Special needs assessment for vulnerable inmates

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- Behavioral or physical limitations or disabilities
- Medical status
- Level of sobriety at booking
- Suicidal ideation
- Escape history and degree of escape risk
- History of assaultive behavior
- The need to be separated from other classifications of inmates (e.g., juvenile offenders gang affiliation, confidential informant, former law enforcement, sexual orientation)
- Prior convictions for sex offenses against an adult or child
- Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming (see Prison Rape Elimination Act Policy for transgender and intersex definitions)
- Previous sexual victimization
- The inmate's own perception of his/her vulnerability
- Whether the inmate is a foreign national and if so from what country (see Foreign Nationals and Diplomats Policy)
- Prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the Office (28 CFR 115.41)
- Any other criteria as deemed appropriate by the Sheriff or the authorized designee

The plan should include a methodology for evaluating the classification process and a periodic review for the purpose of continuous quality improvement.

Information obtained in response to screening questions shall be considered confidential and shall only be made available to those who have a legitimate need to know (28 CFR 115.41).

507.3.1 INMATE RESPONSE TO SCREENING

Inmates may not be compelled by threat of discipline to provide information or answers regarding (28 CFR 115.41):

- (a) Whether the inmate has a mental, physical or developmental disability.
- (b) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming.
- (c) Whether the inmate has previously experienced sexual victimization.
- (d) The inmate's own perception of vulnerability.

507.4 INITIAL CLASSIFICATION

The initial classification process is intended to identify predatory, violent and at-risk inmates. It should occur early in the intake process to allow for appropriate supervision while an inmate is

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being temporarily held in this facility and until a decision is made to place the individual into a more permanent housing assignment.

Inmates should be interviewed by an intake deputy as soon as possible in the booking process. The intake deputy shall complete the initial classification form. The initial classification form should include a place for the intake deputy to make a housing recommendation. This recommendation should be based on the initial classification form, an assessment of the inmate's condition and the inmate's interview.

The initial classification form shall be placed in the inmate's file and provided to the classification deputy, who will, within the limits of available resources, determine the appropriate temporary housing location.

507.5 CLASSIFICATION UPON HOUSING

Once it has been determined that the person arrested will not be released from custody on bail or O.R., a more in-depth classification of the inmate will be conducted as soon as possible but no later than 24 hours after the inmate's arrival at the facility, after which the inmate will be moved to more permanent housing.

507.5.1 INTERVIEW

The comprehensive classification process begins with a review of any initial classification information obtained during the reception and booking process, as well as an interview by the classification deputy. The review of initial classification documents and the questions, answers and observations from the inmate's interview will be documented and numerically scored, representing the security level and housing assignment appropriate for each inmate.

Individualized determinations shall be made about how to ensure the safety of each inmate (28 CFR 115.42).

507.5.2 OVERRIDE

The classification deputy has the authority to override the scores when it appears necessary to more appropriately assign housing. The override capability exists to use the classification deputy's training and expertise in those instances when the numerical scores are not reflective of the inmate's potential security or health risk. All overrides will be reviewed by a supervisor and are intended to be an exception, rather than the rule.

507.6 REVIEWS AND APPEALS

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

507.6.1 PERIODIC CLASSIFICATION REVIEWS

The classification deputy shall review the status of all inmates who have been incarcerated in the facility for more than 30 days. Additional reviews should occur each 30 days thereafter. The review

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should examine changes in the inmate's behavior or circumstances and should either raise, lower or maintain the classification status (28 CFR 115.41).

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

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

507.6.2 STAFF REQUESTED REVIEW

At any point during an inmate's incarceration, a staff member may request a review of the inmate's classification. The reason for the review, the review itself and the outcome of the review shall be documented in the inmate's permanent file. Nothing in this section shall prohibit staff from immediately moving an inmate to another location in the facility based on exigent circumstances. Under such circumstances, the staff member moving the inmate must immediately document the action and notify the classification deputy.

507.7 HOUSING ASSIGNMENTS

Inmates should be housed based upon the following criteria:

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

507.7.1 SEPARATION

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

Civil detainees shall be housed separately from pretrial and sentenced inmates.

507.8 CLASSIFICATION SPACE ALLOCATION

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

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

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507.9 SINGLE-OCCUPANCY CELLS

Single-occupancy cells may be used to house the following categories of inmates:

- Maximum security
- Administrative segregation
- Severe medical disabilities (upon consultation with medical staff and the availability of medical beds)
- Severe mental illness (upon consultation with mental health staff and the availability of mental health beds)
- Sexual predators
- Any inmate with an elevated risk of being exploited or victimized by others
- Any inmate whose condition or status indicates a special need for single-occupancy housing

The classification supervisor shall notify the Corrections Chief or the authorized designee when single-occupancy cells are not available for housing the above described inmates. In such cases, a risk assessment shall be used to identify inmates in the above categories who may be safely housed together.

507.10 PRISON RAPE ELIMINATION ACT (PREA) CONSIDERATIONS

Housing, bed, work and program assignments should be made to separate inmates at high risk of being sexually victimized from those at high risk of being sexually abusive (28 CFR 115.42). Inmates identified as being at high risk for sexually aggressive behavior will be monitored and housed in an area that will minimize the risk to other inmates and staff. All inmates identified as being at risk of victimization shall be monitored and housed in an area to minimize the risk to their safety. However, inmates at high risk for sexual victimization shall not be placed in involuntary protective custody unless an assessment of all available alternatives has been made and it has been determined that there is no available alternative means of separation from likely abusers (28 CFR 115.43; 28 CFR 115.68).

Housing and program assignments of a transgender or intersex inmate shall include individualized consideration for the inmate's health and safety and any related supervisory, management or facility security concerns. A transgender or intersex inmate's views with respect to his/her own safety shall be given serious consideration.

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

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507.11 EDUCATION, WORK AND OTHER RELEASE

Unless an inmate is incarcerated for an offense for which release is prohibited by law or otherwise prohibited by court order, an inmate incarcerated in the correctional facility may be released for a period reasonable and necessary for the following reasons:

- To seek or maintain employment
- To attend education classes
- To obtain medical treatment
- Any other reasonable purpose as determined by the Corrections Chief or the authorized designee

Education and work-release inmates who leave the secure perimeter of the correctional facility to complete programs should be housed separately from inmates in general population.

There should be no contact between the inmates in general population and those being authorized for education, work or other release. This is to minimize the risk of introducing contraband into the correctional facility and to maintain facility security.

507.12 STAFF TRAINING IN CLASSIFICATION

Classification deputies should receive training specific to inmate classification before being assigned primary classification duties. Individuals not specifically trained in inmate classification may work in classification provided that they are under the immediate supervision of a trained and qualified staff member.

Electronic Control Device Guidelines

508.1 PURPOSE AND SCOPE

When properly applied in accordance with this policy, the electronic control device (ECD) is considered a less than lethal control device which is intended to control a violent or potentially violent inmate while minimizing the risk of serious injury. It is anticipated that the appropriate use of such a device will result in fewer serious injuries to correctional staff and inmates.

508.2 POLICY

Staff members who have completed office-approved training may be issued a ECD for use during the current assignment.

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

- (a) The ECD shall be maintained in a secure storage location (see Management of Weapons and Control Devices Policy).
- (b) Each ECD shall be clearly and uniquely numbered.
- (c) Deputies shall sign out devices when needed.
- (d) Upon incident resolution, each deputy shall turn in the device to the approved secure storage area.
- (e) Deputies shall not pass on the devices to oncoming shift members without signing in and signing out the device on the ECD inventory log.
- (f) At the beginning of each shift, the oncoming Shift Supervisor shall inventory all ECDs.
- (g) Deputies shall be responsible for ensuring that their issued ECD is properly maintained and in good working order at all times.

508.3 VERBAL AND VISUAL WARNINGS

A verbal warning of the intended use of the ECD should precede its application, unless it would otherwise endanger the safety of deputies or when it is not practicable due to the circumstances. The purpose of the warning is the following:

- (a) Provide the inmate with a reasonable opportunity to voluntarily comply.
- (b) Provide other deputies and inmates with a warning that a ECD may be deployed.

If, after a verbal warning, an inmate is unwilling to voluntarily comply with a deputy's lawful orders and it appears both reasonable and practical under the circumstances, the deputy may, but is not required to, display the electrical arc (provided there is not a cartridge loaded into the ECD) or the laser in a further attempt to gain compliance prior to the application of the ECD. The aiming laser should never be intentionally directed into the eyes of another as it may permanently impair his/her vision.

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The fact that a verbal and/or other warning was given or the reasons it was not given shall be documented by the deputy deploying the device in the related report.

508.4 USE OF THE ECD

As with any correctional equipment, the ECD has limitations and restrictions requiring consideration before its use. The ECD should only be used when its operator can safely approach the subject within the operational range of the device.

Although the ECD is generally effective in controlling most individuals, deputies should be alert to the potential for failure and be prepared with other options.

508.4.1 FACTORS TO DETERMINE REASONABLENESS OF FORCE

The application of the ECD is likely to cause intense but momentary pain. As such, deputies should carefully consider and balance the totality of the circumstances available prior to using the device including, but not limited to, the following factors:

- (a) (a) Immediacy and severity of the threat to deputies or others.
- (b) The conduct of the individual being confronted, as reasonably perceived by the deputy at the time.
- (c) Deputy/subject factors (age, size, relative strength, skill level, injuries sustained, level of exhaustion or fatigue, the number of deputies available vs. subjects).
- (d) The effects of drugs or alcohol.
- (e) Subject's mental state or capacity.
- (f) Proximity of weapons or dangerous improvised devices.
- (g) The degree to which the subject has been effectively restrained and his/her ability to resist despite being restrained.
- (h) The availability of other options and their possible effectiveness.
- (i) Seriousness of the suspected offense or reason for contact with the individual.
- (j) Training and experience of the deputy.
- (k) Potential for injury to deputies, suspects and others.
- (l) Whether the person appears to be resisting, attempting to evade arrest by flight or is attacking the deputy.
- (m) The risk and reasonably foreseeable consequences of escape.
- (n) The apparent need for immediate control of the subject or a prompt resolution of the situation.
- (o) Whether the conduct of the individual being confronted no longer reasonably appears to pose an imminent threat to the deputy or others.

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- (p) Prior contacts with the subject or awareness of any propensity for violence.
- (q) Any other exigent circumstances.
- (b)
- (c)
- (d)

508.4.2 APPLICATION OF THE ECD

Authorized personnel may use the ECD when circumstances known to the deputy at the time indicate that such application is reasonable to control an inmate in any of the following circumstances:

- (a) A violent or physically resisting inmate who is an imminent threat to him/herself or others
- (b) An inmate who, by words or action, has demonstrated an intention to be violent or to physically resist and who reasonably appears to have the potential to harm deputies, him/herself or others.
 - 1. When practicable, the deputy should give a verbal warning of the intended use of the ECD, followed by a reasonable opportunity to voluntarily comply.
 - 2. The deputy must be able to articulate a reasonable belief that other available options appeared ineffective, impractical or would have presented a greater danger to the deputy, the inmate or others.

508.4.3 SPECIAL DEPLOYMENT CONSIDERATIONS

The use of the ECD should generally be avoided in the following situations unless the totality of the circumstances indicates that other available options reasonably appear ineffective, impractical or would present a greater danger to the deputy, the subject or others, and the deputy reasonably believes that the need to control the individual outweighs the risk of using the device:

- (a) Pregnant inmates
- (b) Elderly individuals or obvious juveniles
- (c) Individuals who are handcuffed or otherwise restrained
- (d) Individuals who have been recently sprayed with alcohol-based oleoresin capsaicin spray or who are otherwise in close proximity to any combustible material
- (e) Passively resisting subjects
- (f) Individuals whose position or activity may result in collateral injury (e.g., falls from height)

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Because the application of the ECD in the drive-stun mode (i.e., direct contact without darts) relies primarily on pain compliance and requires close proximity to the inmate, additional caution should be exercised. The application in drive-stun mode should be limited to supplementing the probe-mode to complete the circuit, or as a distraction technique to gain separation between deputies and the subject, thereby giving deputies time and distance to consider other force options or actions..

The ECD shall not be used to torture, psychologically torment, elicit statements or to punish any inmate.

508.4.4 TARGETING CONSIDERATIONS

While manufacturers have generally recommended that reasonable efforts should be made to target lower center mass and avoid intentionally targeting the head, neck, chest and groin, it is recognized that the dynamics of each situation and officer safety may not permit a deputy to limit the application of the ECD darts to a precise target area. As such, deputies should take prompt and ongoing care to monitor the condition of the inmate if one or more darts strikes the head, neck, chest or groin until the inmate is released to the care of paramedics or other medical personnel.

508.4.5 MULTIPLE APPLICATIONS OF THE ECD

If the first application of the ECD appears to be ineffective in gaining control of an inmate and if circumstances allow, the deputy should consider the following before additional applications of the device:

- (a) Whether the probes or darts are making proper contact
- (b) Whether verbal commands, other options or tactics may be more effective

This, however, shall not preclude any deputy from deploying multiple, reasonable applications of the ECD on an individual.

508.4.6 REPORT OF USE

All ECD discharges shall be documented in the related incident report and on the ECD report form. Notification shall be made to a supervisor in compliance with the office Use of Force Policy. Accidental discharges of a ECD cartridge will also be documented on the report form. Any report documenting the discharge of a ECD cartridge will include the cartridge serial number and an explanation of the circumstances surrounding the discharge.

The onboard ECD memory will be downloaded through the data port by a supervisor or Taser Instructor and saved with the related incident report. Photographs of probe sites should be taken, Anti-Felon Identification (AFID) tags should be collected and the expended cartridge along with both probes and wire should be submitted into evidence for future reference by the deputy collecting the cartridge. The cartridge serial number should be noted and documented on the records storage paperwork. The evidence packaging should be marked "biohazard" if the probes penetrated the inmate's skin.

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508.4.7 TASER® CAM™

The TASER is equipped with TASER® Cam™, which is an audio-video recording device integrated into the power supply. The TASER Cam is activated anytime the safety is in the off position. The safety should not be in the off position unless the deputy intends to use the device and the guidelines established in this policy are met. Anytime the TASER Cam is activated, the video and audio data should be downloaded in accordance with office evidence procedures and referenced in any related report. All video and audio not booked as evidence will be kept for a minimum of one year, at which time they will be erased or destroyed (WAC 44-14-03005).

508.5 MEDICAL TREATMENT

Absent extenuating circumstances or unavailability, only qualified personnel, should remove ECD darts from an inmate's body. Used ECD darts shall be considered a sharps biohazard, similar to a used hypodermic needle. Universal precautions should be taken accordingly.

All inmates who have been struck by ECD darts or who have been subjected to the electric discharge of the device shall be medically assessed prior to continued processing or housing. Any inmate who falls under any of the following categories should, as soon as practicable, be examined by qualified medical personnel:

- (a) The person is suspected of being under the influence of controlled substances and/or alcohol.
- (b) The person may be pregnant.
- (c) The person reasonably appears to be in need of medical attention.
- (d) The ECD darts are lodged in a sensitive area (e.g., groin, head, neck, chest/breast or near the eyes).
- (e) The person requests medical treatment.

Persons who exhibit extreme agitation, violent irrational behavior accompanied by profuse sweating, extraordinary strength beyond their physical characteristics and imperviousness to pain (sometimes called "excited delirium"), or who require a protracted physical encounter with multiple deputies to be brought under control, may be at an increased risk of sudden death and should be examined by qualified medical personnel as soon as practicable. Any individual exhibiting signs of distress after such an encounter shall be medically cleared prior to booking.

If any individual refuses medical attention, such a refusal should be witnessed by another deputy and/or medical personnel and shall be fully documented in related reports. If an audio recording is made of the contact or an interview with the individual, any refusal should be included if possible.

508.6 TRAINING

The Training Sergeant should ensure that all training includes the following:

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- (a) A review of this policy
- (b) A review of the Use of Force Policy
- (c) Target area considerations, to include techniques or options to reduce the intentional application of probes near the head, neck, chest and groin
- (d) De-escalation techniques

508.6.1 TESTING

All training delivered to the staff should include testing to document that the employee understands the subject matter presented.

Control of Inmate Movement

509.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process for the safe and secure movement of inmates between areas within the facility and transportation from the facility to court, medical appointments or other jurisdictions.

509.2 POLICY

The staff should be vigilant in the control and movement of inmates between areas within the facility and when transporting inmates outside the secure confines of the facility. Control may be by direct or indirect visual observation. All staff should consider all inmate movement as a high-risk activity. The staff should be aware of their surroundings at all times and take necessary steps to prevent the possession and exchange of contraband.

509.3 MOVEMENT OF INMATES

Movement of one or more inmates in the facility should be done in an orderly manner with inmates walking in a single-file line. Staff members should have situational awareness during the movement of inmates and should consider the design of the facility, areas of poor visibility and the presence of other inmates being moved. The staff should avoid areas where inmates may have access to contraband items.

Inmates should be restrained during movement based upon individual security classification, with higher risk inmates in handcuffs, waist chains and leg irons. An exception to this procedure is when an inmate has a physical disability where restraint devices may cause serious injury.

Pregnant inmates generally shall not be placed in restraints due to their increased potential for injury from a fall (RCW 70.48.500).

Whenever a high-security inmate is not able to be restrained, the staff should compensate by utilizing wheelchairs and should secure the inmate to the chair. It may also be necessary to increase the number of staff present to ensure the safe movement of high-security inmates.

The staff should be watchful in and around passageways and ensure that sallyport doors are secured to prevent escape.

Use of Force

510.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines governing application of force, limitations on the use of force, supervisor's responsibilities and reporting requirements for incidents involving the application of force.

510.1.1 DEFINITIONS

Definitions related to this policy include:

Deadly force - Any application of force that is reasonably anticipated and intended to create a substantial likelihood of death or very serious injury.

Excessive force - The use of more force than is objectively reasonable under the circumstances to accomplish a lawful purpose.

Use of force - Any application of physical techniques or tactics, chemical agents or weapons to another person. It is not a use of force when the inmate allows him/herself to be searched, escorted, handcuffed or restrained.

Use of force team technique - The use of force team technique ordinarily involves trained staff clothed in protective gear, who enter the inmate's area in tandem, each with a specific task, to achieve immediate control of the inmate.

510.2 POLICY

It is the policy of this office to accomplish the department functions with minimal reliance on the use of force and generally as the last alternative.

510.3 USE OF FORCE

Employees may use force as reasonably appears necessary in the performance of their duties, but excessive force shall not be used. Deputies must use only that amount of force that appears reasonably necessary under the circumstances in order to gain control of the inmate, to protect and ensure the safety of inmates, staff and others, to prevent serious property damage, prevent escape, obtain compliance with facility rules and staff orders and to ensure the institution's security and good order or for other lawful purposes.

The Office has provided a number of tools, weapons and training on techniques to use when responding to resistance and violent encounters. While various degrees of force exist, each deputy is expected to use only that degree of force that is reasonable under the circumstances to successfully accomplish the legitimate and lawful purpose in accordance with this policy.

It is recognized, however, that circumstances may arise in which staff may reasonably believe it would be impractical or ineffective to use any of the standard tools, weapons or methods provided by the Office. Staff members may find it more effective or practical to improvise their response to rapidly unfolding conditions they are confronting. In such circumstances, the use of any improvised

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device or method must nonetheless be objectively reasonable and utilized only to the degree reasonably necessary to accomplish a legitimate penological purpose.

In any review of an incident to determine whether a particular use of force conforms to this policy, the Office will evaluate the apparent need for an application of force, the relationship between that need and the amount of force used, the threat reasonably perceived, any efforts made to temper the severity of a forceful response and the extent of any injury to the inmate.

Prior to resorting to the use of force, staff should, when practicable, attempt verbal persuasion, orders or other tactics to avoid or mitigate the need for forceful action.

Force shall never be used as punishment or retaliation.

Medical checks will be performed on all inmates who have been subjected to force as soon as practicable, regardless of apparent injury.

Nothing in this policy is intended to require that force options be used in a particular order. However, the force option used must be objectively reasonable under the circumstances to accomplish a lawful objective.

510.3.1 FACTORS TO DETERMINE THE REASONABLENESS OF FORCE

When determining whether to apply force and evaluating whether a deputy has used reasonable force, a number of factors should be taken into consideration, as time and circumstances permit. These factors include but are not limited to:

- (a) Immediacy and severity of the threat to deputies or others.
- (b) The conduct of the individual being confronted, as reasonably perceived by the deputy at the time.
- (c) Deputy/subject factors (age, size, relative strength, skill level, injuries sustained, level of exhaustion or fatigue, the number of deputies available vs. subjects).
- (d) The effects of drugs or alcohol.
- (e) Subject's mental state or capacity.
- (f) Proximity of weapons or dangerous improvised devices.
- (g) The degree to which the subject has been effectively restrained and his/her ability to resist despite being restrained.
- (h) The availability of other options and their possible effectiveness.
- (i) Seriousness of the suspected offense or reason for contact with the individual.
- (j) Training and experience of the deputy.
- (k) Potential for injury to deputies, suspects and others.
- (l) Whether the person appears to be resisting, attempting to evade arrest by flight or is attacking the deputy.
- (m) The risk and reasonably foreseeable consequences of escape.

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(n) The apparent need for immediate control of the subject or a prompt resolution of the situation.

(o) Whether the conduct of the individual being confronted no longer reasonably appears to pose an imminent threat to the deputy or others.

(p) Prior contacts with the subject or awareness of any propensity for violence.

(q) Any other exigent circumstances.

510.3.2 DUTY TO INTERCEDE

Any deputy present and observing another staff member using force that is clearly not within this policy is expected, when reasonable to do so, to intercede to prevent the use of such force and in all cases report the use promptly to a supervisor.

510.3.3 TERMINATION OF USE OF FORCE

Deputies shall terminate use of force when it is objectively reasonable that a subject is fully in law enforcement's control.

510.3.4 CHOKE HOLDS

Choke holds are not permitted except in situations where the use of deadly force is allowed by law.

510.4 USE OF OTHER WEAPONS, TOOLS AND CHEMICAL AGENTS

510.4.1 NOISE/FLASH DISTRACTION DEVICES

Noise/flash distraction devices, sting grenades, chemical grenades and similar devices shall be used only at the direction of a supervisor and only by staff who have been trained in and are qualified for the use of the devices.

510.4.2 ELECTRONIC CONTROL DEVICES

The use of electronic control device (ECD)s shall be in accordance with the office Conducted Energy Device Policy.

Other electronic control devices, such as stun cuffs, stun shield and stun belts, shall only be used when it appears reasonably necessary to control an inmate who poses a serious threat to safety or security, and only with the approval of a supervisor. These devices shall not be used to punish or torment. Only office-trained personnel authorized by the Corrections Chief shall deploy and use these devices.

Prior judicial approval should be obtained for any use of stun belts in court holding facilities if the device will be worn in the courtroom or will be visible to a jury.

510.4.3 CHEMICAL AGENTS

Chemical agents shall only be used in the facility as authorized by the Corrections Chief or the authorized designee. Oleoresin capsicum (OC) spray should not be used in the medical unit or

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other designated areas where inmates are assigned to respiratory isolation or on any inmate who is under control with or without restraints.

Office-approved OC spray or foam may be possessed and used only by staff members who have received office-authorized training in its use.

Inmates who have been affected by the use of chemical agents shall be promptly provided with the proper solution to decontaminate the affected areas. Those inmates who complain of severe effects shall be examined by a qualified health care professional.

If the inmate refuses to decontaminate, such a refusal shall be documented. If an inmate has been exposed in a cell and not removed from the cell where the exposure occurred, in-cell decontamination shall be afforded to the inmate, including:

- (a) Health-trained custody staff advising the inmate how to decontaminate in the cell.
- (b) Clean clothing if the inmate's clothing was contaminated.
- (c) Monitoring of the in-cell inmate at least every 15 minutes, for a period of not less than 45 minutes, by health-trained custody staff.

510.4.4 PROJECTILE CHEMICAL AGENTS

Pepper projectile systems are plastic spheres filled with a derivative of OC powder. A compressed gas launcher delivers the projectiles with enough force to burst the projectiles on impact, releasing the OC powder. Although classified as a non-lethal weapon, the potential exists for the projectiles to inflict injury if they strike the head, neck, spine or groin. Therefore, personnel deploying the pepper projectile system should not intentionally target those areas except when the deputy reasonably believes the inmate may cause serious bodily injury or death to the deputy or others. The use of the pepper projectile system is subject to the following requirements:

- (a) Deputies encountering a situation that requires the use of the pepper projectile system shall notify a supervisor as soon as practicable. The supervisor shall respond to all such deployments. The supervisor shall ensure that all notifications and reports are completed as required by the Use of Force Policy.

Each deployment of a pepper projectile system shall be documented and, if reasonably practicable, recorded on video. This includes situations where the launcher was directed toward the inmate, regardless of whether the launcher was used. Only non-incident deployments are exempt from the reporting requirement (e.g., training, product demonstrations).

510.4.5 IMPACT WEAPONS

The need to immediately incapacitate the inmate must be weighed against the risk of causing serious injury or death. The head and neck should not be intentionally targeted with an impact weapon, except when the deputy reasonably believes the inmate may cause serious bodily injury or death to the deputy or others.

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510.4.6 KINETIC ENERGY PROJECTILES

Kinetic energy projectiles, when used properly, are less likely to result in death or serious physical injury and can be used by a trained and qualified member in an attempt to de-escalate a potentially deadly situation.

510.5 IMMEDIATE AND CALCULATED USE OF FORCE

An immediate use of force occurs when force is used to respond without delay to a situation or circumstance that constitutes an imminent threat to security or safety. For example, the immediate or unplanned use of force by staff to stop an inmate from inflicting life-threatening injuries to him/herself or to stop an assault on any other person, including other inmates.

The destruction of government property may require the immediate use of force by staff in some circumstances. A verbal warning should be given before an immediate use of force unless the circumstances preclude it.

If there is no need for immediate action, staff should attempt to resolve the situation through voluntary compliance or, if it reasonably appears necessary, the calculated use of force. A calculated use of force is called for when an inmate's presence or conduct poses a threat to safety or security and the inmate is located in an area that can be controlled or isolated, or when time and circumstances permit advance planning, staffing and organization.

The assistance of available non-custodial staff (e.g., psychologists, counselors) should be considered when attempting to resolve a situation without confrontation.

A supervisor shall be present in any situation involving the calculated use of force. The supervisor shall notify the Shift Supervisor for approval and consultation prior to any calculated use of force action.

510.5.1 CONFRONTATION AVOIDANCE PROCEDURES

Prior to any calculated use of force, the supervisor shall confer with the appropriate persons to gather pertinent information about the inmate and the immediate situation. Based on the supervisor's assessment of the available information, he/she should direct staff to attempt to obtain the inmate's voluntary cooperation and consider other available options before determining whether force is necessary.

The supervisor should consider including the following persons and resources in the process:

- (a) Mental health specialist
- (b) Qualified health care professional
- (c) Chaplain
- (d) Office Records Division
- (e) Any other relevant resources

Regardless of whether discussions with any of the above resources are accomplished by telephone or in person, the purpose is to gather information to assist in developing a plan of action,

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such as the inmate's medical/mental history (e.g., hypoglycemia, diabetes), any recent incident reports or situations that may be contributing to the inmate's present condition (e.g., pending criminal prosecution or sentencing, recent death of a loved one, divorce). The assessment should include discussions with staff members who are familiar with the inmate's background or present status. This may provide insight into the cause of the inmate's immediate agitation. It also may identify other staff members who have a rapport with the inmate and could possibly resolve the incident peacefully, without the use of force.

If force is determined necessary and other means of gaining control of an inmate are deemed inappropriate or ineffective, then the use of force team technique should be used to control the inmate and to apply restraints, if required.

Consideration should also be given to preventing exposure to communicable diseases in calculated use of force situations and to ensuring that medical services personnel are available.

510.5.2 FACTORS USED TO DETERMINE THE REASONABLENESS OF FORCE

When determining whether to apply force and evaluating whether a deputy has used reasonable force, a number of factors should be taken into consideration, as time and circumstances permit.

These factors include, but are not limited to:

- (a) Immediacy and severity of the threat to deputies or others.
- (b) The conduct of the individual being confronted, as reasonably perceived by the deputy at the time.
- (c) Deputy/subject factors (age, size, relative strength, skill level, injuries sustained, level of exhaustion or fatigue, the number of deputies available vs. subjects).
- (d) The effects of drugs or alcohol.
- (e) Subject's mental state or capacity.
- (f) Proximity of weapons or dangerous improvised devices.
- (g) The degree to which the subject has been effectively restrained and his/her ability to resist despite being restrained.
- (h) The availability of other options and their possible effectiveness.
- (i) Seriousness of the suspected offense or reason for contact with the individual.
- (j) Training and experience of the deputy.
- (k) Potential for injury to deputies, suspects and others.
- (l) Whether the person appears to be resisting, attempting to evade arrest by flight or is attacking the deputy.
- (m) The risk and reasonably foreseeable consequences of escape.

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- (n) The apparent need for immediate control of the subject or a prompt resolution of the situation.
- (o) Whether the conduct of the individual being confronted no longer reasonably appears to pose an imminent threat to the deputy or others.
- (p) Prior contacts with the subject or awareness of any propensity for violence.
- (q) Any other exigent circumstances.

510.5.3 PAIN COMPLIANCE TECHNIQUES

Pain compliance techniques may be effective in controlling a physical or actively resisting individual. Deputies may only apply those pain compliance techniques for which they have successfully completed department-approved training. Deputies utilizing any pain compliance technique should consider:

- (a) The degree to which the application of the technique may be controlled given the level of resistance.
- (b) Whether the person can comply with the direction or orders of the deputy.
- (c) Whether the person has been given sufficient opportunity to comply.

The application of any pain compliance technique shall be discontinued once the deputy determines that compliance has been achieved.

510.6 REPORTING THE USE OF FORCE

Every staff use of force is an incident that shall be reported on the appropriate report form. Any staff member who uses force and any staff directly observing the incident shall make a verbal report to a supervisor as soon as practicable and shall submit the appropriate documentation prior to going off-duty, unless directed otherwise by a supervisor.

The documentation will reflect the actions and responses of each staff member participating in the incident, as witnessed by the reporting staff member.

The report should include:

- (a) A clear, detailed description of the incident, including any application of weapons or restraints.
- (b) The identity of all involved in the incident (e.g., inmates, staff and others).
- (c) The specific reasons for the application of force.
- (d) The threat as perceived by the staff involved.
- (e) Efforts made to temper the severity of a forceful response, and if there were none, the reasons why.

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- (f) Description of any injuries to anyone involved in the incident, including the result of any medical checks that show the presence or absence of injury.

A video recording is required for all calculated use of force incidents. The recording and documentation will be part of the investigation package. The supervisor should ensure the recording is properly processed for retention and a copy is forwarded with the report to the Corrections Chief or designee as soon as practicable or within seven working days.

The supervisor responsible for gathering the reports may allow a reasonable delay in preparation of a report in consideration of immediate psychological and/or physical condition of the involved deputy.

510.7 SUPERVISOR RESPONSIBILITY

When a supervisor is able to respond to an incident in which there has been a reported use of force, the supervisor is expected to:

- (a) Obtain the basic facts from the involved deputies. Absent an allegation of misconduct or excessive force, this will be considered a routine contact in the normal course of duties.
- (b) In cases involving the use of deadly force or when serious injury has resulted, obtain an oral statement from the employee. The statement should be restricted to concerns of anything that may present an ongoing threat to the security of the facility or public safety.
- (c) Take appropriate measures to address public safety concerns, document the essence of the oral statements in writing and submit it to the Shift Supervisor.
- (d) Ensure that the appropriate investigation authority is notified, if needed.
- (e) Ensure that any parties involved in a use of force situation are examined by medical staff, regardless of whether any injuries are reported or detectable, and afforded medical treatment as appropriate.
- (f) Separately, notify the appropriate investigation authorities to allow for obtaining a recorded interview with all inmates upon whom force was used. If this interview is conducted without the person having voluntarily waived his/her *Miranda* rights, the supervisor or appropriate investigating authority should ensure the following in the event a report is submitted to a prosecuting authority:
 - 1. The fact that a recorded interview was conducted by a supervisor or investigating authority and retained for the use of force review should be clearly documented.
 - 2. The content of the interview should not be summarized or included in any related reports submitted to the prosecuting authority.
- (g) The recording of the interview should be distinctly marked for retention until all potential for civil litigation has expired.
- (h) Once any initial medical assessment or first aid has been completed, ensure that the appropriate investigating authority photographs any areas involving visible injury

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or complaint of pain as well as overall photographs of uninjured areas. These photographs should be retained until all potential civil litigation has expired.

- (i) Identify any witnesses not already included in related reports.
- (j) Review and approve all related reports.

If the supervisor determines that any application of force was not within policy, he/she should detail those findings in a separate report. If there is an injury or complaint of an injury, the supervisor should also prepare a risk management report and should submit all reports to the Shift Supervisor to include in any applicable reporting.

In the event that the supervisor believes the incident may give rise to civil litigation, a separate claim form should be completed and routed to the appropriate channels.

In the event that a supervisor is unable to respond to the scene of an incident involving a reported application of force, the supervisor is still expected to complete as many of the above items as circumstances permit.

If an inmate has made an allegation of an unnecessary or excessive use of force, the interview should be video-recorded and shall be documented on the appropriate report form.

510.8 USE OF DEADLY FORCE

Use of deadly force is justified in the following circumstances:

- (a) A deputy may use deadly force to protect him/herself or others from what he/she reasonably believes would be an imminent threat of death or serious bodily injury.
- (b) A deputy may use deadly force to stop an escaping inmate when the deputy has probable cause to believe that the inmate has committed, or intends to commit, a felony involving the infliction or threatened infliction of serious bodily injury or death, and the deputy reasonably believes that there is an imminent or future potential risk of serious bodily injury or death to any other person if the inmate is not immediately apprehended. Under such circumstances, a verbal warning should precede the use of deadly force, where feasible. Imminent does not mean immediate or instantaneous. An imminent danger may exist even if the inmate is not at that very moment pointing a weapon at someone. For example, an imminent danger may exist if a deputy reasonably believes any of the following:
 - 1. The inmate has a weapon or is attempting to access one and it is reasonable to believe the inmate intends to use it against the deputy or another.
 - 2. The inmate is capable of causing serious bodily injury or death without a weapon and it is reasonable to believe the inmate intends to do so.

510.8.1 USE OF DEADLY FORCE REPORTING

An employee who intentionally or accidentally uses deadly force, whether on- or off-duty, shall ensure that a supervisor is notified of the incident without delay.

The supervisor shall ensure that the chain of command is notified and all necessary health and safety, medical, and security measures are initiated.

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The Shift Supervisor shall promptly notify the Corrections Chief or designee of any incident involving a staff member employing deadly force, or any incident where a death or serious bodily injury may have been caused by a staff member.

510.8.2 NOTIFICATION TO INDIAN AFFAIRS

When the use of force by a deputy results in the death of a person who is an enrolled member of a federally recognized Indian tribe, notification shall be made to the Governor's Office of Indian Affairs within a reasonable period of time, but not more than 24 hours after the office has good reason to believe the person was an enrolled member. Notice shall include sufficient information for the Governor's Office of Indian Affairs to attempt to identify the deceased person and tribal affiliation (RCW 10.114.021).

510.8.3 WARNING SHOTS NOT PERMITTED

Employees shall not fire warning shots.

510.9 USE OF FORCE REVIEW

The Shift Supervisor shall review all related reports of use of force incidents occurring on his/her command. The review is to determine whether the use of force was in compliance with policy, procedure and applicable law and to determine if follow-up action or investigation is necessary. The Shift Supervisor should also ensure that a review packet containing a copy of all pertinent reports and materials is prepared and forwarded to the Use of Force Review Committee.

510.9.1 USE OF FORCE REVIEW COMMITTEE

The Corrections Chief shall review all use of force cases within 30 days of the incident.

The Corrections Chief should render a single finding as to whether the use of force was within policy, and forward their findings to the Sheriff. Any recommendations for areas identified as needing training, changes in policy or further investigation into incidents that may lead to employee discipline shall be addressed in a separate memorandum to the Training Sergeant and/or the Internal Affairs Unit, as appropriate.

510.10 TRAINING

The Corrections Chief or designee shall work with the Training Sergeant to ensure legal and facility training mandates are met. This training shall include the following:

- (a) Self-defense
- (b) Use of force to control inmates
- (c) Weapons training
- (d) Confrontation avoidance procedures:
 - 1. Communication techniques
 - 2. Cultural diversity
 - 3. Dealing with the mentally ill

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- 4. Application of restraints
- 5. Reporting procedures
- (e) Forced cell extraction techniques
- (f) Use of force team techniques
- (g) General restraint training (soft and hard restraints)

510.10.1 PERIODIC TRAINING

Supervisors should conduct and document regular periodic briefings concerning this policy and the storage and use of weapons and control devices. Any test sheets or documentation of performance should be forwarded to the Training Sergeant to be included in the employee's training record.

510.10.2 TRAINING FOR CONTROL DEVICES

The Training Sergeant shall ensure that all personnel who are authorized to carry a control device have been properly trained and certified to carry the specific control device and are retrained or recertified as necessary.

- (a) Proficiency training shall be monitored and documented by a certified, control-device weapons or tactics instructor.
- (b) All training and proficiency for control devices will be documented in the deputy's training file.
- (c) Deputies who fail to demonstrate proficiency with the control device or knowledge of this office's Use of Force Policy will be restricted from carrying the control device until demonstrating proficiency. If a deputy cannot demonstrate proficiency with a control device or knowledge of this office's Use of Force Policy after remedial training, the deputy may be subject to discipline.

Use of Restraints

511.1 PURPOSE AND SCOPE

This policy establishes guidelines for the application, supervisory oversight and restrictions on the use of restraints on persons incarcerated in this facility.

This policy shall apply to the use of specific types of restraints, such as four/five-point restraints, restraint chairs, ambulatory restraints and similar restraint systems, as well as all other restraints, including handcuffs, waist chains and leg irons when such restraints are used to restrain any inmate for prolonged periods.

511.1.1 DEFINITIONS

Definitions related to this policy include:

Clinical restraints - Restraints applied when an inmate's disruptive, assaultive, and/or self-injurious behavior is related to a medical or mental illness. Clinical restraints can include leather, rubber, or canvas hand and leg restraints with contact points on a specialized bed (four/five-point restraints) or a portable restraint chair.

Custody restraints - Includes steel handcuffs and leg restraints, polyurethane or nylon soft restraints, waist restraints, and chair restraints, applied to control an inmate who is assaultive, engaging in self-injurious behavior, or attempting to damage property.

Therapeutic seclusion - Segregated confinement of an agitated, vulnerable, and/or severely anxious inmate with a serious mental illness as part of his/her treatment when clinically indicated for preventive therapeutic purposes.

511.2 POLICY

It is the policy of this office that restraints shall be used only to prevent self-injury, injury to others, or property damage. Restraints may also be applied according to inmate classification, such as maximum security, to control the behavior of a high-risk inmate while he/she is being moved outside the cell or housing unit.

Restraints shall never be used for retaliation or as punishment. Restraints shall not be utilized any longer than is reasonably necessary to control the inmate. Restraints are to be applied only when less restrictive methods of controlling the dangerous behavior of an inmate have failed or appear likely to fail. Each incident where restraints are used beyond compliant handcuffing shall be documented as a use of force by the handling staff member and the documents placed in the appropriate file prior to the end of the staff member's shift.

This policy does not apply to the temporary use of restraints, such as handcuffing or the use of leg irons to control an inmate during movement and transportation inside or outside the facility.

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511.3 USE OF RESTRAINTS - CONTROL

Supervisors shall proactively oversee the use of restraints on any inmate. Whenever feasible, the use of restraints, other than routine use during transfer, shall require the approval of the Shift Supervisor prior to application. In instances where prior approval is not feasible, the Shift Supervisor shall be apprised of the use of restraints as soon as practicable.

Restraint devices, such as restraint chairs, shall only be used on an inmate when it reasonably appears necessary to overcome resistance, prevent escape, or bring an incident under control, thereby preventing injury to the inmate or others, or eliminating the possibility of property damage. Restraints shall not be applied for more time than is reasonably necessary to achieve the above goals.

Excluding short-term use to gain immediate control, placing an inmate in a restraint chair or other restraints for extended periods requires approval from the Corrections Chief or the authorized designee prior to taking action. The medical staff shall be called to observe the application of the restraints, when feasible, prior to the application or as soon as practicable after the application, and to check the inmate for adequate circulation.

The use of restraints for purposes other than for the controlled movement or transportation of an inmate shall be documented on appropriate logs to include, at minimum, the type of restraint used, when it was applied, a detailed description of why the restraint was needed, and when it was removed.

The following provisions shall be followed when utilizing restraints to control an inmate:

- (a) Restraints shall not be used as punishment, placed around a person's neck, or applied in a way that is likely to cause undue physical discomfort or restrict blood flow or breathing (e.g., hog-tying).
- (b) Restrained inmates shall not be placed face down or in a position that inhibits breathing.
- (c) Restraints shall not be used to secure a person to a fixed object except as a temporary emergency measure. A person who is being transported shall not be locked in any manner to any part of the transporting vehicle, except for items installed for passenger safety, such as seat belts.
- (d) Inmates in restraints shall be housed either alone or in an area designated for restrained inmates.
- (e) Restraints shall be applied for no longer than is reasonably necessary to protect the inmate or others from harm.
- (f) Staff members shall conduct direct face-to-face observation at least twice every 30 minutes on an irregular schedule to check the inmate's physical well-being and behavior. Restraints shall be checked to verify correct application and to ensure they do not compromise circulation. All checks shall be documented, with the actual time recorded by the person doing the observation, along with a description of the inmate's behavior. Any actions taken should also be noted in the log.

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- (g) The specific reasons for the continued need for restraints shall be reviewed, documented, and approved by the Corrections Chief or the Shift Supervisor at least every two hours.
- (h) As soon as possible, but within four hours of placement in restraints, the inmate shall be medically assessed to determine whether he/she has a serious medical condition that is being masked by the aggressive behavior. The medical assessment shall be a face-to-face evaluation by a qualified health care professional and shall recur once every six hours of continued restraint thereafter.
- (i) As soon as possible, but within eight hours of placement in restraints, the inmate must be evaluated by a mental health professional to assess whether the inmate needs immediate and/or long-term mental health treatment.

511.3.1 USE OF RESTRAINTS FOR COURT HEARINGS

Prior judicial approval should be obtained for any inmate restraints that will be used in any court proceeding.

Juveniles shall not be brought before the court for any court appearance wearing any physical restraint devices except when ordered by the court (JuCR 1.6).

511.4 USE OF RESTRAINTS - CLINICAL

Inmates may be considered for clinically ordered restraints or seclusion when exhibiting dangerous behavior that is believed to be a product of a medical or mental illness and that puts the inmate and/or others at risk of physical harm, or when medical care is urgently required and the inmate is not considered competent to give or withhold consent.

Clinical restraints and/or therapeutic seclusion shall only be used when an inmate's safety or the safety of others cannot be protected by less restrictive means and only upon the direct order of a qualified health care professional and notification of the Corrections Chief or the authorized designee prior to taking action. Restraints shall be used no longer than is reasonably necessary to provide for the legitimate safety concerns of the inmate, staff, or others.

The following provisions shall be used any time clinical restraints or therapeutic seclusion is authorized:

- (a) Excluding short-term use to gain immediate control of an inmate exhibiting dangerous or destructive behavior, an inmate may be placed in clinical restraints or therapeutic seclusion only on the orders of a qualified health care professional and only after making a determination that less restrictive interventions are ineffective to prevent the inmate from causing property damage or serious injury to him/herself or others.
- (b) Clinical restraints or therapeutic seclusion shall never be ordered or otherwise applied as a means of coercion, discipline, punishment, convenience, or retaliation.
- (c) The qualified health care professional's order may only be in effect for up to 12 hours for adult inmates and up to two hours for inmates age 17 or younger.

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- (d) Within one hour of the application of restraints or therapeutic seclusion, a face-to-face observation of the inmate to evaluate the need for continued restraint or therapeutic seclusion shall be conducted by a qualified health care professional.
- (e) If deemed clinically necessary, the qualified health care professional who gave the initial order for restraints or therapeutic seclusion may renew the original order for an additional four hours for an adult or up to two hours for a person who is age 17 or younger.
- (f) Inmates placed in clinical restraints shall be placed in designated cells within the medical unit. The restraints shall be applied in the least restrictive manner possible, based on the qualified health care professional's evaluation and order.
- (g) Inmates placed in restraints shall only be placed in a face-up position.
- (h) Following the first face-to-face observation, a qualified health care professional shall conduct face-to-face checks at least every 15 minutes on an irregular schedule to assess the inmate's condition and behavior. The restraints shall be checked for proper application and to ensure that circulation is not compromised. Checks shall be documented in the inmate's medical file.
- (i) Except in the event of a medical emergency for the inmate, only a qualified health care professional shall determine when an inmate shall be released from clinical restraints or therapeutic seclusion.

511.5 RANGE OF MOTION

Inmates placed in restraints for longer than two hours should receive a range-of-motion procedure that will allow for the movement of the extremities. Range-of-motion exercise will consist of alternate movement of the extremities (i.e., right arm and left leg) for a minimum of 10 minutes every two hours.

511.6 FOOD, HYDRATION, AND SANITATION

Inmates who are confined in restraints shall be given food and fluids. Food shall be provided during normal meal periods. Hydration (water or juices) will be provided no less than once every two hours or when requested by the inmate.

Offering food and hydration to inmates will be documented to include the time, the name of the person offering the food or water/juices, and the inmate's response (receptive, rejected). Provisions shall be made to accommodate any toileting needs at least once every two hours. Inmates shall be given the opportunity to clean themselves should they soil themselves or their clothing while they are in restraints.

511.7 AVAILABILITY OF CPR EQUIPMENT

CPR equipment, such as barrier masks, shall be provided by the facility and located in proximity to the location where inmates in restraints are held.

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511.8 RESTRAINED INMATE HOLDING

Restrained inmates should be protected from abuse by other inmates. Under no circumstances will restrained inmates be housed with inmates who are not in restraints. In most instances, restrained inmates are housed alone or in an area designated for restrained inmates.

511.9 PREGNANT INMATES

Leg irons or waist chains shall not be used on any inmate known to be pregnant. Except in extraordinary circumstances no restraints of any kind may be used on any pregnant inmate during transportation to and from visits to medical providers or court proceedings at any time during the third trimester of pregnancy or postpartum recovery. "Extraordinary circumstances" exist where a member makes an individualized determination that restraints are necessary to prevent the inmate from escaping or injuring herself, medical or safety personnel or others. Should restraints be necessary, the restraints shall be the least restrictive available and most reasonable under the circumstances (RCW 70.48.500(3)).

511.9.1 INMATES IN LABOR

While an inmate is in labor or in childbirth, no restraints of any kind may be used (RCW 70.48.500(2)). This does not prohibit a treating physician licensed under Title 18 RCW from requesting the use of hospital restraints for the medical safety of an inmate.

Classification Plan

512.1 PURPOSE AND SCOPE

The purpose of this policy is to establish an objective classification plan designed to identify security and health issues during the booking process so that inmates may be housed in such a way as to reduce the probability of assaultive and other disruptive behavior and to foster a safe and secure facility.

512.2 POLICY

It is the policy of this office to properly classify inmates during the booking process according to their security and health risks so that appropriate housing assignments may be made.

512.3 CLASSIFICATION PLAN

It is the responsibility of the Corrections Chief to develop and implement an objective classification plan to guide staff in the processing of individuals brought into the facility.

The plan should include the period of time beginning at intake with the initial screening process and culminate with an appropriate housing assignment for the inmate. It shall include an evaluation of the following criteria:

- Age
- Sex
- Current charges and behavior during the arrest process
- Criminal and incarceration history
- Mental and emotional stability
- Potential risk of safety to others or self
- Special management inmate status
- Special needs assessment for vulnerable adults
- Behavioral, physical limitations or disabilities
- Medical status, sobriety, suicidal ideation
- Escape history and degree of escape risk
- History of assaultive behavior
- The need to be separated from other classifications of inmates (e.g., gang affiliation, former law enforcement, sexual orientation)
- Any other criteria as deemed appropriate by the Corrections Chief

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The plan should include a methodology for validating the classification process and a periodic review of the validation documents for the purpose of continuous quality improvement of the classification process.

512.3.1 INTERVIEW

The comprehensive classification process begins with an interview by a staff member who has received specific training in inmate classification. The questions, answers and observations of this interview will be documented and numerically scored, representing the security level and housing assignment appropriate for each inmate.

512.3.2 OVERRIDE

A classification deputy should have the authority to override the scores when it appears necessary to more appropriately assign housing. The override capability exists to use the classification deputy's training and expertise in those instances when the numerical scores are not reflective of the inmate's potential security or health risk. All overrides will be reviewed by a supervisor and are intended to be an exception, rather than the rule.

512.4 REVIEWS AND APPEALS

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

The Corrections Chief or the authorized designee is responsible for ensuring that the appeal process is included in the inmate handbook provided during booking.

512.4.1 PERIODIC CLASSIFICATION REVIEWS

The classification deputy should review the status of all inmates who have been incarcerated in the facility for more than 30 days. The review should occur after 30 days and each 30 days thereafter. The review should examine changes in the inmate's behavior or circumstances and either raise, lower or maintain the classification status.

512.4.2 STAFF REQUESTED REVIEW

At any point during an inmate's incarceration, a staff member may request a review of the inmate's classification. The reason for the review, the review itself and the outcome of the review shall be documented in the inmate's permanent file. Nothing in this section shall prohibit staff from immediately moving an inmate to another location in the facility based on exigent circumstances. Under such circumstances, the staff member moving the inmate must immediately document the action and notify the classification deputy.

512.4.3 HOUSING ASSIGNMENTS

Inmates will be housed based upon the following criteria:

- Classification level

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- Age
- Sex (males and females will be housed in separate units)
- Legal status (e.g., pretrial or sentenced)
- Special problems or needs
- Behavior
- Any other criteria identified by the Corrections Chief

512.4.4 INMATES SENTENCED TO A STATE INSTITUTION

Unless a person is convicted of a felony and held in the correctional facility as a condition of probation, the inmate shall be transferred to a state institution before the 41st day from the date of sentencing (RCW 70.48.240). The transfer shall be contingent on the sentencing of all pending local charges.

512.5 CLASSIFICATION SPACE ALLOCATION

The Office will follow existing laws and rules and this policy relating to the separation of inmates confined in the correctional facility. To ensure that the allocated classification space meets the population needs, the Corrections Chief or the authorized designee should periodically meet with representatives of the classification deputies to discuss the fixed resources (e.g., cells, dorms, dayrooms). The classification plan depends on the ability of the facility to physically separate different classes of inmates. As the demographic of the inmate population changes, it is necessary to periodically assess classification space needs.

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

512.6 SINGLE-OCCUPANCY CELLS

Single-occupancy cells may be used to house the following categories of inmates:

- Maximum security
- Close custody
- Severe medical disabilities (upon consultation with medical staff and the availability of medical beds)
- Severe mental illness (upon consultation with mental health staff and the availability of mental health beds)
- Sexual predators
- Any inmate with an elevated risk of being exploited or victimized by others
- Any inmate whose condition indicates a special need for single-occupancy housing

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The classification supervisor shall notify the Corrections Chief or the authorized designee when single-occupancy cells are not available for housing the above described inmates. In such cases, a risk assessment shall be used to identify inmates in the above categories who may be safely housed together.

512.7 EDUCATION AND WORK RELEASE

Education and work-release inmates who leave the secure perimeter of the correctional facility to complete programs should be housed separately from inmates in general population.

Care should be taken to ensure that there is no contact between the inmates in general population and inmates being afforded programming; this is to minimize the risk of introducing contraband into the correctional facility and to maintain facility security.

Searches

513.1 PURPOSE AND SCOPE

The purpose of this policy is to provide clear direction on maintaining the safety and security of the facility by conducting searches, in balance with protecting the rights afforded by the United States Constitution.

The introduction of contraband, intoxicants or weapons into the Skagit County Sheriff's Office facility poses a serious risk to the safety and security of staff, inmates, volunteers, contractors and the public. Any item that is not available to all inmates may be used as currency by those who possess the item and will allow those in possession of the item to have control over other inmates. Any item that may be used to disengage a lock, other electronic security devices or damage the physical plant itself seriously jeopardizes the safety and security of this facility. Carefully restricting the flow of contraband into the facility can only be achieved by thorough searches of inmates and their environment.

Nothing in this policy is intended to prohibit the otherwise lawful collection of trace evidence from an inmate/arrestee.

513.2 DEFINITIONS

Definitions related to this policy include:

Contraband - Anything unauthorized for inmates to possess or anything authorized to possess but in an unauthorized quantity or altered from the original design or purpose.

Modified strip search - A search that requires a person to remove or rearrange some of his/her clothing that does not include a visual inspection of the breasts, buttocks or genitalia of the person but may include a thorough tactile search of an inmate's partially unclothed body. This also includes searching the inmate's clothing, once it has been removed.

Pat-down search - The normal type of search used by deputies within this facility to check an individual for weapons or contraband. It involves a thorough patting down of clothing to locate any weapons or dangerous items that could pose a danger to the deputy, the inmate or other inmates.

Physical body cavity search - A search that includes a visual inspection and may include a physical intrusion into or touching of a body cavity. Body cavity means the stomach or rectal cavity of a person, and the vagina of a female person.

Strip search - A search that requires a person to remove or rearrange some or all of his/her clothing to permit a visual inspection of the underclothing, breasts, buttocks, anus or outer genitalia of the person. This includes monitoring of a person showering or changing clothes where the person's underclothing, buttocks, genitalia or female breasts are visible to the monitoring employee.

Body Scan – A search that requires the use of the B-Scan 16HR-FBCS Whole Body security screening system to detect concealed contraband on or within a person. The B-Scan Whole body

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scanner uses Transmission X-Ray technology that passes through an individual's body to produce a black and white image of the skeleton and body cavities. Transmission X-Ray technology is a tool utilized to produce an image revealing the presence of concealed contraband on or in a person.

513.3 POLICY

It is the policy of this office to ensure the safety of staff, inmates and visitors by conducting effective and appropriate searches of inmates and areas within the facility in accordance with applicable laws.

Searches shall not be used for intimidation, harassment or retaliation.

513.4 PAT-DOWN SEARCHES

Pat-down searches will be performed on all inmates/arrestees upon entering the secure booking area of the facility. Additionally, pat-down searches shall occur frequently within the facility. At a minimum, the staff shall conduct pat-down searches in circumstances that include:

- (a) When inmates leave their housing units to participate in activities elsewhere in the facility (e.g., exercise yard, medical, program, visiting) and when they return.
- (b) During physical plant searches of entire housing units.
- (c) When inmates come into contact with other inmates housed outside of their housing units, such as work details.
- (d) Any time the staff believes the inmates may have contraband on their persons.

Except in emergencies, male staff may not pat down female inmates. Whenever practical, a pat-down search of a male inmate should be conducted by a male staff member. Absent the availability of a same sex staff member, it is recommended that a witnessing staff member be present during any pat-down search of an individual of the opposite sex. All cross-gender pat-down searches shall be documented (28 CFR 115.15).

513.5 BODY SCAN SEARCH

If a body scanner is available, a body scan search should be performed on all inmates/arrestees upon entering the secure booking area of the facility.

The Body Scan should be conducted by a staff member of the same sex as the person scanned (RCW 10.79.100). Any cross-gender searches shall be documented (28 CFR 115.15).

- (a) Individuals within sight of the visual display of the body scanner that is depicting the body during a scan shall be of the same sex as the person being scanned, except for physicians or licensed medical personnel.

The Body Scan shall not be used for these situations:

- (a) Medical purposes.

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- (b) Pregnant females. If staff are unsure if a person is pregnant, they will verify pregnancy status with jail medical staff.

When additional staff members are necessary for security purposes or to witness the discovery of evidence, the additional staff members shall be of the same sex as the person being searched.

All in-custody individuals may be subject to an additional Body Scan with the Shift Sergeant's approval. This will include, but is not be limited to:

- (a) When individuals return from court, outside medical appointments, work assignments including in custody work crews and inmate workers.
- (b) When individuals return from a professional contact visit, including the attorney visit area, in the one-on-one rooms in the Programing area of the Justice Center
- (c) During physical plant searches of entire housing units.
- (d) When individual come into contact with other individuals housed outside of their housing units, such as work details.
- (e) Any time the staff believes or receives credible information that an individual may have obtained contraband and currently has it on their persons.

The Body Scan should generally be used whenever reasonably practicable in place of a modified strip search, strip search or body cavity search of an inmate in housing unless one of those searches is reasonably necessary after the scan.

513.6 MODIFIED STRIP SEARCHES, STRIP SEARCHES AND PHYSICAL BODY CAVITY SEARCHES

Modified strip searches, strip searches and physical body cavity searches should be limited to those situations where such searches are necessary (RCW 10.79.060).

In order to limit the necessity of modified strip searches, strip searches and physical body cavity searches, arrestees who are arranging bail shall be permitted a reasonable period of time, not less than 12 hours, and the opportunity to make telephone calls before being placed in general population. Arrestees who are eligible for release or who will be released when they are no longer intoxicated will not be placed into general population or have unmonitored or unsupervised contact with general population inmates.

Deputies will generally consider the reason for the search, the scope, intrusion, manner and location of the search, and will utilize the least invasive search method to meet the need for the search.

513.6.1 SEARCHES PRIOR TO PLACEMENT IN GENERAL POPULATION

Modified strip searches or strip searches shall be conducted as follows:

- (a) No person held prior to placement in general population shall be subjected to a modified strip search or strip search without a warrant unless there is reasonable suspicion based upon specific and articulable facts to believe the person has a health condition requiring immediate medical attention or is concealing a weapon or

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contraband. Factors to be considered in determining reasonable suspicion include, but are not limited to:

1. The detection of an object during a pat-down search that may be a weapon or contraband and cannot be safely retrieved without a modified strip search or strip search.
 2. Circumstances of a current arrest that specifically indicate the person may be concealing a weapon or contraband. A felony arrest charge or being under the influence of a controlled substance should not suffice as reasonable suspicion absent other facts.
 3. Custody history (past possession of contraband while in custody, assaults on staff, escape attempts, etc.).
 4. The person's actions or demeanor.
 5. Criminal history (level of experience in a custody setting, etc.).
- (b) No modified strip search or strip search of an inmate shall be conducted prior to admittance to general population without prior written authorization from the ranking shift supervisor determining that reasonable suspicion exists.
- (c) Before any modified strip search or strip search is conducted, reasonable efforts must be made to use other less-intrusive means, such as pat-down, electronic metal detector or clothing searches.

513.6.2 SEARCHES OF PRETRIAL INMATES

Pat-down searches, clothing searches and electronic metal-detector searches, as appropriate, will be conducted on all pretrial inmates upon admission into the general population and whenever the pretrial inmate has entered an environment where contraband or weapons may be accessed. A pretrial inmate is a person who is being held pretrial without an order that he/she be held without bail. This includes, but is not limited to, the following:

- Upon return from contact visits
- Upon leaving the kitchen, shop, farm, etc.
- Upon return to general population from outside the confines of the facility (court, work-release, work detail, medical visits)

A clothing search should require an inmate to remove some or all of his/her clothing behind a modesty screen and does not include a visual inspection of the underclothing, breasts, buttocks or genitalia of the person. This should include a thorough search of the inmate's removed clothing. This may include requiring the person to squat or bend down behind the screen and reveal his/her hands and feet.

No pretrial inmate shall be subjected to a modified strip search or strip search without one or more of the following (RCW 10.79.130):

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- (a) There is reasonable suspicion based upon specific and articulable facts to believe the person has a health condition requiring immediate medical attention.
- (b) There is reasonable suspicion based upon specific and articulable facts to believe the person is concealing on his/her body a weapon, contraband or an item that constitutes a threat to the facility.
- (c) There is probable cause to believe the person is concealing on his/her body evidence not constituting a threat to the facility.
- (d) There is a search warrant authorizing the strip search.

No modified strip search or strip search shall be performed before reasonable efforts have been made to use less intrusive methods, such as pat-down, electronic metal detector or clothing searches.

No modified strip search or strip search shall be performed without prior written authorization from the ranking shift supervisor determining that reasonable suspicion or probable cause exists.

Pretrial inmates returning from court with release orders should not be returned to general population, except for retrieving personal property under the direct visual supervision of staff.

513.6.3 SEARCHES OF CONVICTED AND NO BAIL ORDERED INMATES

Strip searches will be conducted on all convicted and no bail ordered inmates upon admission into the general population.

A strip search of a convicted or no bail general population inmate should be conducted when the inmate has entered an environment where contraband or weapons may be accessed. This includes, but is not limited to, the following:

- (a) Upon return from contact visits
- (b) Upon leaving the kitchen, shop, farm, etc.
- (c) Upon return to general population from outside the confines of the facility (court, work-release, work detail, medical visits)

Inmates returning from court with release orders shall not be subject to modified strip searches or strip searches unless reasonable suspicion exists based on specific and articulable facts that the person is concealing a weapon or contraband. The inmate should not be returned to general population, except for retrieving his/her personal property under the direct visual supervision of staff.

Staff members may conduct modified strip searches and strip searches of inmates outside the above listed circumstances only with written supervisor approval. Staff members and supervisors must make a determination to conduct a strip search by balancing the scope of the particular search, intrusion, the manner in which it is conducted, the justification for initiating it and the place in which it is conducted. Less invasive searches should be used if they would meet the need for the search. For example, a pat-down or modified strip search may be sufficient as an initial effort to locate a larger item, such as a cell phone.

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513.6.4 MODIFIED STRIP SEARCH AND STRIP SEARCH PROCEDURES

All modified strip searches and strip searches shall be conducted in a professional manner under sanitary conditions and in an area of privacy. Except at the request of the inmate, no person, other than those who are participating in the search, shall be present or able to observe the search (RCW 10.79.150).

Unless conducted by a physician or other licensed medical personnel or in case of an emergency, a modified strip search or strip search shall be conducted by a staff member of the same sex as the person being searched (RCW 10.79.100). Any cross-gender modified strip searches and cross-gender strip searches shall be documented (28 CFR 115.15).

When additional staff members are necessary for security purposes or to witness the discovery of evidence, the additional staff members shall be of the same sex as the person being searched.

The staff member conducting a strip search shall not touch the breasts, buttocks or genitalia of the person being searched. These areas may be touched through the clothing during a modified strip search.

- (a) The searching staff member will instruct the inmate to:
 - 1. Remove his/her clothing.
 - 2. Raise his/her arms above the head and turn 360 degrees.
 - 3. Bend forward and run his/her hands through his/her hair.
 - 4. Turn his/her head first to the left and then to the right so the searching deputy can inspect the inmate's ear orifices.
 - 5. Open his/her mouth and run a finger over the upper and lower gum areas, then raise the tongue so the deputy can inspect the interior of the inmate's mouth. Remove dentures if applicable.
 - 6. Turn around and raise one foot first, then the other so the deputy can check the bottom of each foot.
 - 7. For a visual cavity search, turn around, bend forward and spread the buttocks if necessary to view the anus.
- (b) At the completion of the search, the inmate should be instructed to dress in either his/her street clothes or correctional facility-supplied clothing, as appropriate.
- (c) The staff member conducting a modified strip search or strip search of a pretrial inmate, an inmate not being admitted into general population or a convicted inmate, other than upon entry into general population and when the inmate has entered an environment where contraband or weapons may be accessed, shall also (RCW 10.79.150):

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1. Document the facts that led to the decision to perform a strip search of the inmate, including the offense for which the person was arrested if that fact was considered in determining reasonable suspicion to conduct the search.
2. Document the reasons less intrusive methods of searching were not used or were insufficient.
3. Document the supervisor's approval.
4. Document the time, date and location of the search.
5. Document the names of staff present, their serial numbers, sex and their roles.
6. Identify any contraband, weapon, evidence, item or health condition discovered by the search.
7. Process all contraband and weapons in accordance with the office's current evidence procedures.
8. If appropriate, complete a crime report and/or disciplinary report.
9. Document the search in the appropriate log.
10. Ensure the completed documentation is placed in the inmate's file. A copy of the written authorization and any search warrant shall be retained and made available to the inmate or other authorized representative upon request (except for those portions of any warrant ordered sealed by a court).

513.6.5 PHYSICAL BODY CAVITY SEARCH

Physical body cavity searches shall be completed as follows (RCW 10.79.080):

- (a) No person shall be subjected to a physical body cavity search without the prior written approval of the Corrections Chief and the ranking shift supervisor and only with the issuance of a search warrant. Authorization may be obtained electronically from the Corrections Chief or the ranking shift supervisor. A copy of any search warrant and the results of the physical body cavity search shall be included with the related reports and made available, upon request, to the inmate or authorized representative (except for those portions of the warrant ordered sealed by a court).
- (b) Before any physical body cavity search is authorized or conducted, a thorough pat-down search, a thorough electronic metal-detector search, and a thorough clothing search, as appropriate, must be used. No physical body cavity search shall be authorized or conducted unless these other methods do not satisfy the safety, security, or evidentiary concerns of the facility.
- (c) Only a physician may conduct a physical body cavity search. Except in exigent circumstances, only a physician who is not responsible for providing ongoing care to the inmate may conduct the search.

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- (d) Except for the physician conducting the search, persons present must be of the same sex as the person being searched. Only the necessary staff needed to maintain the safety and security of the medical personnel shall be present.
 - 1. The ranking supervisor may allow an inmate to have a readily available witness, of the inmate's choosing, present at the time the search is conducted. The person chosen shall not be currently in custody or present an unreasonable security risk.
- (e) Privacy requirements, including restricted touching of body parts and sanitary condition requirements, are the same as required for a strip search.
- (f) All physical body cavity searches shall be documented including:
 - 1. The facts that led to the decision to perform a physical body cavity search of the inmate.
 - 2. The reasons less intrusive methods of searching were not used or were insufficient.
 - 3. A copy of the Corrections Chief or ranking shift supervisor's written approval.
 - 4. A copy of the search warrant and supporting documents.
 - 5. The time, date, and location of the search.
 - 6. The names and sex of medical personnel present.
 - 7. The names, sex, and roles of any staff present.
 - 8. A statement of the results of the search and a list of any items removed from the inmate as a result of the search.
- (g) Completed documentation should be placed in the inmate's file. A copy of the written authorization shall be retained and made available to the inmate or other authorized representative upon request.
- (h) All contraband and weapons should be processed in accordance with the office's current evidence procedures.
- (i) Any contraband or weapons found in the facility should be documented in the contraband log.
- (j) If appropriate, the staff member shall complete a crime report and/or disciplinary report.

513.7 TRANSGENDER SEARCHES

Staff shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining genital status (see Prison Rape Elimination Act Policy for transgender and intersex definitions). If genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records or, if necessary, by obtaining that information as part of a broader medical examination conducted in private by a qualified health care professional (28 CFR 115.15).

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513.8 CONTRABAND SEARCHES

The staff shall always be alert to the possible presence of contraband and shall take immediate action to seize the contraband when practicable. There are several types of searches that contribute to contraband control and to maintaining a safe and secure environment.

513.9 HOUSING UNIT SEARCHES

Housing unit searches shall occur as directed by a supervisor. These searches should include all of the living spaces occupied by inmates. Housing unit searches should be scheduled in a manner that does not create a pattern where the inmates can predict such searches. During a housing unit search:

- (a) All inmates shall vacate their living areas and be searched by staff.
- (b) Inmates should be escorted to a separate holding area, such as the recreation yard.
- (c) Staff shall search the living areas of the inmates, including bedding, personal storage areas, bunks and other areas with inmate access.
- (d) Any weapons or contraband located shall be processed in accordance with the current evidence procedures.
- (e) The staff shall attempt to identify the inmate who possessed the contraband and file appropriate inmate discipline and/or crime reports.
- (f) Any alcoholic beverage possessed by inmates shall be seized and the appropriate inmate disciplined and/or criminal charges filed.
- (g) Any authorized item found in excess of the limited quantity (e.g., food items, newspapers) shall be seized and discarded.

At the conclusion of the housing unit search, closely supervised inmate workers should clean the unit. All authorized inmate personal property shall be respected and living areas should be returned to an orderly condition.

513.9.1 CANINE-ASSISTED SEARCHES

It is the policy of this facility to use canines to assist the staff in searching for contraband. Such searches shall occur only with the approval of a supervisor. Only canines trained in the detection of contraband, such as drugs, alcohol and weapons, will be allowed within the secure perimeter of the facility.

Canines will generally be used to assist the staff in general physical plant or living area searches. Contact between inmates and canines should be kept to a minimum. Also refer to the Office's Canine Program Policy.

513.10 PHYSICAL PLANT SEARCHES

The following areas of this facility shall be periodically searched for contraband:

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- (a) Exercise yards shall be searched for contraband prior to and after each inmate group occupies the yard.
- (b) Holding cells shall be searched prior to and after each inmate occupies the cell.
- (c) Program areas, such as classrooms and multipurpose rooms shall be searched after each use by an inmate or inmate group.
- (d) Laundry areas shall be searched before and after each inmate group occupies the area.
- (e) Kitchen areas shall be frequently searched for contraband and to account for tools, knives and food items.
- (f) Inmate visiting and public areas shall be frequently inspected for contraband.
- (g) The facility perimeter shall be searched at least once each shift for contraband.

513.10.1 CANINE-ASSISTED SEARCHES

It is the policy of this facility to use canines to assist the staff in searching for contraband. Such searches shall occur only with the approval of a supervisor. Only canines trained in the detection of contraband, such as drugs, alcohol and weapons, will be allowed within the secure perimeter of the facility. Canines trained solely in crowd control or to assist in physically subduing individuals will not be used in the facility.

Canines will generally be used to assist the staff in general physical plant or living area searches. Contact between inmates and canines should be kept to a minimum. Also refer to the Canines Policy.

513.11 CRIMINAL EVIDENCE SEARCHES

The Corrections Chief or the authorized designee shall be notified, as soon as practicable, any time it is suspected that a crime has been committed in the facility or other area controlled by the facility staff, and there is a need to search for evidence related to the crime. Upon suspected discovery of evidence, law enforcement should be contacted in accordance with agency criminal investigation procedures. Evidence will be processed in accordance with investigative procedures and practices and referred for prosecution.

Any evidence collected in connection with an alleged crime shall be reported, documented and stored to protect it from contamination, loss or tampering, and to establish the appropriate chain of custody. A search for evidence may be conducted by staff whenever there is a need for such action.

513.12 TRAINING

The Training Sergeant shall provide training for staff in how to conduct pat-downs, modified strip searches and strip searches in a professional and respectful manner and in the least intrusive manner possible, consistent with facility security needs. This training shall include cross-gender

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pat downs and searches, as well as searches of transgender and intersex inmates (28 CFR 115.15).

Reporting Inmate Deaths

514.1 PURPOSE AND SCOPE

This policy provides direction on how deaths in-custody shall be reported.

514.1.1 DEFINITIONS

Definitions related to this policy include:

In-custody death - The death of any person, for whatever reason (natural, suicide, homicide, accident), who is in the custody of the Skagit County Jail.

514.2 POLICY

It is the policy of this office to follow state and local guidelines for reporting in-custody deaths.

514.3 MANDATORY REPORTING

All in-custody deaths shall be reported as required.

If the decedent is a boarder for another agency, the Corrections Chief shall notify that agency so that agency will assume responsibility for the notification of the decedent's family.

Additionally, and pursuant to Article 37 of the Vienna Convention, in the case of the death of a foreign national, written notification shall be made within 72 hours of the death to the appropriate consulate post. The notification shall include the inmate's name, identification number, date and time of death and the attending physician's name.

514.4 REQUIRED INFORMATION

The information to be reported to the state Attorney General's office includes:

- Name, sex, race, ethnicity and date of birth of the inmate
- The date, time and location of death
- A brief description of the circumstances surrounding the death
- Whether the decedent ever had an overnight stay in a mental health facility since his/her admission to custody
- Whether the death was incidental to a use of force by the staff
- The name of the law enforcement agency that detained, arrested or was in the process of arresting the decedent
- The specific type of intoxicant involved in the death, if applicable
- Any other information required by state or federal statute, regulation or ordinance

During an investigation, all inquiries regarding the death shall be referred to the Public Information Officer. Deputies shall not make a public comment.

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Reporting Inmate Deaths

514.5 PROCEDURE

Upon determining that a death of any person has occurred while in the custody of this office, the Shift Supervisor is responsible for ensuring that the Sheriff, Corrections Chief, and all appropriate investigative authorities, including the coroner, are notified without delay and all written reports are completed.

The Corrections Chief shall observe all pertinent laws and allow appropriate investigating agencies full access to all facts surrounding the death (RCW 68.50.010).

The Office shall establish policies and procedures for the investigation of any in-custody death.

The decedent's personal belongings shall be disposed of in a responsible and legal manner (RCW 36.24.130). All property and records shall be retained according to established retention schedules (WAC 44-14-03005).

The individual designated by the decedent shall be notified of all pertinent information as required by law.

514.6 INMATE DEATH REVIEW

If warranted the Sheriff is responsible for establishing a team of qualified staff to conduct an administrative review. An in-custody death should be reviewed to determine the appropriateness of clinical care, or to ascertain whether changes to policies, procedure or practices are warranted and to identify issues that might require further study. At a minimum, the review team should include the following:

- (a) Sheriff and/or the Corrections Chief
- (b) Prosecuting Attorney
- (c) Investigative staff
- (d) The Responsible Physician, or others deemed necessary.

The in-custody death review should be conducted no later than 72 hours after the incident.

Staff and Inmate Contact

515.1 PURPOSE AND SCOPE

Interaction with inmates allows for continual assessment of the safety and security of the facility and the health and welfare of the inmates. However, inappropriate interaction can undermine security and order in the facility and the integrity of the supervision process.

This policy provides guidelines for appropriate and professional interaction between members and inmates, and is intended to promote high ethical standards of honesty, integrity and impartiality as well as increase facility safety, discipline and morale.

Violation of this policy may result in disciplinary action up to and including dismissal. Members who seek information or clarification about the interpretation of this policy are encouraged to promptly contact their supervisor.

515.2 POLICY

The Corrections Chief shall ensure that inmates have adequate ways to communicate with staff and that the staff communicates and interacts with inmates in a timely and professional manner.

515.3 GENERAL CONTACT GUIDELINES

Members are encouraged to interact with the inmates under their supervision and are expected to take prompt and appropriate action to address health and safety issues that are discovered or brought to their attention.

All members should present a professional and command presence in their contact with inmates. Members shall address inmates in a civil manner. The use of profanity, and derogatory or discriminatory comments is strictly prohibited.

Written communication (e.g., request forms, inmate communication, grievances, rules infraction forms, disciplinary reports) shall be answered in a timely manner. Such communication shall be filed with the inmate's records.

Members shall not dispense legal advice or opinions, or recommend attorneys or other professional services to inmates.

While profanity and harsh language are prohibited, the Office recognizes the necessity for staff to give inmates direction in a firm, determined, and authoritative manner in order to maintain proper supervision and control. Authoritative directions to inmates are particularly instructed when activities or events pose a threat to the safety or security of this facility.

515.4 CONSTITUTIONAL MATTERS

Members shall follow all United States and Washington Constitutional requirements pertaining to custodial situations; including, but not limited to, search and seizure, access to counsel and interview and interrogation.

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515.5 ANTI-FRATERNIZATION

Personal or other interaction not pursuant to official duties between facility staff and current inmates, inmates who have been discharged within the previous year, their family members or known associates have the potential to create conflicts of interest and security risks in the work environment.

Members shall not knowingly maintain a personal or unofficial business relationship with any persons described in this section unless written permission is received from the Corrections Chief.

Prohibited interactions include but are not limited to:

- (a) Communications of a sexual or romantic nature.
- (b) Salacious exchanges.
- (c) Sexual abuse, sexual assault, sexual contact, or sexual harassment.
- (d) Exchanging letters, phone calls, or other similar communications, such as texting.
- (e) Exchanging money or other items.
- (f) Extending privileges, giving or accepting gifts, gratuities, or favors.
- (g) Bartering.
- (h) Any financial transactions.
- (i) Being present at the home of an inmate for reasons other than an official visit without reporting the visit.
- (j) Providing an inmate with the staff member's personal contact information, including social media accounts.

515.5.1 EXCEPTIONS

The Corrections Chief may grant a written exception to an otherwise prohibited relationship on a case-by-case basis based upon the totality of the circumstance. In determining whether to grant an exception, the Corrections Chief should give consideration to factors including, but not limited to:

- Whether a relationship existed prior to the incarceration of the inmate.
- Whether the relationship would undermine security and order in the facility and the integrity of the supervision process.
- Whether the relationship would be detrimental to the image and efficient operation of the facility.
- Whether the relationship would interfere with the proper discharge of, or impair impartiality and independence of, judgment in the performance of duty.

515.6 REPORTING

Members shall promptly report all attempts by inmates to initiate sexual acts or any salacious conversations, and forward any correspondence from an inmate or former inmate to the Corrections Chief or the authorized designee.

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Members shall report all attempts by inmates to intimidate or instill feelings of fear to their supervisor.

Members shall promptly notify their immediate supervisors in writing if:

- A family member or close associate has been incarcerated or committed to the custody of the facility.
- The member is involved in a personal or family relationship with a current inmate or with an inmate who has been discharged within the previous year.

Transportation of Inmates Outside the Secure Facility

516.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for the transportation of inmates outside this facility and to ensure that the staff assigned to transportation duties is qualified and adequately trained.

516.2 POLICY

It is the policy of the Skagit County Sheriff's Office to provide safe, secure and humane transportation for all inmates and other persons as required by law.

This office shall transfer all inmates from the correctional facility to the place of imprisonment pursuant to the sentence of the court as soon as practicable after the sentence, in accordance with all laws relating to the transfer of inmates and costs related to transfers to facilities and jurisdictions.

516.3 PROCEDURES

Only staff members who have completed office-approved training on inmate transportation should be assigned inmate transportation duty. All staff members who operate transportation vehicles shall hold a valid license for the type of vehicle being operated.

Any member who transports an inmate outside the secure confines of this facility is responsible for:

- (a) Obtaining all necessary paperwork for the inmate being transported (e.g., medical/dental records, commitment documents).
 - 1. If the inmate being transported has a developmental disability or is suffering from a traumatic brain injury, the nature of the disability and any necessary accommodations must be documented and provided to the receiving facility staff (RCW 70.48.245).
- (b) Submitting a completed transportation plan to the transportation supervisor. Items that should be addressed in the plan include:
 - 1. Type of restraints to be used on the inmates being transported.
 - 2. The routes, including alternate routes, to be taken during the transportation assignment. Routes should be selected with security for the community in mind.
 - 3. Emergency response procedures in the event of a collision, breakdown of a transportation vehicle or other unforeseen event.
- (c) Ensuring that all inmates are thoroughly searched and appropriate restraints are properly applied.

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1. Leg irons or waist chains shall not be used on any inmate known to be pregnant (see the Use of Restraints Policy) (RCW 70.48.500(3)).
- (d) Ensuring that all vehicle security devices (e.g., window bars, inside cages, door locks) are in good repair and are operational.
- (e) Thoroughly searching the transporting vehicle for contraband before any inmate is placed inside, and again after removing the inmate from the transporting vehicle.

516.3.1 TRANSPORTATION LOGS

Inmate transportation logs should be developed by the Corrections Chief or the authorized designee and used to log all inmate transportation. The logs shall include:

- Name and identification number of the inmate.
- Date and start/stop time of the transport.
- Location where the inmate was transported.
- Name and identification number of the transporting deputy.
- Circumstances of any unusual events associated with the transportation.

The logs shall be retained by the facility in accordance with established records retention schedules.

516.3.2 TRANSFER OF INMATE TO HOSPITAL

When an inmate in custody for a violent or sex offense is taken to a hospital, the transporting deputy shall remain with, or secure, the inmate while the inmate is receiving care, unless (RCW 10.110.020; RCW 10.110.030):

- (a) The medical care provider determines the inmate does not need to be accompanied or secured.
- (b) The deputy notifies the medical care provider that the deputy is leaving after reasonably determining:
 1. The inmate does not present an imminent and significant risk of causing physical harm to themselves or another person.
 2. There is no longer sufficient evidentiary basis to maintain the inmate in custody.
 3. In the interest of public safety, his/her presence is urgently required at another location and supervisor approval is obtained.
 - (a) The deputy shall make a reasonable effort to ensure a replacement deputy is provided or other means of securing the inmate is provided as soon as possible.

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516.4 TRAINING

The Training Sergeant shall ensure that all employees charged with inmate transportation duties receive training appropriate for the assignment.

Documentation of all training presented shall be retained in the employee's training file in accordance with established records retention schedules.

Safety and Sobering Cells

517.1 PURPOSE AND SCOPE

This policy establishes the requirement for placing inmates into and the continued placement of inmates in safety cells or sobering cells.

517.1.1 DEFINITIONS

Definitions related to this policy include:

Safety cell - An enhanced protective housing designed to minimize the risk of injury or destruction of property used for inmates who display behavior that reveals intent to cause physical harm to themselves or others or to destroy property or who are in need of a separate cell for any reason, until suitable housing is available.

Sobering cell - A holding cell designed to minimize the risk of injury by falling or dangerous behavior. It is used as an initial sobering place for arrestees or inmates who are a threat to their own safety or the safety of others as a result of being intoxicated from any substance, and who require a protected environment to prevent injury or victimization by other inmates.

517.2 POLICY

This facility will employ the use of safety and sobering cells to protect inmates from injury or to prevent the destruction of property by an inmate in accordance with applicable law.

A sobering or safety cell shall not be used as punishment or as a substitute for treatment. The Corrections Chief or the authorized designee shall review this policy annually with the Responsible Physician.

517.3 SAFETY CELL PROCEDURES

The following guidelines apply when placing any inmate in a safety cell:

- (a) Placement of an inmate into a safety cell requires approval of the Shift Supervisor, the Responsible Physician or a medical professional working under the direct supervision of a physician.
- (b) A safety cell log shall be initiated every time an inmate is placed into the safety cell and should be maintained for the entire time the inmate is housed in the cell. Cell logs will be retained in accordance with office retention schedules but in any case for at least two years (WAC 44-14-03005).
- (c) A safety check consisting of direct visual observation that is sufficient to assess the inmate's well-being and behavior shall occur twice every 30 minutes. Each safety check of the inmate shall be documented. Supervisors shall inspect the logs for completeness every shift and document this action on the safety cell log.
- (d) Inmates should be permitted to remain normally clothed or should be provided a safety suit, except in cases where the inmate has demonstrated that clothing articles may pose a risk to the inmate's safety or the facility. In these cases, the reasons for not providing clothing shall be documented on the safety cell log.

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- (e) Inmates in safety cells shall be given the opportunity to have fluids (water, juices) at least hourly. Deputies shall provide the fluids in paper cups that are not to be retained by the inmate. The inmates shall be given sufficient time to drink the fluids prior to the cup being removed. Or inmates shall be provided with an orange safety cup that can be retained by the inmate. Each time an inmate is provided the opportunity to drink fluids will be documented on the safety cell log.
- (f) Inmates will be provided meals during each meal period. Meals will be served in safe containers and the inmates will be monitored while eating the meals. Inmates shall be given ample time to complete their meals. All meals provided to inmates in safety cells will be documented on the safety cell log.
- (g) The Shift Supervisor shall review the appropriateness for continued retention in the safety cell at least every eight hours. The reason for continued retention or removal from the safety cell shall be documented on the safety cell log.
- (h) A medical assessment of the inmate in the safety cell shall occur within 12 hours of placement, or at the next daily sick call, whichever is earliest. Continued retention of the inmate in the safety cell shall be conducted by a qualified health care professional and shall occur at least every 24 hours thereafter. Medical assessments shall be documented.
- (i) A mental health opinion on placement in the safety cell shall occur within 24 hours of placement. The mental health opinion shall be documented.

517.4 SOBERING CELL PROCEDURES

The following guidelines apply when placing any inmate in a sobering cell:

- (a) A sobering cell log shall be initiated every time an inmate is placed into a sobering cell. The log shall be maintained for the entire time the inmate is housed in the cell. Cell logs will be retained in accordance with office retention schedules but in any case for at least two years (WAC 44-14-03005).
- (b) A safety check consisting of direct visual observation that is sufficient to assess the inmate's well-being and behavior shall occur at least once every 30 minutes. Each visual observation of the inmate by staff shall be documented. Supervisors shall check the logs for completeness every shift and document this action on the sobering cell log.
- (c) Medical staff or trained deputies shall review the appropriateness for continued retention in the sobering cell at least every six hours in accordance with the office Detoxification and Withdrawal Policy. Only inmates who continue to need the protective housing of a sobering cell will continue to be detained in such housing.
- (d) Inmates will be removed from the sobering cell when they no longer pose a threat to their own safety and the safety of others and are able to continue the booking process.
- (e) Females and males will be detained in separate sobering cells.

Biological Samples

518.1 PURPOSE AND SCOPE

This policy provides guidelines for the collection of biological samples from those inmates required to provide samples upon conviction and or arrest for certain offenses. This policy does not apply to biological samples collected at a crime scene or taken from a person in conjunction with a criminal investigation. Nor does it apply to biological samples collected from those required to register, for example, as sex offenders.

518.2 POLICY

The Skagit County Sheriff's Office will assist in the expeditious collection of required biological samples from arrestees and offenders in accordance with the laws of this state and with as little reliance on force as practicable.

518.3 PERSONS SUBJECT TO BIOLOGICAL SAMPLE COLLECTION

The following persons must submit a biological sample (RCW 43.43.754):

- (a) Every person convicted on or after June 12, 2008 of any of the following crimes (or equivalent juvenile offenses):
 - 1. Any felony offense
 - 2. Assault in the fourth degree with sexual motivation (RCW 9A.36.041; RCW 9.94A.835)
 - 3. Communication with a minor for immoral purposes (RCW 9.68A.090)
 - 4. Custodial sexual misconduct in the second degree (RCW 9A.44.170)
 - 5. Failure to register (RCW 9A.44.040 et seq.)
 - 6. Harassment (RCW 9A.46.020)
 - 7. Patronizing a prostitute (RCW 9A.88.110)
 - 8. Sexual misconduct with a minor in the second degree (RCW 9A.44.096)
 - 9. Stalking (RCW 9A.46.110)
 - 10. Violation of a sexual assault protection order granted under RCW 7.90.005 et seq.
 - 11. Indecent exposure (RCW 9A.88.010)
- (b) Every person convicted prior to June 12, 2008 of any of the offenses listed above but still incarcerated on or after June 12, 2008
- (c) Every person convicted of a felony, harassment, stalking, or communicating with a minor for immoral purpose on or after July 1, 2002, or convicted before that date if the person was still incarcerated on or after that date
- (d) Every person convicted of a sexual or violent offense after July 1, 1990

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- (e) Every person convicted of a sexual or violent offense prior to July 1, 1990 and still incarcerated on or after July 25, 1999

518.3.1 OPTIONAL SUBMISSION OF BIOLOGICAL SAMPLES

The Office may submit biological samples to the forensic laboratory services of the Washington State Patrol (WSP) of an offender who is deceased and who was previously convicted of a qualifying offense regardless of the date of conviction (RCW 43.43.754(1)).

518.4 PROCEDURE

When an inmate is required to provide a biological sample, a trained employee shall attempt to obtain the sample in accordance with this policy.

518.4.1 COLLECTION

The following steps should be taken to collect a sample:

- (a) Verify that the inmate is required to provide a sample pursuant to RCW 43.43.754.
- (b) Verify that a biological sample has not been previously collected from the offender by querying the person's Washington state criminal history records. There is no need to obtain a biological sample if one has been previously obtained.
- (c) Use the designated collection kit provided by the WSP to perform the collection and take steps to avoid cross contamination.
- (d) Forward the sample to the appropriate crime laboratory as soon as practicable.

518.4.2 COMMUNICATION TO PERSON PROVIDING SAMPLE

Upon inquiry, the person providing the sample should be informed:

- (a) That he/she is required by law or court order to provide a biological sample.
- (b) That there is no right to refuse.
- (c) That the sample will be sent to the Washington State Patrol crime laboratory for analysis and entry into appropriate DNA databases.

518.4.3 USE OF FORCE TO OBTAIN SAMPLES

Generally, there should be no need to take a biological sample by force from an inmate required by law or court order to provide such sample. In the event of resistance or refusal, staff should attempt to resolve the situation through voluntary compliance before resorting to use of force. Deputies shall contact a supervisor if an inmate refuses to provide a biological sample as required. The supervisor should consider contacting:

- (a) The inmate's parole or probation officer when applicable.
- (b) The appropriate prosecuting attorney to consider filing additional charges against the person for failure to comply or otherwise bring the refusal before a judge who has contempt authority and/or jurisdiction over the conviction that led to the sample collection requirement.

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- (c) The judge at an upcoming court appearance.
- (d) The inmate's attorney.
- (e) A chaplain.
- (f) Another custody facility with additional resources where an arrestee can be transferred to better facilitate sample collection.
- (g) Any other relevant resources.

If the inmate refuses to provide a biological sample and alternatives are not practicable, a supervisor may approve the use of reasonable force. The supervisor shall be directly involved in any situation involving the use of force to obtain a sample, including developing a plan and documenting the process. Applicable custodial disciplinary actions may be used to compel compliance.

Reporting the use of force shall follow the reporting requirements set forth in the Use of Force Policy.

518.4.4 VIDEO RECORDING

A video recording should be used when force is necessary to obtain a biological sample. The recording should document all staff participating in the process and be made a part of the inmate's record or otherwise retained in accordance with the Office's established records retention schedule.

518.5 CALCULATED USE OF FORCE TO OBTAIN SAMPLES

If an inmate refuses to cooperate with the sample collection process, deputies should attempt to identify the reason for refusal and seek voluntary compliance without resorting to using force. Force will not be used in the collection of samples except as authorized by court order or approval of legal counsel and only with the approval of the Shift Supervisor. Methods to consider when seeking voluntary compliance include contacting:

- (a) The inmate's parole or probation officer when applicable.
- (b) The prosecuting attorney to seek additional charges against the inmate for failure to comply or otherwise bring the refusal before a judge.
- (c) The judge at the inmate's next court appearance.
- (d) The inmate's attorney.
- (e) A chaplain.
- (f) A supervisor who may be able to authorize disciplinary actions to compel compliance, if any such actions are available.

The Shift Supervisor shall review and approve any calculated use of force. The supervisor shall be present to supervise and document the calculated use of force.

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518.5.1 VIDEO RECORDING

A video recording should be made any time force is used to obtain a biological sample. The recording should document all staff participating in the process, in addition to the methods and all force used during the collection. The recording should be part of the investigation file, if any, or otherwise retained in accordance with the office's established records retention schedule.

End of Term Release

519.1 PURPOSE AND SCOPE

The purpose of this policy is to establish and maintain procedures governing the end of term release of inmates to ensure that inmates are not released in error.

519.2 POLICY

It will be the policy of the Skagit County Sheriff's Office to provide for the timely, efficient and legal release of inmates.

519.3 RELEASE PROCEDURE

Inmates who have reached the end of their sentenced term or who are ordered released by the court will be scheduled for release at staggered times on their release date to avoid congestion in the release area. Inmates scheduled for release should be escorted by the staff to the transfer/release area to begin the release procedure 30 minutes prior to their scheduled release time.

The Shift Supervisor or release officer shall sign and date the release paperwork on the same day the inmate is to be released.

Inmates shall not be released or moved during inmate count, change of shift or at any time that would pose a potential safety threat or disrupt the orderly operation of the facility.

All inmates must be positively identified by the staff prior to being released from the facility. Inmate identities should be verified using intake records bearing the inmate's name, photograph and facility identification number or a single digit fingerprint match system, if available.

Before any inmate may be released, the following conditions must be met:

- (a) The identity of the inmate has been verified.
- (b) All required paperwork for release is present. The staff shall review the active inmate file to verify the validity of the documents authorizing the release. The file should also be reviewed for other release-related or pending matters, including:
 - 1. Verifying calculations and release-date adjustments for good time.
 - 2. Any pending arrangements for follow-up, such as medications needed, appointments or referral to community or social resources.
 - 3. Unresolved grievances, damage claims or lost property.
 - 4. Sex and kidnapping offenders must register prior to release. The releasing deputy will ensure that the offender registers at the time of release with an official designated by the agency that has jurisdiction over the offender. The registration information shall, within three days, be forwarded to the Sheriff of the offender's county of residence. The offender must be advised of his/her duty to register with the Sheriff of his/her county of residence, school or place of employment or vocation (RCW 9A.44.130).

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5. If the releasing staff has knowledge that an offender being released has a duty to register and is eligible for developmental disability services, the department of social and health services shall be notified and assistance provided to the offender in order that the offender can meet the initial registration requirements (RCW 9A.44.130).
- (c) Releasing staff must complete National Crime Information Center (NCIC) and local warrant checks to ensure that there are no outstanding warrants or detention orders. If any agency has outstanding charges against the inmate, the staff shall notify the agency that the inmate is available for release.
- (d) If an inmate has known mental health concerns, the inmate shall be evaluated by a qualified health care professional and medically authorized for release. To the extent practicable, individuals who have been determined to be severely mentally ill should be released during business hours to facilitate their ability to receive services immediately after release (RCW 70.48.475).
 1. If the inmate is subject to a discharge review under RCW 71.05.232, the designated crisis responder shall be notified by the Corrections Chief or the authorized designee 72 hours in advance of the release but in no case later than the actual release of the inmate (RCW 70.48.475).
- (e) All personal property shall be returned to the inmate during the release process. The inmate must acknowledge receiving his/her property by signed receipt. Any discrepancies shall be promptly reported to the Shift Supervisor.
- (f) All facility property must be returned by the inmate. Any missing or damaged facility property should be documented and promptly reported to the Shift Supervisor. The inmate shall remain in custody until the Shift Supervisor reviews the damage and authorizes the release.
- (g) A forwarding address for the inmate should be on file and verified with the inmate for return of mail.
- (h) Inmates on probation or parole should be directed by the staff to report to the probation or parole office immediately upon release. The parole authorities having jurisdiction shall be notified of the inmate's release, if required.
- (i) If needed, inmates may be allowed to make a reasonable number of phone calls to arrange for transportation.

The housing sheet, release log and daily census log shall be updated accordingly after the inmate's release. The Shift Supervisor shall ensure all release documents are complete and properly signed by the inmate and the staff where required.

Chapter 6 - Inmate Due Process

Inmate Discipline

600.1 PURPOSE AND SCOPE

The purpose of this policy is to establish facility rules and disciplinary sanctions that are clear, consistent and uniformly applied. Maintaining discipline is critical to the safe and efficient operation of the facility. Both case law and good correctional practices require due process as it relates to inmate discipline. The enforcement of rule violations shall be swift, fair and consistent.

This policy addresses the fair and equitable application of inmate rules and the application of disciplinary sanctions for those who fail to comply.

600.2 POLICY

It is the policy of this office to maintain written general categories of prohibited inmate behavior that are clear, consistent and uniformly applied. Written rules and guidelines will be made available to all inmates. They will include a process for resolving minor infractions and a hearing process for a more serious breach of inmate rules. Criminal acts may be referred to the appropriate criminal agency.

600.3 DUE PROCESS

Inmates who are subject to discipline as a result of rule violations shall be afforded procedural due process by the Sheriff that is established in the policies, procedures and practices relating to inmate discipline. Staff will not engage in arbitrary actions against inmates. All disciplinary actions will follow clearly established procedures. All disciplinary sanctions will be fairly and consistently applied.

The process components that this policy affords to an inmate accused of a rule violation include:

- Published rules of conduct and clearly defined penalties for a violation of rules.
- A fair hearing in which the investigating staff presents factual evidence supporting the rule violation and the disciplinary action.
- Advance notice to the inmate of the disciplinary hearing, to allow the inmate time to prepare a defense.
- An impartial hearing officer.
- The limited right to call witnesses and/or present evidence on his/her behalf.
- The appointment of an assistant or representative in cases where the inmate may be incapable of self representation.
- A formal written decision that shows the evidence used by the hearing officer, the reasons for any sanctions and an explanation of the appeal process.
- The opportunity to appeal the finding to a higher authority.

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600.3.1 INMATE RULES GENERALLY

Inmate rules will be made available to inmates, both as fair warning of the consequences of inappropriate behavior and in order to ensure due process and equal protection as guaranteed in the Fourteenth Amendment to the United States Constitution.

The Office has established a disciplinary process that includes, but is not limited to:

- Inmate rules that are reasonable and clearly communicated.
- Reasonable sanctions for violating rules that relate to the severity of the violation.
- Standardized report forms to document rule violations and evidence.
- Impartial hearing officers to conduct disciplinary hearings and make findings based on the evidence.
- An established appeals process that an inmate may access in writing.

The Corrections Chief is responsible for ensuring that inmate rules and sanctions are developed, distributed, reviewed annually and revised as needed. Rules should prohibit only behavior that can be clearly shown to have a direct, adverse effect on an inmate or on the order and security of the facility. Penalties shall be proportionate to the importance of the rule and the severity of the violation.

Inmate rules should be an integral part of the inmate orientation and may be provided verbally by staff, as a part of a video presentation to inmates and in a printed inmate handbook. Inmate rules shall be given to each inmate during initial housing in the form of an inmate handbook, or shall be posted in housing units. Penalties for violation of these rules will also be included in this material.

Inmates cannot be held accountable for rules of which they are unaware. However, it is impossible to define every possible prohibited act or rule violation that might be encountered in a detention facility. Therefore, a current list of recognized infractions that are generally prohibited will be available in each housing unit. Any revised inmate rules shall not go into effect until all inmate rule handbooks have been replaced or the revised rules have been made available in each housing unit. All inmates, regardless of their housing unit, shall have access to these rules. Inmate rules shall be translated into the languages that are understood by the inmates.

Disciplinary procedures governing inmate rule violations shall address rules, minor and major violations, criminal offenses, disciplinary reports, prehearing detention and prehearing actions or investigations.

600.3.2 RULE VIOLATION REPORTS

A record of all disciplinary infractions and punishment administered will be made. This requirement may be satisfied by retaining copies of rule violation reports, including the disposition of each violation. Rule violation reports are required for major rule violations or any other violation that will require investigation or a formal resolution. The staff member who observed or detected the rule violation or who was charged with investigating a rule violation is responsible for completing the rule violation report. The rule violation report shall include, at minimum, the following:

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- A formal statement of the charges pending
- A description of any unusual behavior by the inmate
- The date/time/location of the occurrence and an explanation of what transpired
- The identity of known participants in the incident
- Existence of any physical evidence and its disposition
- Immediate action taken, including any force used by staff
- Signature of the reporting staff member and the date/time of the report

The supervisor investigating the violation shall ensure the following is documented in the investigation or rule violation report:

- Date and time the explanation and the written copy of the complaint and appeal process was provided to the inmate
- The inmate's response to the charges
- Reasons for any sanctions
- The identity of any staff or witnesses involved, as revealed by the inmate
- The findings of the hearing officer
- The inmate's appeal, if any
- The appeal findings, if applicable

600.4 RULE VIOLATION PROCEDURES

Minor acts of nonconformance to the rules may be handled informally by any deputy.

A violation of rules observed by general service employees, volunteers or contractors will be reported to a deputy for further action. Deputies are authorized to recommend informal sanctions on minor violations.

Any staff member imposing informal discipline shall complete the reporting portion of the disciplinary report and provide the form to the supervisor for review.

The following are disciplinary sanctions that may be imposed for minor rule violations:

- Counseling the inmate regarding expected conduct
- Assignment to extra work detail
- Removal from work detail (without losing work time credits)
- Loss of television, telephone, tablet, computer and/or commissary privileges for a period not to exceed 72 hours

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- Lockdown in the inmate's assigned cell or confinement in the inmate's bunk area for a period not to exceed 24 hours

An inmate may request that a supervisor review the imposed sanction. However, this request must be made within one hour of receiving notice of the sanction. The supervisor should respond to the request within a reasonable time (generally within two hours) and shall have final authority as to the imposition of informal discipline.

600.4.1 MULTIPLE MINOR RULE VIOLATIONS

Inmates who commit multiple violations of the rules during a single event will be disciplined only for the most serious offense.

Staff may initiate a major rule violation report if an inmate is charged with three or more minor rule violations in a consecutive 30-day period. Copies of all minor rule violations will be attached to the major rule violation report. A staff member shall conduct a hearing according to the procedures of a major rule violation.

600.4.2 MAJOR RULE VIOLATIONS

Major rule violations are considered a threat to the safety, security or efficiency of the facility, its staff members, inmates or visitors. Staff members witnessing or becoming aware of a major rule violation shall take immediate steps to stabilize and manage the situation, including immediate notification of a supervisor. The supervisor shall assess the situation and initiate any emergency action, if necessary, and notify the Lieutenant or Chief Deputy if warranted.

The Shift Supervisor will determine whether the inmate or inmates involved will be moved to administrative segregation for prehearing detention.

The staff member who learned of the rule violation shall write and submit a disciplinary report, along with all relevant evidence, to the appropriate supervisor prior to the end of the shift.

Reports shall be concise, explain the facts of the violation and should describe any evidence supporting that the accused inmate did or did not commit the violation. The report shall contain the same elements identified in the Disciplinary Reports section of this policy.

600.4.3 ADMINISTRATIVE SEGREGATION HOUSING

Inmates who are accused of a major rule violation may be moved to administrative segregation housing for prehearing detention, with the Shift Supervisor's approval, if there is a threat to safety or security. Inmates placed in prehearing detention are subject to the property and privilege restrictions commensurate with segregated confinement.

The Corrections Chief or the authorized designee shall, within 72 hours including weekends and holidays, review the status of any inmate in prehearing detention to determine whether continued prehearing segregation housing is appropriate.

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600.5 INVESTIGATIONS

When a major rule violation is reported, a supervisor will initiate an investigation, if necessary, within 24 hours of the time the violation is reported. Investigations should be completed without unreasonable delay and generally within three days of the violation. If additional time is needed, the investigating supervisor will request more time in writing from the Lieutenant or a designated supervisor. The inmate will be notified in writing of the delay.

If upon completion of the investigation, the investigating supervisor finds insufficient evidence to support a major rule violation, he/she may discuss alternative sanctions with the Lieutenant or a designated supervisor, including handling the incident as a minor violation or recommending that charges be removed. Such alternatives shall be documented in the inmate's file.

If the investigating supervisor determines that sufficient evidence exists to support a major rule violation, he/she will act as the hearing coordinator and will be responsible for:

- Reviewing all reports for accuracy and completeness.
- Overseeing or conducting any required additional investigation.
- Making a determination as to the final charges.
- Making preliminary decisions about the appointment of a staff member to act as an assistant to the inmate.
- Identifying any witnesses that may be called to the hearing.

600.6 NOTIFICATIONS

An inmate charged with a major rule violation shall be provided with a written statement that includes a description of the incident and the specific rules violated. The inmate shall be given the written statement not less than 24 hours prior to the disciplinary hearing.

Unless waived in writing by the inmate, hearings may not be held in less than 24 hours from the time of notification.

600.7 HEARING OFFICER

An impartial person shall conduct disciplinary hearings on rule violations. The Corrections Chief shall appoint at least one hearing officer to preside and conduct disciplinary hearings of rule violations. The hearing officer should be a qualified supervisor or suitably trained designee, who will have the responsibility and authority to rule on charges of inmate rule violations. The hearing officer shall also have the power to impose sanctions. The hearing officer shall not investigate nor preside over any inmate disciplinary hearing on cases where he/she was a witness or was directly involved in the incident that generated the complaint.

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600.8 HEARING PROCEDURE

Unless waived in writing, inmates charged with rule violations are entitled to be present at the hearing. Inmates may also be excluded if their behavior poses a threat to safety or security. Staff shall inform the hearing officer when any inmate is excluded or removed from a scheduled hearing and shall document the reasons for the exclusion or removal. A copy of the report shall be forwarded to the Corrections Chief.

The disciplinary hearing shall be held no sooner than 24 hours following the notification of the inmate in writing, nor later than 72 hours after the inmate notification. The inmate may waive the 24-hour requirement.

Hearings may be postponed or continued for a reasonable period of time for good cause. Reasons for postponement or continuance shall be documented and forwarded to the Corrections Chief.

The hearing officer shall disclose to the accused inmate all witnesses who will be participating in the hearing. Inmates have no right to cross-examine witnesses. However, the accused inmate may be permitted to suggest questions that the hearing officer, in his/her discretion, may ask.

600.8.1 EVIDENCE

Accused inmates shall have an opportunity to make a statement and present documentary evidence at the hearing and may call witnesses on their own behalf. Requests for witnesses shall be submitted in writing by the inmate no later than 12 hours before the scheduled start of the hearing. The written request must include a brief summary of what the witness is expected to say.

The hearing officer may deny the request when it is determined that allowing the witness to testify would be unduly hazardous to institutional safety or correctional goals, when the witness's information would not be relevant or would be unnecessarily duplicative, or is otherwise unnecessary. The reason for any such exclusion shall be documented in the hearing report. The reason for denial of any documents requested by the inmate shall also be documented in the hearing record.

A witness's signed written statement may be submitted by the inmate as an alternative to a live appearance. The hearing officer shall review and determine whether the statement is relevant to the charges and shall document the reason when any written statement is not given consideration.

Absent a safety or security concern, all staff reports and evidence, including exculpatory evidence, obtained during the disciplinary investigation shall be made available to the accused inmate prior to the hearing.

600.8.2 CONFIDENTIAL INFORMANTS

If information from any confidential informant is to be presented at the hearing, information establishing the reliability and credibility of the informant shall be provided to the hearing officer prior to the hearing. The hearing officer shall review such information to determine whether the informant is reliable and credible before considering the evidence. The confidential informant need not appear at the hearing and his or her identity shall not be disclosed.

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600.8.3 STAFF ASSISTANCE

A staff member shall be assigned to assist an inmate at disciplinary hearings when the inmate is not capable of collecting and presenting evidence on his/her own behalf due to pretrial detention, literacy, developmental disabilities, language barriers or mental status. The scope of the duties of the assistant shall be commensurate with the reasons for the appointment. The assistant should be allowed sufficient time to confer with the inmate to fulfill his/her obligations. In these cases the inmate does not have a right to appoint a person to assist in his/her disciplinary hearing. The final decision regarding the appointment rests with the hearing officer.

Inmate discipline is an administrative and not a judicial process. Inmates do not have a right to an attorney in any disciplinary hearing. Additionally, disciplinary matters may be referred for criminal prosecution and jail disciplinary action concurrently as there is no double jeopardy defense for an administrative process.

600.8.4 DISCIPLINARY DECISIONS

Disciplinary decisions shall be based on the preponderance of evidence and information obtained and presented during the disciplinary hearing including, but not limited to, staff reports, the statement of the inmate being disciplined and any other evidence available relating to the rule violation.

600.8.5 REPORT OF FINDINGS

A record of the proceedings of all disciplinary hearings shall be prepared and maintained for six years after release or in accordance with established records retention schedules.

The hearing officer shall write a report regarding the decision and detailing the evidence and the reasons for the disciplinary action. A copy of the report shall be provided to the inmate. The original shall be filed with the record of the proceedings. The hearing record and supporting documents shall be retained and a copy of the decision report should be placed in the inmate's file.

If an inmate is found not guilty of an alleged rule violation, the disciplinary report shall be removed from the inmate's file but otherwise maintained in accordance with records retention requirements.

The Corrections Chief or the authorized designee shall review all disciplinary hearing reports and dispositions subsequent to a final disposition of the disciplinary charges to assure conformity with policy and regulations. Inmates in disciplinary segregation shall receive visits from the Corrections Chief or the authorized designee at least once every seven days as part of the disciplinary review process.

600.9 DISCIPLINARY APPEALS

Inmates wishing to appeal the decision of the hearing officer must do so in writing within five days of the decision. All appeals will be forwarded to the Corrections Chief or the authorized designee for review.

Only appeals based on the following will be considered:

- (a) The disciplinary process or procedures were not followed.

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(b) There was insufficient evidence to support the hearing officer's decision.

(c) The discipline imposed was not proportionate to the violation committed.

A final disposition shall be rendered within 15 days of the appeal. The decision of the review authority shall be final and the result of the appeal shall be provided to the inmate in writing.

600.10 LIMITATIONS ON DISCIPLINARY ACTIONS

The Federal and State Constitutions expressly prohibit all cruel or unusual punishment. Additionally, there shall be the following limitations:

- In no case shall any inmate or group of inmates be delegated the authority to punish any other inmate or group of inmates.
- In no case shall a safety cell, as specified in Specialized Housing - Juveniles and Safety and Sobering Cells Policies, be used for disciplinary purposes.
- In no case shall any restraint device be used for disciplinary purposes.
- Food shall not be withheld as a disciplinary measure.
- Correspondence privileges shall not be withheld except in cases where the inmate has violated correspondence regulations, in which case correspondence other than legal mail may be suspended for no longer than 72 hours without the review and approval of the Corrections Chief.
- In no case shall access to the courts and/or legal counsel be suspended as a disciplinary measure.
- No inmate may be deprived of the implements necessary to maintain an acceptable level of personal hygiene.
- Disciplinary isolation in excess of 30 days without approval by the Corrections Chief is prohibited.

The diet specified in the Disciplinary Detention Diet Policy shall only be utilized for major violations of institutional rules. Initial placement on the diet requires Corrections Chief approval and review every 72 hours thereafter if the diet is continued.

600.11 GUIDELINES FOR DISCIPLINARY SANCTIONS

The sanctions imposed for rule violations can range from counseling, loss of privileges, extra work, loss of good and/or work time and isolation housing. In all cases, sanctions should be imposed for the purpose of controlling or changing an inmate's behavior and not for the purpose of punishment.

Segregation is a sanction that is applied for a major rule violation or repetitive violations of facility rules. This sanction results in the housing of an inmate in a segregation unit for a specified period of time. The maximum amount of time that disciplinary segregation may be imposed is 60 days for all violations arising out of one incident. The use of this sanction for a period of time exceeding 30 days must be reviewed and approved by the Corrections Chief.

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The Sheriff or the Corrections Chief shall be responsible for developing and implementing a range of disciplinary sanctions.

600.12 TRAINING

The Corrections Chief or the authorized designee is responsible for ensuring that a wide range of training and disciplinary tools are available to aid staff and that preprinted/computer forms are available for documenting rule violations in a consistent and thorough manner.

The Training Sergeant is responsible for developing and delivering, or procuring, training for staff members who participate in the disciplinary hearing process. Training topics should include the legal significance of due process protections and the hearing officer's role in assuring that those protections are provided.

Disciplinary Segregation

601.1 PURPOSE AND SCOPE

This policy specifically addresses disciplinary segregation and guiding principles relating to the conditions attached to that segregation. It will provide guidance to the staff on acceptable practices with regard to management of inmates in disciplinary segregation or classified as requiring special management needs.

601.1.1 DEFINITIONS

Definitions related to this policy include:

Disciplinary segregation - A status assigned to an inmate after a disciplinary hearing in which the inmate was found to be in violation of a correctional facility rule or state or federal law. This status results in separating the inmate from the rest of the population to serve the consequence imposed.

601.2 POLICY

The Skagit County Sheriff's Office will maintain a disciplinary segregation unit to house inmates who, after an impartial due process hearing, are being sanctioned for violating one or more correctional facility rules. Restrictions on privileges will be subject to the disciplinary process and in accordance with this policy.

601.3 DISCIPLINARY SEGREGATION

Inmates may be placed into disciplinary segregation only after an impartial hearing to determine the facts of the rule violation, in accordance with the office Inmate Discipline Policy. The hearing officer shall impose sanctions in accordance with the sanctioning schedule established by the Corrections Chief. Maximum sanctions for any one incident, regardless of the number of rules violated, shall not exceed 60 days. Inmates who are in disciplinary segregation for more than 30 days shall have their case reviewed by the Corrections Chief. The case will be reviewed every 15 days thereafter.

601.4 INMATE ACCESS TO SERVICES

The ability to sanction inmates for conduct violations is not absolute. Absent legitimate penological reason, inmates continue to have a right to receive certain services. However, inmates in disciplinary segregation, in accordance with the Inmate Discipline Policy, or special management inmates, who are sanctioned for one or more rule violations, may be subject to loss of privileges or credit for good time and work.

Services to provide for basic human needs must continue to be made available. There are minimum service requirements that must be maintained to ensure the facility continues to operate in a constitutional manner. All custody staff will adhere to the following policy sections to guide them in the supervision of inmates held in disciplinary isolation or classified as requiring special management needs.

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601.4.1 MEDICATION, CLOTHING AND PERSONAL ITEMS

Inmates placed in disciplinary segregation are considered special management inmates and shall not be denied prescribed medication.

Special management inmates will be provided with clothing that identifies their status, but in no case will this clothing be used to intentionally degrade the inmate.

Absent unusual circumstances, special management inmates will continue to have the same access to personal items in their cell as general population inmates have, including:

- Clean laundry.
- Barbering and hair care services.
- Clothing exchanges.
- Bedding and linen exchanges.

Inmates in disciplinary segregation shall not be deprived of bedding or clothing except in cases where the inmate destroys such articles or uses them to attempt suicide. The decision to continue to deprive the inmate of these articles must be made by the Corrections Chief or the authorized designee and reviewed every 24 hours.

601.4.2 SHOWERING AND PERSONAL HYGIENE

Inmates in disciplinary segregation should be allowed to shower with the same frequency as the general inmate population, if reasonably practicable, but at minimum shall be afforded the opportunity to shower on their daily schedule. The opportunities for each inmate to shower will be documented on the unit logs.

Exceptions to this policy can only be made when the restriction is determined to be reasonably necessary for legitimate penological purposes. Any exceptions to this basic requirement must be reviewed and approved by the Shift Supervisor. The circumstances necessitating a restriction must be clearly documented on the unit log.

601.4.3 DENIAL OF AUTHORIZED ITEMS OR ACTIVITIES

Personal items may be withheld when it reasonably appears that the items will be destroyed by the inmate or it is reasonably believed that the personal item will be used for a self-inflicted injury or to harm others.

Whenever an inmate in disciplinary segregation is denied personal care items or activities that are usually authorized to the general population inmates, except for restrictions imposed as a result of a disciplinary hearing, the deputy taking such action shall prepare a report describing the circumstances that necessitated the need to restrict personal items or activities. The report shall be submitted to a supervisor for review, who will then forward it to the Corrections Chief. A copy of the report shall be placed in the inmate's file.

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601.4.4 MAIL AND CORRESPONDENCE

Inmates in disciplinary segregation shall have the same privileges to write and receive correspondence as inmates in general population, except in cases where inmates violated correspondence regulations. In such cases, mail privilege may be suspended. The Corrections Chief or the authorized designee shall approve all mail privilege suspensions that exceed 72 hours. Legal mail shall not be suspended from delivery to the inmate.

601.4.5 VISITATION

Inmates in disciplinary segregation shall have the same opportunities for visitation as general population inmates, except when the visitation privileges are suspended pursuant to a sanction imposed by the disciplinary hearing officer. Disciplinary sanctions that limit or curtail visitation must be clearly documented and approved by a supervisor.

601.4.6 READING AND LEGAL MATERIALS

Inmates in disciplinary segregation shall have the same access to reading materials and legal materials as the general population inmates, unless the restriction is directed by a court of law or there is a reasonable basis to believe the materials will be used for illegal purposes or pose a direct threat to the security and safety of the facility. In such cases the basis for the action shall be documented in the inmate's file and unit log. Access to courts and legal counsel shall not be suspended as a disciplinary measure.

601.4.7 EXERCISE

Inmates in disciplinary segregation shall be given a minimum of three hours of exercise per week outside of their cell. Exceptions to this may occur if there are legitimate security or safety considerations. The circumstances relating to the limitation of exercise shall be documented in an incident report. The report shall be reviewed and the restriction shall be approved by a supervisor.

601.4.8 LIMITED TELEPHONE PRIVILEGES

Inmates in disciplinary segregation may have their telephone privilege restricted or denied. Exceptions include the following:

- (a) Making legal calls
- (b) Responding to verified family emergencies when approved by the Shift Supervisor or Corrections Chief

All telephone access based on the above exceptions shall be documented on the unit log.

601.4.9 BEDDING AND CLOTHING

Inmates in disciplinary segregation shall not be deprived of bedding or clothing except in cases where the inmate destroys such articles or uses them to harm him/herself or others or for something other than the intended purpose. Clothing and bedding shall be returned to the inmate as soon as it is reasonable to believe the behavior that caused the action will not continue. The decision to continue to deprive the inmate of these articles must be made by the Corrections

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Chief or the authorized designee and reviewed at least every eight hours. This review shall be documented and placed into the inmate's file.

601.5 DISCIPLINARY ISOLATION DIET

Under no circumstances will an inmate be denied food as a means of punishment. A disciplinary isolation diet may only be used for major violations of correctional facility rules. No inmate receiving a prescribed medical diet is to be placed on a disciplinary isolation diet without review and written approval of a physician or pursuant to a written plan approved by the physician. Disciplinary isolation diets shall be served twice during each 24-hour period and must meet statutorily prescribed minimum food and nutritional requirements as described in the Disciplinary Isolation Diet Policy.

Before any inmate is placed on a disciplinary isolation diet, the following shall occur:

- (a) The physician shall review the medical condition and history of the inmate and approve the alternative meal service.
- (b) The Corrections Chief shall review the incident report and medical reports and shall approve the use of a disciplinary isolation diet.
- (c) The custody staff and qualified health care professionals shall monitor these special circumstances and report their observations to the Corrections Chief.
- (d) Disciplinary isolation diets shall not be served in any case for more than 72 hours without the written approval of the Corrections Chief and a physician.

601.6 INITIAL EVALUATION OF INMATES UPON PLACEMENT

After notification from staff that an inmate is being placed in segregation, the Shift Supervisor shall ensure that the following occurs:

- (a) A qualified health care professional shall review the inmate's health record to determine whether existing medical, dental or mental health needs contraindicate the placement or require special accommodations.
- (b) If contraindications or special accommodations are noted, the qualified health care professional shall inform the Shift Supervisor and coordinate the appropriate plan for the inmate based on the safety needs of the facility and the medical needs of the inmate.

601.7 MENTAL HEALTH CONSIDERATIONS

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

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- (a) Unless medical attention is needed more frequently, each inmate in segregation should have daily interaction with a qualified health care professional. A medical assessment should be documented in the inmate's medical file.
- (b) Mental health staff or a qualified mental health professional should also conduct weekly rounds.

When an inmate is classified as a special management inmate due to the presence of a serious mental illness and is placed in a segregation setting, the mental health progress notes and management plan should reflect the changed environment. When an inmate is expected to remain in segregation for more than a 30 days (based upon disciplinary decisions, protective needs or other factors) the special management treatment plan should be updated to reflect this.

Where reasonably practicable, a mental health worker should provide screening for suicide risk during the first three business days following admission to the segregation unit.

601.8 SAFETY CHECKS

A staff member shall conduct a face-to-face safety check of all disciplinary segregation inmates at least every 30 minutes on an irregular schedule. Inmates who are violent, have mental health problems or who demonstrate unusual behavior should be personally observed by the staff every 15 minutes on an irregular schedule.

Inmates who are at risk of suicide shall be under continuous observation until seen by a mental health professional. Subsequent supervision routines should be in accordance with orders provided by the mental health professional.

Disciplinary segregation inmates shall receive increased monitoring to include at a minimum:

- (a) A daily visit by the Corrections Chief or the authorized designee.
- (b) Visits by members of the program staff, upon request.
- (c) Daily visits by a qualified health care professional, unless medical attention is needed more frequently.

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

601.8.1 DOCUMENTATION OF SEGREGATION CHECKS

Segregation rounds shall be documented on door cards, logbooks and/or rounds forms, and include the following:

- (a) Date and time of contact
- (b) Signature or initials of the qualified health care professional making rounds
- (c) Any needed referrals

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- (d) All significant findings and observations, medical assessment, treatment, recommendations, notifications and actions should be documented in the inmate's health record.

601.9 DISCIPLINARY SEGREGATION LOG

A permanent log will be maintained for all inmates admitted into disciplinary segregation. The log will contain the following for each inmate:

- (a) Name
- (b) Number
- (c) Housing location
- (d) Date admitted
- (e) Type of infraction
- (f) Tentative release date
- (g) Any special medical or mental health problems or needs
- (h) Visits by qualified health care professionals, the Shift Supervisor or the Corrections Chief or the authorized designee.

Inmates with Disabilities

602.1 PURPOSE AND SCOPE

Inmates with disabilities, including temporary disabilities, may encounter difficulties in gaining meaningful access to, or an understanding of important rights, obligations and services. This policy provides guidelines for addressing the needs and rights of inmates detained by this office in accordance with the Americans with Disabilities Act (ADA) (RCW 71A.12.140).

602.1.1 DEFINITIONS

Definitions related to this policy include:

Activities of daily living - An inmate's self-care, communication and mobility skills required for independence in everyday living.

Disability - Broadly defined under the ADA as:

- A physical or mental impairment that limits one or more of the major life activities of an individual.
- A record of such an impairment.
- Being regarded as having such an impairment.

602.2 POLICY

Inmates are included among those who are protected by the ADA because they receive government services. It is the policy of this office to take all reasonable steps to accommodate individuals with disabilities while they are in custody.

The Corrections Chief is responsible for ensuring the Skagit County Sheriff's Office correctional facility is designed or adapted to reasonably accommodate inmates with disabilities. The Corrections Chief should work with the Office risk managers to assess the correctional facility for its ability to reasonably accommodate all disabled persons, including visitors.

Access to telephones equipped with a telecommunications device for the deaf (TDD) should be available to deaf and hearing- or speech-impaired inmates. Orientation videos may be used to explain facility rules to newly admitted inmates. Subtitles may be displayed on the video presentation to assist inmates who have impaired hearing. Some cells and dormitories should be equipped with wheelchair accessible toilet and shower facilities. Inmates with physical disabilities should be allowed to perform personal care in a reasonably private environment.

Tables designed for eating also should be accessible to those in wheelchairs.

The Corrections Chief in cooperation with the responsible physician, shall develop written procedures for the identification and evaluation of all developmentally disabled inmates as defined in RCW 71A.10.020 or inmates suffering from a traumatic brain injury. The health authority shall contact the regional center on any inmate suspected or confirmed to be developmentally disabled or suffering from a traumatic brain injury for the purposes of diagnosis and/or treatment, within

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24 hours of such determination, excluding holidays and weekends. Any treatment orders from a mental health court shall be followed (RCW 2.28.180).

602.2.1 DEPUTIES RESPONSIBILITIES

Deputies should work with qualified health care professionals to aid in making accommodations for those with physical disabilities. Deputies who manage the classification process should be aware of inmates with disabilities before making housing decisions, as often persons with mobility issues will require a lower bunk and accessible toilet and shower facilities. In addition, some inmates may require ongoing assistance to manage their activities of daily living. Trained staff must be available to aid these inmates. One inmate shall not be placed in the role of assisting or managing another inmate's activities of daily living.

When necessary or required, the supervisor or classification deputy should consult with the qualified health care professional or the Responsible Physician regarding housing location.

Inmates with prosthetics or other adaptive devices shall be allowed to keep the devices provided the safe and secure operation of the facility is not compromised. The custody supervisor will verify the medical necessity of the device with a qualified health care professional.

The inmate may be administratively segregated from the general population when:

- He/she cannot reasonably function without the device.
- No other reasonable alternatives are available.
- The device poses a threat to the safety of staff, inmates, visitors or the physical plant.

602.2.2 CHIEF CORRECTIONS DEPUTY RESPONSIBILITIES

The Corrections Chief, in coordination with the Responsible Physician, will establish procedures to assess and reasonably accommodate the disabilities of inmates. The procedures will include, but not be limited to:

- Establishing housing areas that are equipped to meet the physical needs of inmates, thereby providing for their safety, security, personal care and hygiene in a reasonably private environment, while affording integration with other inmates.
- Establishing classification criteria to make housing assignments for inmates with disabilities.
- Establishing transportation procedures for transporting inmates with limited mobility.
- Establishing guidelines for the provision of services, programs and activities to the disabled.
- Enlisting or contracting for trained service personnel with experience working with disabled people.

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602.3 TRAINING

To ensure that all employees are properly trained, this office will provide periodic training in the following areas:

- (a) Employee awareness of related policies, procedures, forms and available resources for disabled inmates
- (b) Working effectively with in-person and telephone interpreters and related equipment
- (c) Training for management staff, even if they may not interact regularly with disabled individuals, so that they remain fully aware of and understand this policy and can reinforce its importance and ensure its implementation

Inmate Access to Courts and Counsel

603.1 PURPOSE AND SCOPE

The purpose of this policy is to protect the constitutional rights of inmates to access the courts and legal counsel, while holding inmates accountable to the rules and regulations that govern conduct in this facility. The staff at every level is reminded that the fundamental constitutional right of access to courts does not end when a person is incarcerated.

603.2 POLICY

It is the policy of this office that all inmates will have access to the courts and the ability to consult with legal counsel.

603.3 INMATE ACCESS

Staff should not unreasonably interfere with inmates' attempts to seek counsel and where appropriate should assist inmates with making confidential contact with attorneys and authorized representatives.

Access to courts and legal counsel may occur through court-appointed counsel, attorney or legal assistant visits, telephone conversations or written communication. To facilitate access, this facility will minimally provide:

- Confidential attorney visiting areas that include the means by which the attorney and the inmate can share legal documents.
- Telephones that enable confidential attorney-client calls.
- Reasonable access to legal materials.
- A means of providing assistance through the court process by individuals trained in the law. This assistance will be available to illiterate inmates and those who cannot speak or read English or who have disabilities that would impair their ability to access.
- Writing materials, envelopes and postage for indigent inmates for legal communications and correspondence.

The Corrections Chief shall be responsible for ensuring that information regarding access to courts and legal counsel and requesting legal materials or legal assistance is included in the inmate handbook that is provided during inmate orientation.

603.4 CONFIDENTIALITY

All communication between inmates and their attorneys is confidential, including telephone conversations, written communication and video conferencing. The content of written attorney-client communication will not be reviewed or censored but the documents may be inspected for contraband.

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Outgoing and incoming legal correspondence shall be routed through the staff, who have received training in inspecting confidential documents and who are accountable for maintaining confidentiality. Incoming legal correspondence shall be opened and inspected for contraband in the presence of the recipient inmate.

Inmates may seek the assistance of other inmates in writing writs and other legal correspondence to the courts when needed, subject to the security and safety needs of the inmates, staff and the facility.

603.5 INMATE REQUEST FOR ASSISTANCE

Written materials addressing how an inmate can access local attorneys and key legal documents shall be available in each housing unit. Staff shall provide these materials to any inmate upon request. However, staff shall not provide legal advice or assist any inmate in the completion of any legal document.

Habeas corpus forms shall be made available to any inmate by the staff upon request and are also available from the Clerk's Office at the U.S. District Court for the Western District of Washington. 42 U.S.C. § 1983 civil rights action forms and In Forma Pauperis Application (IFP) forms are also available from the clerk's office located at: Clerk's Office, US District Court, 700 Stewart St, Suite 2310, Seattle, WA 98101.

603.6 VISITATION RELATED TO LEGAL DEFENSE

Visits with inmates that are related to legal defense, including attorneys, paralegals and investigators, will be permitted only in the areas designated for legal visitation or by way of video visitation to assure confidentiality. Contact visits may be approved by the Corrections Chief for special circumstances.

- (a) Visits shall be of a reasonable length of time to discourage any allegation that the defense of the inmate was hindered due to the length of time allowed for the legally authorized visit. These visits shall be of such a length of time that they do not interfere with the security, order and discipline of this facility. The permissible time for visitation should be flexible but shall not substantially interfere with other facility schedules, such as medical examinations, meal service or other required activities.
- (b) Only materials brought to this facility by an approved legal assistant shall be allowed.
- (c) All materials shall be subject to security inspections by the staff and shall be routed through the Shift Supervisor for logging and distribution.

603.7 MAIL

Legal mail shall be handled in accordance with the Inmate Mail Policy.

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Inmate Access to Courts and Counsel

603.8 PRO SE INMATES

The Skagit County Jail will provide access to necessary and reasonable legal resources to indigent inmates who are representing themselves pro se against pending criminal charges ("pro se defendants") or are representing themselves during the pleading stage of a habeas or civil rights action, in an appeal of a sentence being served or in defense of a civil action brought against the inmate (pro se litigants").

Pro se defendants may be granted pro se status in a criminal prosecution by court order only. Status as a pro se defendant will normally end upon sentencing or termination of pro se status, i.e., upon assignment of a defense counsel (non-standby). At such time, policies of general applicability to all inmates shall apply.

Pro se litigants seeking to represent or representing themselves on an appeal of a sentence being served, a habeas corpus petition, a civil rights action involving the Jail or defense of a civil action against the inmate shall advise a Jail supervisor by inmate request of the litigation. Absent such written notice and approval, the inmate will not be provided with the materials and supplies addressed under this policy. Upon completion of the legal proceedings, policies of general applicability to all inmates shall apply.

Copies of requests and approvals for pro se status and of court orders authorizing a pro se defendant in a criminal prosecution along with any orders appointing stand-by attorneys, paralegals, investigators, etc. to assist the inmate shall be placed in the inmate's file. Relevant records shall be updated to reflect the inmate's status.

603.8.1 PRO SE STATUS MISUSE

Actions that misuse or abuse any privilege granted under this policy, including destruction, waste, or use of supplies for other purposes of supplies equipment, books or actions that demonstrate a threat to the safety and security of the facility, shall be immediately reported to the Chief of Corrections or designee. Where appropriate the Chief of Corrections or designee may immediately suspend or limit the pro se inmate's privileges or consult with legal counsel to determine an appropriate response. Suspensions or limitations on access of a pro se defendant shall be reported, to the court and to the Prosecuting Attorney.

Any suspension or limitation on access shall be reviewed within 72 hours. The inmate may grieve any suspension or limitation.

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603.8.2 PRO SE STATUS - SUPPLIES AND MATERIALS

a.) Supplies

Pro se defendants shall be provided the supplies under the authorization of the superior court for pro se defendants which consists of a container to hold materials, one Sets of Templates for: Note for Calendar, Note for Special Set Hearing, Motion and Order, Affidavit of Mailing, Subpoena, and Subpoena Duces Tecum, 2 Legal Size (8 & ½ by 11) Writing Pads, 3 Manila Folders, 5 Large Envelopes, 25 Regular Addressed Envelopes, 1 Highlighter, 1 Jail-approved Flex Pen, and 20 pages of 8 & ½ by 11 size blank paper. The Highlighter and Jail approved Flex-Pen shall be switched out by the jail on a one for one basis. The other supplies shall be resupplied by the jail following use. The supplies must be kept in a container for that purpose.

Pro se litigants shall be provided the following initial materials: 20 sheets of 8 ½ inch by 11 inch typing paper, one ½ inch by 11 inch legal ruled notepad, ten standard legal envelopes, two 9 inch by 12 inch manila envelopes, one Flexi pen. The supplies must be kept in a container for that purpose.

Requests for additional supplies shall be made by written request to a Jail supervisor and shall be provided on a demonstrated use of provided supplies already provided. Expended materials such as pens shall be returned before additional supplies are provided. All supplies distributed to the inmate will be recorded in the inmate's pro se activities record. Supplies not listed in this policy are subject to approval by the Corrections Chief or authorized designee.

b.) Access to Legal Materials

Inmates shall have access to the Securus Technology device (S-phone) or other device designated by the Corrections Chief or authorized designee for the purpose of legal research. The S-phone is an intuitive touch screen device which contains state and federal materials, case law as well as a jailhouse lawyer manual and a help screen on how to conduct searches. The device includes CaseCheck+ which is similar to Shepards® and KeyCite. Inmates may request assistance in seeking how to operate the device. However, staff shall not provide legal advice.

Pro se defendants may be obtain additional legal research through the assigned investigator.

Inmates may purchase their own legal books and materials. However, such materials will be subject to safety inspection and rules pertaining to items permitted to be in the inmate's possession. Personal books must be marked with the inmate's name and booking number.

Any books or materials found in the inmate's possession beyond what is authorized will be returned or placed in the inmate's property.

c.) Certification, Declarations and Notarial Services

RCW 9A.72.085 and 28 U.S.C. §1746 allow a statement certified or declared by the person to be true penalty of perjury to suffice in federal and state courts and in most legal proceedings unless

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specifically directed otherwise. Notarial services may be arranged if a specific showing is made in writing to a Jail supervisor, that by law the particular document requires use of a notary.

603.8.3 PRO SE DEFENDANTS INTERVIEWING WITNESSES

A pro se defendant may interview witnesses by telephone pursuant to a specific court order or through the assigned investigator. Requests to use interview rooms or for visits with witnesses outside of normal visiting hours must be in writing and include information validating the need for the interview. A Jail supervisor may grant the request when practical.

No interview or visit with a prospective witness who is in the custody of this facility or otherwise detained by a law enforcement agency or correctional facility shall be allowed unless directed in a specific court order.

603.8.4 PRO SE DEFENDANTS TELEPHONE USAGE

Pro se defendants may use the telephones in their housing areas to place calls concerning their cases. Court-authorized pro se telephone calls to the assigned investigator or stand-by counsel, shall not be monitored and shall be provided without charge to the pro se defendant in accordance with the orders of the court (see the Inmate Telephone Access Policy).

I understand that it is my responsibility to review, become familiar with and comply with all the provisions of this new or updated policy. I further understand that, if I have questions about or do not fully understand any portion of this policy, it is my responsibility to seek clarification from my supervisor. I hereby acknowledge that I have received, read and understand this policy.

Foreign Nationals and Diplomats

604.1 PURPOSE AND SCOPE

This policy addresses the privileges and immunities afforded to members of foreign diplomatic missions and consular posts.

This policy also addresses the legal requirements related to immigration and consular notifications that should occur when a foreign national is in custody.

604.1.1 DEFINITIONS

Definitions related to this policy include:

Foreign national - A person who is not a citizen of the United States. A person with dual-citizenship, U.S. and foreign, is not a foreign national.

Immunity - Refers to various protections and privileges extended to the employees of foreign governments who are present in the U.S. as official representatives of their home governments. These privileges are embodied in international law and are intended to ensure the efficient and effective performance of their official missions (i.e., embassies, consulates, etc.) in foreign countries. Proper respect for the immunity to which an individual is entitled is necessary to ensure that U.S. diplomatic relations are not jeopardized and to maintain reciprocal treatment of U.S. personnel abroad. Although immunity may preclude U.S. courts from exercising jurisdiction, it is not intended to excuse unlawful activity. It is the policy of the DOS Office of Foreign Missions (OFM) that illegal acts by Foreign Service personnel should always be pursued through proper channels. The host country's right to protect its citizens supersedes immunity privileges. Peace officers may intervene to the extent necessary to prevent the endangerment of public safety or the commission of a serious crime, regardless of immunity claims.

604.2 POLICY

The Skagit County Sheriff's Office Correctional Facility will treat foreign diplomatic and consular personnel with due regard for the privileges and immunities to which they are entitled under international law. The Office will investigate all claims of immunity and accept custody of the person when appropriate.

The Skagit County Sheriff's Office Correctional Facility will also honor the laws related to foreign nationals in custody by making proper consular notifications and by assisting those who wish to contact their consular representative.

The Skagit County Sheriff's Office Correctional Facility may not provide nonpublicly available personal information about an individual, including individuals subject to community custody pursuant to RCW 9.94A.701 and 9.94A.702, to federal immigration authorities in a noncriminal matter, except as required by state or federal law.

604.3 DIPLOMATIC AND CONSULAR IMMUNITY

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604.3.1 AVAILABILITY OF RESOURCES

The Shift Supervisor will ensure that current contact information for the U.S. Department of State and the U.S. Mission to the United Nations is readily available for office members who need to verify a claim of diplomatic or consular immunity. Relevant material for law enforcement published by the U.S. Department of State Bureau of Diplomatic Security should be readily available as well.

604.3.2 ADDRESSING CLAIMS OF DIPLOMATIC OR CONSULAR IMMUNITY

When an arrestee who claims diplomatic or consular immunity is brought to the Skagit County Sheriff's Office Correctional Facility the receiving deputy shall first inform the Shift Supervisor and then generally proceed as follows:

- (a) Do not accept custody of the person from the transporting officer. The person should not be brought inside the Skagit County Sheriff's Office Correctional Facility unless doing so would facilitate the investigation of his/her claim of immunity.
- (b) Do not handcuff the person, or, if handcuffs have been applied, remove them unless there is an articulable threat that would justify their use.
- (c) If the person has already been accepted into custody, inform the person that he/she will be detained until his/her identity and immunity can be confirmed. Attempt to obtain a U.S. Department of State-issued identification card or other identification or documents that may relate to the claimed immunity.
- (d) In all cases, verify the status and level of immunity by contacting the U.S. Department of State or the U.S. Mission to the United Nations, as appropriate.

It will be the responsibility of the Shift Supervisor to communicate the claim of immunity to the on-duty supervisor of the arresting agency (if not the Skagit County Sheriff's Office).

The Shift Supervisor may assist another agency in determining the person's immunity status. The Shift Supervisor is responsible for ensuring appropriate action is taken based upon information received regarding the person's immunity status.

604.3.3 REPORTING

If the person's immunity status has been verified, the Shift Supervisor should ensure a report is prepared describing the details and circumstances of any detention or custody. A copy of the report should be faxed or mailed as soon as possible to the U.S. Department of State in Washington, D.C. or to the U.S. Mission to the United Nations in New York in cases involving a member of the United Nations community.

604.4 CONSULAR NOTIFICATIONS

604.4.1 CONSULAR NOTIFICATION LIST AND CONTACTS

The Corrections Chief will ensure that the U.S. Department of State's list of countries and jurisdictions that require mandatory notification is readily available to office members. There should also be a published list of foreign embassy and consulate telephone and fax numbers, as well as standardized notification forms that can be faxed and then retained for the record.

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Prominently displayed placards informing inmates of rights related to consular notification should also be posted.

604.4.2 CONSULAR NOTIFICATION ON BOOKING

Office members assigned to book inmates shall:

- (a) Inform the foreign national, without delay, that he/she may have his/her consular officers notified of the arrest or detention and may communicate with them. Members shall ensure this notification is acknowledged and documented.
- (b) Determine whether the foreign national's country is on the U.S. Department of State's mandatory notification list.
- (c) If the foreign national's country is not on the list for mandatory notification but the foreign national requests that his/her consular officers be notified, then:
 - 1. Notify the nearest embassy or consulate of the foreign national's country of the person's arrest or detention by faxing the appropriate notification form. If no fax confirmation is received, a telephonic notification should be made and documented.
 - 2. Forward any communication from the foreign national to his/her consular officers without delay.
- (d) If the foreign national's country is on the list for mandatory notification, then:
 - 1. Notify the nearest embassy or consulate of the foreign national's country, without delay, of the person's arrest or detention by faxing the appropriate notification form. If no fax confirmation is received, a telephonic notification should be made and documented.
 - 2. Tell the foreign national that this notification has been made and inform him/her without delay that he/she may communicate with his/her consular officers.
 - 3. Forward any communication from the foreign national to his/her consular officers without delay.
 - 4. Document all notifications to the embassy or consulate and retain the faxed notification and any fax confirmation for the inmate's file.

Members should never discuss anything with consulate personnel beyond the required notifications, such as whether the inmate is requesting asylum. Requests for asylum should be forwarded to the Shift Supervisor.

604.4.3 HONORARY CONSULS

Honorary consuls are part-time employees of the country they represent and are either permanent residents of the U.S. or U.S. nationals (unlike career consular officers, who are foreign nationals on temporary assignment to the U.S.). Honorary consuls may be arrested and detained. Limited immunity for official acts may be available as a subsequent defense. Family members have no immunity.

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604.4.4 NOTICE TO INMATES

To ensure compliance with all treaty obligations including consular notification, and state and federal law, written notice shall be given to an inmate explaining that the inmate has the right to refuse to disclose their nationality, citizenship, or immigration status and that disclosure may result in civil or criminal immigration enforcement, including removal from the United States (RCW 10.93.160).

604.5 IDENTIFICATION

All diplomatic and consular personnel who are entitled to immunity are registered with the DOS and are issued distinctive identification cards by the DOS protocol office. These cards are the best means of identifying Foreign Service personnel. They include a photograph, identifying information and, on the reverse side, a brief description of the bearer's immunity status. These identification cards are not always promptly issued by the DOS.

In addition to the DOS identification card, Foreign Service personnel should also have a driver's license issued by the DOS Diplomatic Motor Vehicle Office (DMVO), which in most circumstances replaces the operator's license issued by the state.

604.6 PROCEDURE

Inmates who are identified as foreign nationals should be advised of their rights regarding consular notification and access at the time of booking. The booking deputy shall:

- Determine the foreign national's country.
- Determine if the inmate's country is a mandatory notification country.
- Notify that country's nearest consular officials, without unreasonable delay, of the arrest/detention.
- Notify the foreign national that the notification is being made to his/her consulate office.
- If the inmate's country is not on the mandatory notification list, offer to notify the proper consulate of the arrest/detention without delay.
- Record in the official inmate booking document the notification and actions taken, including notification refusals by inmates from non-mandatory notification countries.

Inmate Rights - Protection from Abuse

605.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines to ensure that inmates are afforded a safe, healthful environment free from abuse, corporal punishment or harassment, and that inmate property is protected.

605.2 POLICY

It is the policy of this office to make every reasonable effort to protect inmates from personal abuse, corporal punishment, personal injury, disease, property damage and harassment by other inmates or staff. Staff shall take reasonable actions to safeguard vulnerable inmates from others and shall use the classification policies and procedures to make housing decisions that will provide for inmate safety. Abuse of inmates by staff or other inmates will not be tolerated.

The Corrections Chief or the authorized designee shall be responsible for including prohibitions against inmate abuse and harassment, rules regarding respect for the property of others, and the prevention of disease in the inmate handbook. All inmates shall receive a copy of the inmate handbook during the booking process, which shall be printed in a language understood by the inmate. The inmate also shall receive verbal instruction on inmate rights during orientation.

605.3 RESPONSIBILITY

It shall be the responsibility of all facility staff to adhere to policies, procedures and practices, and to make every reasonable effort to prevent inmate injury, harassment and abuse, to prevent theft or damage to inmate property and to eliminate conditions that promote disease. These procedures include, but are not limited to:

- Following the classification guidelines for inmate housing.
- Closely supervising inmate activities and interceding as needed to prevent violence, harassment or abuse of inmates.
- Using force only when necessary and to the degree that is reasonable.
- Reporting all inmate injuries, investigating the cause of reported injuries and documenting these efforts in an incident report.
- Enforcing all rules and regulations in a fair and consistent manner.
- Preventing any practice of inmates conducting kangaroo courts or dispensing discipline toward any other inmate.
- Conducting safety checks of all inmate housing areas, at a minimum of every hour, on an irregular schedule.
- Checking all safety equipment for serviceability and making a report of any defective equipment to the appropriate supervisor or Corrections Chief.

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Inmate Rights - Protection from Abuse

- Referring sick or injured inmates to a qualified health care professional without unnecessary delay.
- Maintaining high standards of cleanliness throughout the correctional facility.
- Documenting all abuse protection efforts in facility logs and incident reports as applicable.

605.4 TRAINING

The Training Sergeant shall be responsible for developing and delivering a training curriculum on the topic of protecting inmates from abuse. A roster of attendees shall be maintained from each class. Training completion documents shall be filed in each employee's training file.

Prison Rape Elimination Act

606.1 PURPOSE AND SCOPE

This policy provides guidance for compliance with the Prison Rape Elimination Act of 2003 (PREA) and the implementing regulation that establishes standards (PREA Rule) to prevent, detect and respond to sexual abuse and sexual harassment (28 CFR 115.11).

606.1.1 DEFINITIONS

Definitions related to this policy include:

Intersex - A person whose sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development.

Sexual abuse - Any of the following acts, if the inmate does not consent, is coerced into such act by overt or implied threats of violence or is unable to consent or refuse:

- (a) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight
- (b) Contact between the mouth and the penis, vulva or anus
- (c) Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object or other instrument
- (d) Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh or the buttocks of another person, excluding contact incidental to a physical altercation (28 CFR 115.6)

Sexual abuse also includes abuse by a staff member, contractor or volunteer as follows, with or without consent of the inmate, detainee or resident:

- Contact between the penis and the vulva or the penis and the anus, including penetration, however slight
- Contact between the mouth and the penis, vulva or anus
- Contact between the mouth and any body part where the staff member, contractor or volunteer has the intent to abuse, arouse or gratify sexual desire
- Penetration of the anal or genital opening, however slight, by a hand, finger, object or other instrument, that is unrelated to official duties, or where the staff member, contractor or volunteer has the intent to abuse, arouse or gratify sexual desire
- Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh or the buttocks, that is unrelated to official duties, or where the staff member, contractor or volunteer has the intent to abuse, arouse or gratify sexual desire

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- Any attempt, threat or request by a staff member, contractor or volunteer to engage in the activities described above
- Any display by a staff member, contractor or volunteer of his/her uncovered genitalia, buttocks or breast in the presence of an inmate, detainee or resident
- Voyeurism by a staff member, contractor or volunteer (28 CFR 115.6)

Sexual harassment - Repeated and unwelcome sexual advances; requests for sexual favors; verbal comments, gestures or actions of a derogatory or offensive sexual nature by one inmate, detainee or resident that are directed toward another; repeated verbal comments or gestures of a sexual nature to an inmate, detainee or resident by a staff member, contractor or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures (28 CFR 115.6).

Transgender - A person whose gender identity (i.e., internal sense of feeling male or female) is different from the person's assigned sex at birth.

606.2 POLICY

This office has zero tolerance with regard to sexual abuse and sexual harassment in this facility. This office will take appropriate affirmative measures to protect all inmates from sexual abuse and harassment, and promptly and thoroughly investigate all allegations of sexual abuse and sexual harassment.

606.3 PREA COORDINATOR

The Corrections Chief shall appoint an upper-level manager with sufficient time and authority to develop, implement, and oversee office efforts to comply with PREA standards. The PREA coordinator shall review facility policies and practices and make appropriate compliance recommendations to the Corrections Chief (28 CFR 115.11).

The PREA coordinator's responsibilities shall include:

- (a) Developing a written plan to coordinate response among staff first responders, medical and mental health practitioners, investigators, and facility management to an incident of sexual abuse. The plan must also outline the office's approach to identifying imminent sexual abuse toward inmates and preventing and detecting such incidents (28 CFR 115.11; 28 CFR 115.65; 28 CFR 115.62).
- (b) Ensuring that within 30 days of intake, inmates are provided with comprehensive education, either in person or through video, regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding the office's policies and procedures for responding to such incidents (28 CFR 115.33).
- (c) Developing a staffing plan to provide adequate levels of staffing and video monitoring, where applicable, in order to protect detainees from sexual abuse. This includes documenting deviations and the reasons for deviations from the staffing plan, as well as reviewing the staffing plan a minimum of once per year. In calculating adequate

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staffing levels and determining the need for video monitoring, facilities shall take into consideration (28 CFR 115.13):

1. Generally accepted detention and correctional practices.
 2. Any judicial findings of inadequacy.
 3. Any findings of inadequacy from federal investigative agencies.
 4. Any findings of inadequacy from internal or external oversight bodies.
 5. All components of the facility's physical plant, including blind spots or areas where staff or inmates may be isolated.
 6. The composition of the inmate population.
 7. The number and placement of supervisory staff.
 8. Institution programs occurring on a particular shift.
 9. Any applicable state or local laws, regulations, or standards.
 10. The prevalence of substantiated and unsubstantiated incidents of sexual abuse.
 11. Any other relevant factors.
- (d) Ensuring that, when designing, acquiring, expanding or modifying facilities, or when installing or updating a video-monitoring system, electronic surveillance system, or other monitoring technology, consideration is given to the office's ability to protect inmates from sexual abuse (28 CFR 115.18).
- (e) Ensuring that any contract for the confinement of Skagit County Sheriff's Office detainees or inmates includes the requirement to adopt and comply with the PREA standards including obtaining incident-based and aggregated data, as required in 28 CFR 115.187. Any new contract or contract renewal shall provide for office contract monitoring to ensure that the contractor is complying with the PREA standards (28 CFR 115.12).
- (f) Making reasonable efforts to enter into agreements with community service providers to provide inmates with confidential, emotional support services related to sexual abuse. The facility shall provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, state, or national victim advocacy or rape crisis organizations. The facility shall enable reasonable communication between inmates and these organizations and agencies in as confidential a manner as possible. The facility shall inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws (28 CFR 115.53).
- (g) Ensuring the protocol describing the responsibilities of the Office and of another investigating agency, if another law enforcement agency will be responsible for conducting any sexual abuse or sexual harassment investigations, is published on the facility website or by other means, if no website exists (28 CFR 115.22).

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- (h) Implementing a process by which inmates may report sexual abuse and sexual harassment to a public/private entity or an office that is not part of the Office and that the outside entity or office is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to the Corrections Chief, allowing the inmate anonymity (28 CFR 115.51).
- (i) Establishing a process to ensure accurate, uniform data is collected for every allegation of sexual abuse at facilities under the direct control of this office, using a standardized instrument and set of definitions. Upon request, the Office shall provide all such data from the previous calendar year to the U.S. Department of Justice (DOJ) no later than June 30 (28 CFR 115.87).
 - (a) The data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the U.S. DOJ.
 - (b) The data shall be aggregated at least annually.
- (j) Establishing a process to monitor the conduct and treatment of detainees or staff who have reported sexual abuse and the conduct and treatment of detainees who were reported to have suffered sexual abuse.
- (k) Ensuring that the following are published on the office website or by other means, if no website exists:
 - 1. Office policy governing investigations of allegations of sexual abuse and sexual harassment or the referral of such investigations of sexual abuse or sexual harassment (unless the allegation does not involve potentially criminal behavior) (28 CFR 115.22)
 - 2. Information on how to report sexual abuse and sexual harassment on behalf of an inmate (28 CFR 115.54)
- (l) Ensuring audits are conducted pursuant to 28 CFR 115.401 through 28 CFR 115.405 (28 CFR 115.93).
- (m) Implementing a protocol requiring mid-level or higher-level supervisors to conduct and document unannounced inspections to identify and deter sexual abuse and sexual harassment. The protocol shall prohibit announcing when such inspections are to occur, unless it is necessary for operational considerations (28 CFR 115.13).
- (n) Ensuring agreements with outside investigating agencies include PREA requirements, including a requirement to keep the Skagit County Sheriff's Office informed of the progress of the investigation (28 CFR 115.71).
- (o) Ensuring the Office conducts follow-up criminal background records checks at least once every five years on members or contractors who may have contact with inmates or has in place a system for otherwise capturing such information (28 CFR 115.17).

606.4 REPORTING SEXUAL ABUSE, HARASSMENT AND RETALIATION

Any employee, agency representative, volunteer or contractor who becomes aware of an incident of sexual abuse, sexual harassment or retaliation against inmates or staff shall immediately notify

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a supervisor, who will forward the matter to a sexual abuse investigator (28 CFR 115.61). Staff may also privately report sexual abuse and sexual harassment of inmates (e.g., report to the Corrections Chief) (28 CFR 115.51).

The facility shall provide information to all visitors or third parties on how they may report any incident, or suspected incident, of sexual abuse or sexual harassment to a staff member (28 CFR 115.54).

Inmates may report sexual abuse or sexual harassment incidents anonymously or to any staff member they choose. Staff shall accommodate all inmate requests to report allegations of sexual abuse or harassment. Staff shall accept reports made verbally, in writing, anonymously or from third parties and shall promptly document all verbal reports (28 CFR 115.51).

Threats or allegations of sexual abuse and sexual harassment, regardless of the source, shall be documented and referred for investigation. Sexual abuse and sexual harassment reports shall only be made available to those who have a legitimate need to know, and in accordance with this policy and applicable law (28 CFR 115.61).

606.4.1 REPORTING TO OTHER FACILITIES

If there is an allegation that an inmate was sexually abused while he/she was confined at another facility, the Corrections Chief shall notify the head of that facility as soon as possible but not later than 72 hours after receiving the allegation. The Corrections Chief shall ensure that the notification has been documented (28 CFR 115.63).

606.5 RETALIATION

All inmates and staff who report sexual abuse or sexual harassment, or who cooperate with sexual abuse or sexual harassment investigations, shall be protected from retaliation.

Protective measures, including housing changes, transfers, removal of alleged abusers from contact with victims, administrative reassignment or reassignment of the victim or alleged perpetrator to another housing area, and support services for inmates or staff who fear retaliation shall be utilized (28 CFR 115.67).

The Corrections Chief or the authorized designee shall assign a supervisor to monitor, for at least 90 days, the conduct and treatment of inmates or staff who report sexual abuse or sexual harassment, as well as inmates who were reported to have suffered sexual abuse, to determine if there is any possible retaliation. The supervisor shall act promptly to remedy any such retaliation. The assigned supervisor should consider inmate disciplinary reports, housing or program changes, negative staff performance reviews or reassignment of staff members. Monitoring may continue beyond 90 days if needed. Inmate monitoring shall also include periodic status checks. The Corrections Chief should take reasonable steps to limit the number of people with access to the names of individuals being monitored and should make reasonable efforts to ensure that staff members who pose a threat of retaliation are not entrusted with monitoring responsibilities.

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If any other individual who cooperates with an investigation expresses a fear of retaliation, the facility shall take reasonable measures to protect that individual against retaliation (28 CFR 115.67).

606.5.1 REPORTS BY INMATES

Inmates may report sexual assault or abuse incidents anonymously or to any staff member they choose and shall not be required to use their normal point of contact. Staff shall accommodate all inmate requests to report allegations of sexual abuse and assaults.

Retaliation against an inmate by any staff member for filing a sexual abuse, assault or harassment incident will not be tolerated.

606.6 FIRST RESPONDERS

If an allegation of inmate sexual abuse is made, the first deputy to respond shall (28 CFR 115.64):

- (a) Separate the parties.
- (b) Request medical assistance as appropriate. If no qualified health care or mental health professionals are on-duty when a report of recent abuse is made, staff first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate qualified health care and mental health professionals (28 CFR 115.82).
- (c) Establish a crime scene to preserve and protect any evidence. Identify and secure witnesses until steps can be taken to collect any evidence.
- (d) If the time period allows for collection of physical evidence, request that the alleged victim, and ensure that the alleged abuser, do not take any actions that could destroy physical evidence (e.g., washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, eating).
- (e) Consider whether a change in classification or housing assignment for the victim is needed or whether witnesses to the incident need protection, both of which may include reassignment of housing.
- (f) Determine whether the alleged perpetrator should be administratively segregated or administratively transferred during the investigation.

If the first responder is not a deputy, the responder shall request the alleged victim to refrain from any actions that could destroy physical evidence and then immediately notify a deputy.

Should an investigation involve inmates who have disabilities or who have limited English proficiency, the first responder shall not rely on inmate interpreters, inmate readers or other types of inmate assistants, except in limited circumstances where an extended delay in obtaining an interpreter could compromise inmate safety, the performance of first responder duties or the investigation of sexual abuse or sexual harassment allegations (28 CFR 115.16).

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606.7 SEXUAL ABUSE AND SEXUAL HARASSMENT INVESTIGATIONS

An administrative investigation, criminal investigation or both shall be completed for all allegations of sexual abuse and sexual harassment (28 CFR 115.22). Administrative investigations shall include an effort to determine whether the staff's actions or inaction contributed to the abuse. All administrative and/or criminal investigations shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Only investigators who have completed office-approved training on sexual abuse and sexual harassment investigation shall be assigned to investigate these cases (28 CFR 115.71).

When practicable, an investigator of the same sex as the victim should be assigned to the case. Sexual abuse and sexual harassment investigations should be conducted promptly and continuously until completed. Investigators should evaluate reports or threats of sexual abuse and sexual harassment without regard to an inmate's sexual orientation, sex or gender identity. Investigators should not assume that any sexual activity among inmates is consensual.

The departure of the alleged abuser or victim from the employment or control of the correctional facility or Office shall not provide a basis for terminating an investigation (28 CFR 115.71).

If the investigation is referred to another agency for investigation, the Office shall request that the investigating agency follow the requirements as provided in 28 CFR 115.21 (a) through (e). The referral shall be documented. The Office shall cooperate with the outside agency investigation and shall request to be informed about the progress of the investigation (28 CFR 115.71). If criminal acts are identified as a result of the investigation, the case shall be presented to the appropriate prosecutor's office for filing of new charges (28 CFR 115.71).

Evidence collection shall be based on a uniform evidence protocol that is developmentally appropriate for youth, if applicable, and adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011 (28 CFR 115.21).

Inmates alleging sexual abuse shall not be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with an investigation (28 CFR 115.71).

If a victim is under 18 or considered a vulnerable adult under state law, the assigned investigator shall report the allegation to the designated social services agency as required (28 CFR 115.61).

606.7.1 INVESTIGATIVE FINDINGS

All completed written investigations shall be forwarded to the Corrections Chief or if the allegations may reasonably involve the Corrections Chief, to the County Administrator. The Corrections Chief or Sheriff shall review the investigation and determine whether any allegations of sexual abuse or sexual harassment have been substantiated by a preponderance of the evidence (28 CFR 115.71; 28 CFR 115.72).

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The staff shall be subject to disciplinary sanctions, up to and including termination, for violating this policy. Termination shall be the presumptive disciplinary sanction for staff members who have engaged in sexual abuse. All discipline shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

All terminations for violations of sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to the law enforcement agency that would handle any related investigation and to any relevant licensing bodies (28 CFR 115.76).

606.7.2 REPORTING TO INMATES

The Corrections Chief or the authorized designee shall inform a victim inmate in writing whether an allegation has been substantiated, unsubstantiated or unfounded. If the Office did not conduct the investigation, the Office shall request relevant information from the investigative agency in order to inform the inmate.

If a staff member is the accused (unless the Office has determined that the allegation is unfounded), the inmate shall also be informed whenever:

- (a) The staff member is no longer assigned to the inmate's unit or employed at the facility.
- (b) The Office learns that the staff member has been indicted or convicted on a charge related to sexual abuse within the facility.

If another inmate is the accused, the alleged victim shall be notified whenever the Office learns that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility.

All notifications or attempted notifications shall be documented. When notification is made while the inmate is in custody, the inmate will sign a copy of the notification letter. The letter will be added to the case file (28 CFR 115.73).

606.8 SEXUAL ABUSE AND SEXUAL HARASSMENT BETWEEN STAFF AND INMATES

Sexual abuse and sexual harassment between staff, volunteers or contract personnel and inmates is strictly prohibited. The fact that an inmate may have initiated a relationship or sexual contact is not a defense to violating this policy.

Any incident involving allegations of staff-on-inmate sexual abuse or sexual harassment shall be referred to the Internal Affairs Unit for investigation.

606.8.1 SEXUAL ABUSE BY CONTRACTOR OR VOLUNTEER

Any contractor or volunteer who engages in sexual abuse within the facility shall be immediately prohibited from having any contact with inmates. He/she shall be promptly reported to the law enforcement agency that would investigate such allegations and brought to the attention of any relevant licensing bodies (28 CFR 115.77).

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606.9 PROTECTIVE CUSTODY

Inmates at high risk for sexual victimization shall not be placed in involuntary protective custody unless an assessment of available alternatives has been made and it has been determined that there is no reasonably available alternative means of separation. Inmates may be held in involuntary protective custody for less than 24 hours while an assessment is completed.

If an involuntary protective custody assignment is made because of a high risk for victimization, the Corrections Chief shall clearly document the basis for the concern for the inmate's safety and the reasons why no alternative means of separation can be arranged (28 CFR 115.43).

The facility shall assign these inmates to involuntary protective custody only until an alternative means of separation from likely abusers can be arranged, not ordinarily in excess of 30 days.

Inmates placed in temporary protective custody shall continue to have reasonable access to programs, privileges, education and work opportunities. If restrictions are put in place, the Corrections Chief shall document the following:

- (a) The opportunities that have been limited
- (b) The duration of the limitation
- (c) The reasons for such limitations

Every 30 days, the Corrections Chief shall afford each such inmate a review to determine whether there is a continuing need for protective custody (28 CFR 115.43).

606.10 SEXUAL ABUSE INCIDENT REVIEW

An incident review shall be conducted at the conclusion of every sexual abuse investigation, unless the allegation has been determined to be unfounded (28 CFR 115.86). The review should occur within 30 days of the conclusion of the investigation.

The review team shall include upper-level management officials and seek input from line supervisors, investigators and qualified health care and or mental health professionals, as appropriate:

- (a) Consider whether the investigation indicates a need to change policy or practice in order to better prevent, detect or respond to sexual abuse.
- (b) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender or intersex identification status or perceived status; by gang affiliation; or other group dynamics at the facility.
- (c) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers may enable abuse.
- (d) Assess the adequacy of staffing levels in the area during different shifts.
- (e) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.

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- (f) Prepare a written report of the team's findings, including, but not limited to, determinations made pursuant to paragraphs (a)-(e) of this section, and any recommendations for improvement. The report should be submitted to the Sheriff and the PREA coordinator.

The Corrections Chief or the authorized designee shall implement the recommendations for improvement or document the reasons for not doing so.

606.11 DATA REVIEWS

This office shall conduct an annual review of collected and aggregated incident-based sexual abuse data. The purpose of these reviews is to assess and improve the effectiveness of sexual abuse prevention, detection and response policies, practices and training by:

- (a) Identifying problem areas.
- (b) Identifying corrective actions taken.
- (c) Recommending corrective actions.
- (d) Comparing current annual data and corrective actions with those from prior years.
- (e) Assessing the office's progress in addressing sexual abuse.

The reports shall be approved by the Corrections Chief and made available through the office website. Material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of the facility. However, the nature of the redacted material shall be indicated (28 CFR 115.88).

All aggregated sexual abuse data from Skagit County Sheriff's Office facilities and private facilities with which it contracts shall be made available to the public at least annually through the office website. Before making aggregated sexual abuse data publicly available, all personal identifiers shall be removed (28 CFR 115.89).

606.12 RECORDS

All case records and reports associated with a claim of sexual abuse and sexual harassment, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment or counseling, shall be retained in accordance with confidentiality laws.

The Office shall retain all written reports from administrative and criminal investigations pursuant to this policy for as long as the alleged abuser is held or employed by the Office, plus five years (28 CFR 115.71).

All other data collected pursuant to this policy shall be securely maintained for at least 10 years after the date of the initial collection, unless federal, state or local law requires otherwise (28 CFR 115.89).

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606.13 PRESERVATION OF ABILITY TO PROTECT INMATES

The Office shall not enter into or renew any collective bargaining agreement or other agreement that limits the office's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted (28 CFR 115.66).

606.14 SEXUAL ABUSE VICTIMS

Inmates who are victims of sexual abuse shall be transported to the nearest appropriate location for treatment of injuries and collection of evidence, and for crisis intervention services (28 CFR 115.82). Depending on the severity of the injuries, transportation may occur by a staff member or by ambulance, in either case with appropriate security to protect the staff, the inmate, and the public, and to prevent escape.

A victim advocate from a rape crisis center should be made available to the victim. If a rape crisis center is not available, the Office shall make available a qualified member of a community-based organization, or a qualified health care or mental health professional from the Office, to provide victim advocate services. Efforts to secure services from a rape crisis center shall be documented. A rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in 34 USC § 12511, to sexual assault victims of all ages. A rape crisis center that is part of a government unit may be used if it is not part of the criminal justice system (such as a law enforcement agency) and it offers a level of confidentiality comparable to the level at a nongovernmental entity that provides similar victim services (28 CFR 115.21).

606.15 EXAMINATION, TESTING AND TREATMENT

Examination, testing and treatment shall include the following:

- (a) Forensic medical examinations shall be performed as evidentiary or medically appropriate, without financial cost to the victim. Where possible, these examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANE)s. If neither SAFEs nor SANEs are available, other qualified medical practitioners can perform the examination. The Office shall document its efforts to provide SAFEs or SANEs (28 CFR 115.21).
- (b) If requested by the victim, a victim advocate, a qualified office staff member or a qualified community organization staff member shall accompany the victim through the forensic medical examination process and investigatory interviews. That person will provide emotional support, crisis intervention, information and referrals (28 CFR 115.21).
- (c) Provisions shall be made for testing the victim for sexually transmitted diseases (28 CFR 115.82).
- (d) Counseling for the treatment of sexually transmitted diseases, if appropriate, shall be provided.
- (e) Victims shall be offered information about, and given access to, emergency contraception, prophylaxis for sexually transmitted infections and follow-up treatment

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for sexually transmitted diseases (28 CFR 115.82; 28 CFR 115.83). This shall be done in a timely manner.

- (f) Victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the abuse, such victims shall receive comprehensive information about, and access to, all lawful pregnancy-related medical services (28 CFR 115.83). This shall be done in a timely manner.
- (g) Victims shall be provided with follow-up services, treatment plans and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities or their release from custody (28 CFR 115.83).
- (h) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident (28 CFR 115.82; 28 CFR 115.83).
- (i) The health authority or mental health staff shall obtain informed consent from inmates before reporting information to correctional facility staff about prior sexual victimization that occurred somewhere other than an institutional setting, unless the inmate is under the age of 18 (28 CFR 115.81).
- (j) Medical and mental health practitioners shall ensure that information related to sexual victimization that occurred in an institutional setting is limited to medical and mental health practitioners and other staff unless it is necessary to inform correctional facility staff about security or management decisions (28 CFR 115.81).

Indigent Inmates

607.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for providing basic services to indigent inmates. An inmate's access to health care, programs, services and activities is not precluded by the inmate's inability to pay.

607.2 POLICY

It is the policy of this office that no inmate shall be denied access to hygiene products, medical and mental health services, outgoing legal correspondence or qualified inmate programs due to a lack of funds.

The Corrections Chief or the authorized designee shall establish policies and procedures for providing basic services to indigent inmates. A debit accounting procedure should also be established by the financial services division to recoup fees from inmates who have received funds after having accessed discretionary services, but before inmates have access to the funds for non-discretionary items, such as commissary products.

The Corrections Chief should also establish a weekly schedule for the delivery of requested indigent services, excluding medical and mental health services, which may be requested at any time. A list of eligible indigent materials, such as hygiene products and other approved items for indigent inmates, along with the debit policies from inmate accounts, shall be communicated in the inmate orientation materials.

607.3 INDIGENT INMATE HYGIENE PRODUCTS

Inmates who are indigent should be provided with basic hygiene products upon request. The cost of these products will be recorded in the inmate's personal funds account and debited from any future funds credited to that account. The products should include the following:

- Soap
- Toothbrush
- Toothpaste
- Disposable razor (on request)
- Comb
- Toilet paper
- Materials as appropriate to the special hygiene needs of women

607.4 INMATE REQUESTS FOR HYGIENE PRODUCTS

Inmates who have been classified as indigent may request additional hygiene products by filling out an inmate request form after being in custody for five days, and every five days thereafter.

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The cost of these products will be recorded in the inmate's personal funds account and debited from any future funds credited to that account.

607.5 INDIGENT INMATE REQUESTS FOR NON-EMERGENCY MEDICAL AND MENTAL HEALTH SERVICES

Indigent inmates shall be permitted to request non-emergency medical and mental health services without regard to their ability to pay. Such requests should be made by the inmate by completing an inmate request form. Qualified co-payments will be recorded in the inmate's personal funds account and debited from any future funds credited to that account.

607.6 INDIGENT INMATE REQUESTS FOR WRITING MATERIALS

Indigent inmates may request writing materials on a weekly basis, as provided by an approved schedule established by the Corrections Chief. Writing materials should include the following:

- At least two pre-stamped envelopes for correspondence with family and friends
- Six sheets of writing paper
- One pencil or flexi pen

Indigent inmates shall receive an amount of pre-stamped envelopes and writing paper sufficient to maintain communication with an elected official, officials of the Department of Corrections, attorneys and other officers of the court. Requests shall be screened and granted based on need by the inmate programs coordinator. Inmates should not be permitted to maintain an excess supply of writing materials without the approval of a supervisor.

607.7 INDIGENT INMATE ACCESS TO PROGRAMS

Inmates should not be denied access to educational and vocational programs based solely on their indigent status.

Grooming

608.1 PURPOSE AND SCOPE

The purpose of this policy is to allow inmates to have freedom in personal grooming, except when a legitimate government interest justifies the development of grooming standards that are based upon orders of the court, inmate classification, work status, safety and security, or health and hygiene.

608.2 POLICY

It is the policy of this facility to allow inmates freedom in personal grooming, except when a valid government interest justifies that grooming standards be established. The Corrections Chief or the authorized designee shall establish inmate grooming standards specific to inmate classification, work status, facility safety and security, or inmate health and hygiene. Any grooming standards developed shall be identified in the inmate handbook that is distributed or communicated at the initial booking.

608.3 HAIRCUTS

Inmates will be provided haircuts and hair-cutting tools subject to established facility rules. If hair length, style or condition presents a security or sanitation concern, haircuts may be mandatory. Inmates who significantly alter their appearance may be required to submit to additional booking photos.

Inmates shall not cut names, numbers or other designs into their hair. Inmates shall not manipulate their hair into any style, including, but not limited to, braids, ponytails, cornrows or twists, that could facilitate the concealment and movement of contraband and weapons.

608.3.1 RELIGIOUS HAIRSTYLES

Any established hairstyle standards should not unreasonably interfere with religious observances. An inmate desiring to wear a specific hairstyle for religious purposes shall submit a request form to the facility chaplain or inmate programs coordinator. The chaplain or inmate programs coordinator will interview the inmate to establish that he/she can articulate the religious significance of the hairstyle and its relation to the professed faith. The interviewer may ask questions to determine the inmate's sincerity of beliefs but shall not test for proficiency in religious knowledge.

The chaplain or the inmate programs coordinator shall document the findings and submit the appropriate form to the Corrections Chief with a recommendation to approve or deny the inmate's request. The Corrections Chief or the authorized designee shall permit or deny the request based on security and safety issues and the ability to reasonably accommodate the request. Approved or denied request forms shall be filed in the inmate's record.

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608.3.2 HAIR CARE SERVICES

The Corrections Chief or the authorized designee shall establish written procedures for inmate hair care services. The procedures will include schedules for hair care services and allow rescheduling for conflicts, such as court appearances.

Inmates shall generally be permitted to receive hair care services once per month after being in custody for at least 30 days. Staff may suspend access to hair care services if an inmate appears to be a danger to him/herself or others or to the safety and security of the facility.

608.4 SHAVING

Facial hair shall be clean and well groomed. Long beards may allow inmates to conceal weapons or contraband. Inmates may be required to trim facial hair if it poses a security or safety risk. Inmates may be required to submit to new booking photographs if their appearance is significantly altered due to facial hair. Inmates with facial hair who work around food shall wear appropriate facial coverings.

An inmate may be denied access to razors if he/she appears to be a danger to him/herself or others, or if such access may jeopardize the safety and security of the facility.

Inmates may be restricted from significantly altering their appearance for reasons of identification in court.

608.5 NAILS

Nail clippers will be kept at the control station and will be issued to inmates upon request. Inmate workers are required to keep their nails clean and trimmed. Inmates with long nails may be required to trim their nails if there is a security concern and the inmate is admitted to general population.

608.6 GROOMING EQUIPMENT

Grooming equipment is to be inventoried and inspected by the staff at the beginning of each shift and prior to being issued to inmates. The staff shall ensure that all equipment is returned by the end of the shift and is not damaged or missing parts.

Grooming equipment will be disinfected before and after each use by the methods approved by the Washington State Cosmetology, Barbering, Esthetics, and Manicuring Advisory Board, in accordance with WAC 308-20-110. Cleaning methods include:

- Removing foreign matter.
- Cleaning tools with soap or detergent and water.
- Immersing non-electrical equipment in disinfectant.
- Spraying electrical equipment with disinfectant.
- Storing cleaned equipment in clear, covered containers that are labeled as such.

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Disinfectant solution shall be changed at least once per week or whenever the solution is cloudy or dirty. Solution will be stored in covered containers with labeled instructions for its use and the Environmental Protection Agency registration number.

608.7 SHOWERING

Inmates shall be permitted to shower upon assignment to a housing unit, at least every other day thereafter and more often if practicable.

608.8 PERSONAL CARE ITEMS

Inmates are expected to maintain their hygiene using approved personal care items. Personal care items, including disposable razors, toothbrushes, combs and soap, are available through the inmate commissary and will be charged to the inmate's account.

Indigent inmates shall receive hygiene items necessary to maintain an appropriate level of personal hygiene.

No inmate will be denied the necessary personal care items. For sanitation and security reasons, personal care items shall not be shared.

Inmate Non-Discrimination Policy

609.1 PURPOSE AND SCOPE

The constitutional rights of inmates regarding discrimination are protected during incarceration. These protections extend to administrative decisions (e.g., classification, access to programs, availability of services). This policy is intended to guide the staff toward nondiscriminatory administrative decisions and to detail an inmate complaint and discrimination investigation process.

609.2 POLICY

All decisions concerning inmates housed at this facility shall be based on reasonable criteria that support the health, safety, security, and good order of the facility.

609.3 INMATES REPORTING DISCRIMINATION

Inmates who wish to report an allegation of discrimination may communicate with facility management in any way, including:

- (a) Confidential correspondence addressed to the Corrections Chief or the Sheriff or other government official, including the courts or legal representatives.
- (b) Verbally to any supervisor or other staff member of this facility.

609.3.1 HANDLING COMPLAINTS OF DISCRIMINATION

Staff shall promptly forward all written allegations of discrimination by inmates to the Shift Supervisor. If the allegation is presented verbally, the receiving staff member shall prepare an incident report identifying the circumstances prompting the allegation, the individuals involved, and any other pertinent information that would be useful to investigating the allegation.

Unless the complaint submitted by the inmate is clearly identified as confidential and addressed to the Corrections Chief, Sheriff, or other official, the Shift Supervisor shall review the complaint and attempt to resolve the issue. In any case, the Shift Supervisor shall document the circumstances of the allegation and what actions, if any, were taken to investigate or resolve the complaint. All reports of alleged discrimination shall be forwarded to the Corrections Chief for review and further investigation or administrative action as needed.

Administrative evaluations and response to allegations of discrimination shall be based upon objective criteria:

- (a) The inmate's classification
- (b) The inmate's criminal history
- (c) Current and past behavior and disciplinary history
- (d) Housing availability
- (e) The availability of programs

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- (f) The ability to safely provide the requested services

609.4 DISCRIMINATION COMPLAINT AUDITS

The Corrections Chief should perform an annual audit of all inmate discrimination complaints to evaluate whether any policy or procedure changes or training are indicated. The Corrections Chief should record these findings in a confidential memorandum to the Sheriff. Specific details of complaints and identifying information, such as names of the involved persons, dates, or times, are not part of this process and should not be included in the memorandum. If the audit identifies any recommended changes or content that may warrant a critical revision to this Custody Manual, the Corrections Chief should promptly notify the Sheriff.

Any training issues identified as a result of this audit should be forwarded to the Training Sergeant, who shall be responsible for ensuring all necessary and required training is scheduled and completed.

609.5 DISCRIMINATION PROHIBITED

Discriminating against an inmate based upon actual or perceived race, ethnicity, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, pregnancy, genetic information, veteran status, marital status, and any other classification or status protected by law is prohibited.

Reasonable and comparable opportunities for participation in services and programs including vocational, educational, and religious programs shall be made available to inmates in a nondiscriminatory manner.

The Corrections Chief should periodically conduct interviews with inmates and staff members to identify and resolve potential problem areas related to discrimination before they occur.

Inmate Grievances

610.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process by which inmates may file grievances and receive a formal review regarding the conditions of their confinement.

610.2 POLICY

It is the policy of this office that any inmate may file a grievance relating to conditions of confinement, which includes release date, housing, medical care, food services, hygiene and sanitation needs, recreation opportunities, classification actions, disciplinary actions, program participation, telephone and mail use procedures, visiting procedures and allegations of sexual abuse.

Grievances will not be accepted if they are challenging the rules and policies themselves, state or local laws, court decisions and probation/parole actions.

Retaliation for use of the grievance system is prohibited.

610.2.1 ACCESS TO THE GRIEVANCE SYSTEM

All inmates shall be provided with a grievance process for resolving complaints arising from facility matters with at least one level of appeal.

Inmates will receive information concerning the grievance procedure during the orientation process or by accessing the inmate handbook. Information will also be contained in the inmate handbook. Information regarding the grievance process will be provided to inmates in the language they understand.

The information will include:

- A grievance via the inmate communication system or instructions for registering a grievance.
- Instructions for the resolution of the grievance at the lowest appropriate staff level.
- The appeal process to the next level of review.
- Electronically written reasons for denial of a grievance at each level of review.
- A provision of required timeframes for responses to both emergency and non-emergency grievances.
- A provision for resolving questions of jurisdiction within the facility.
- Consequences for abusing the grievance system.

610.3 INMATE GRIEVANCE PROCEDURES

Staff shall attempt to informally resolve all grievances at the lowest level. All attempts to resolve a grievance shall be documented and tracked in the electronic inmate communication system.. If

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there is no resolution at this level, the inmate may appeal the decision to a higher rank starting at the lowest level..

The inmate should be advised to electronically resubmit requesting an appeal.. A grievance should be filed by an inmate within 14 days of the complaint or issue.

Inmates cannot file a grievance on behalf of another inmate but an inmate may assist another inmate in the preparation of a grievance. Custody staff may take reasonable steps to assist the inmate in the preparation of a grievance if requested.

Upon receiving an electronic inmate grievance form, the staff member shall acknowledge receipt of the grievance by electronically reviewing and assigning the grievance to the appropriate staff.. The staff member receiving the electronic form shall gather all associated paperwork and reports and immediately forward it to a supervisor.

610.3.1 EXCEPTION TO INITIAL GRIEVANCE FILING

Inmates may request to submit the grievance directly to a supervisor or mail it directly to the Corrections Chief or authorized designee if they reasonably believe the issues to be grieved are sensitive or that their safety would be in jeopardy if the contents of the grievance were to become known to other inmates.

610.3.2 TIMELY RESOLUTION OF GRIEVANCES

Upon receiving a completed electronic inmate grievance form, the supervisor shall ensure that the grievance is investigated and resolved or denied in a timely manner, as established by the Corrections Chief. The supervisor shall assign the investigation of the grievance to the manager in charge of the department the inmate is grieving.

Grievances related to medical care should be investigated by the Responsible Physician or the authorized designee. The findings of that investigation, along with any recommendations, shall be forwarded to the Shift Supervisor. Any appeals of the findings of the medical staff shall be forward to the Corrections Chief as the final level of appeal.

Grievances about food-related matters should be investigated by the food services manager. The findings of that investigation, along with any recommendations, shall be forwarded to the Shift Supervisor. Any appeals shall be forward to the Corrections Chief as the final level of appeal.

Other grievances relating to programs or other services provided by the Office shall be investigated by the custody staff with the assistance of the supervising employee in charge of those services. Findings relating to the investigation will be forwarded to the Shift Supervisor. Any appeals shall be forwarded to the Corrections Chief as the final level of appeal.

610.3.3 APPEALS TO GRIEVANCE FINDINGS

Inmates may appeal the finding of a grievance to the Corrections Chief as the final level of appeal within five days of receiving the findings of the original grievance. The Corrections Chief will review the grievance and either confirm or deny it. If the Corrections Chief confirms the grievance, he/

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she will initiate corrective actions. In either case, the inmate shall receive a electronically written response to the appeal.

Appeals related to sexual abuse allegations shall be confirmed or denied by the Corrections Chief within 10 calendar days.

610.3.4 RECORDING GRIEVANCES

The Corrections Chief or authorized designee should maintain an electronic grievance log in the inmate communication system that is accessible to all supervisors. The supervisor who originally receives a grievance shall electronically record the grievance along with its finding on the grievance log. Periodic reviews of the log should be made by the Corrections Chief or the authorized designee to ensure that grievances are being handled properly and in a timely manner. A electronic copy of each grievance should be maintained throughout the inmate's period of incarceration.

The original grievance should be electronically retained in a file maintained by the Corrections Chief or the authorized designee, and shall be retained in accordance with established records retention schedules.

610.3.5 FRIVOLOUS GRIEVANCES

Inmates shall use the grievance process only for legitimate problems or complaints. If there is concern that an inmate is abusing the grievance process, he/she shall be informed that continued behavior may result in disciplinary action.

610.4 GRIEVANCE AUDITS

The Corrections Chief should perform an annual audit of all inmate grievances and complaints filed the previous calendar year. The Corrections Chief should forward a memorandum to the Sheriff detailing the findings, including recommendations regarding any changes to policy or procedures or any additional training that might be warranted to reduce future complaints. Specific identifying information regarding dates, times or individuals named in the complaints is not part of this process and should not be included in the memorandum.

The Sheriff should evaluate the recommendations and ensure appropriate action is taken.

Any training issues identified as a result of this audit should be forwarded to the Training Sergeant, who will be responsible for ensuring all necessary and required training is scheduled and completed.

610.5 TRAINING

The Training Sergeant shall ensure that all custody staff members receive initial and periodic training regarding all aspects of the Inmate Grievances Policy. All training delivered should include testing to document that the employee understands the subject matter.

610.6 ADDITIONAL PROVISIONS FOR GRIEVANCES RELATED TO SEXUAL ABUSE

The following apply to grievances that relate to sexual abuse allegations (28 CFR 115.52):

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- (a) Inmates may submit a grievance regarding an allegation of sexual abuse at any time.
- (b) Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, are permitted to assist inmates in filing such grievances and to file such grievances on behalf of inmates if the inmate agrees to have the grievance filed on his/her behalf. Staff members who receive a grievance filed by a third party on behalf of an inmate shall inquire whether the inmate wishes to have the grievance processed and shall document the inmate's decision.
- (c) Grievances may be submitted to any staff member and need not be submitted to the member who is the subject of the complaint.
- (d) Staff receiving a grievance shall forward the grievance to a supervisor. Grievances shall not be forwarded to any supervisor who is the subject of the complaint. The supervisor receiving the grievance shall refer the grievance to the Shift Supervisor for investigation. Inmates and staff are not required to attempt to informally resolve grievances related to sexual abuse.
- (e) The Shift Supervisor shall ensure that grievances related to sexual abuse are investigated and resolved within 90 days of the initial filing. The Shift Supervisor may grant an extension of up to 70 days if reasonable to make an appropriate decision. If an extension is granted, the inmate shall be notified and provided a date by which a decision will be made.
- (f) At any level of the process, including the appeal, if the inmate does not receive a response within the allotted time, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level.
- (g) Inmates may be disciplined for filing a false grievance related to alleged sexual abuse only when it is determined that the inmate filed the grievance in bad faith.

610.6.1 EMERGENCY GRIEVANCES RELATED TO SEXUAL ABUSE

Any inmate who believes he/she or any other inmate is in substantial risk of imminent sexual abuse may file an emergency grievance with any supervisor. The supervisor shall determine whether immediate action is reasonably necessary to protect the inmate and shall provide an initial response within 48 hours.

The supervisor shall refer the grievance to the Shift Supervisor, who will investigate and issue a final decision within five calendar days.

The initial response and final decision shall be documented and shall include a determination whether the inmate is in substantial risk of imminent sexual abuse and identify actions taken in response to the emergency grievance (28 CFR 115.52).

Inmate Voting

611.1 PURPOSE AND SCOPE

This policy establishes the requirement for providing eligible inmates the opportunity to vote during elections, pursuant to election statutes.

611.2 POLICY

The Office will assist inmates who wish to vote in an election.

611.3 PROCEDURES

Prior to each election, the Corrections Chief will designate a deputy to be a liaison between the Office and the local registrar of voters. The designated deputy will be responsible for assisting inmates who have requested to vote. Postage shall be provided to inmates who cannot afford to mail an absentee ballot.

Inmates should be advised of voting methods during the inmate orientation.

Chapter 7 - Medical-Mental Health

Health Care Administrative Meetings and Reports

700.1 PURPOSE AND SCOPE

The Office recognizes that the delivery of effective health care requires open and frequent communication between the Responsible Physician and the Corrections Chief. This policy provides guidelines for the continuous monitoring, planning and problem resolution in providing health care that addresses the medical needs of the inmate population and prevents potential outbreaks of communicable and contagious illness.

700.2 POLICY

It is the policy of this facility that the Responsible Physician or their designee should meet with the Corrections Chief at least quarterly. The points of discussion should include the effectiveness of the health care system, a description of any environmental or access issues that require improvement, and detail any progress that has been made in previously reported areas. The quarterly meeting should be documented through formal minutes, which should include the names of attendees and a list of the topics discussed. The minutes should be retained in accordance with established records retention schedules.

The data for the quarterly report should be gathered by the Responsible Physician or their designee via monthly meetings with all facility Shift Supervisors and qualified health care professionals. The monthly meetings should cover the following topics:

- Health care services
- Quality improvement findings
- Infection control efforts
- Inmate grievances
- Environmental inspections report

700.2.1 STATISTICAL REPORTS

In addition to the quarterly report described above, a statistical report will be provided annually to the Corrections Chief. The statistical report will be prepared by the Responsible Physician or their designee and shall include, but not be limited to, the following:

- (a) The number of inmates receiving health services by category of care
- (b) The number of referrals to specialists
- (c) Prescriptions written and medications dispensed
- (d) Laboratory and X-ray tests completed

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- (e) Infirmary admissions, if applicable
- (f) On-site and off-site hospital admissions
- (g) Serious injuries or illnesses
- (h) Deaths
- (i) Off-site transports
- (j) Infectious disease monitoring
- (k) Emergency services provided to inmates
- (l) Dental visits provided
- (m) Number of health care grievances by category (e.g., medication error, missed appointment, health staff complaint) and whether the grievance was founded or unfounded

It is the responsibility of the Corrections Chief to ensure that copies of the statistical reports and documentation of any remedies implemented are retained in accordance with established records retention schedules.

Access to Health Care

701.1 PURPOSE AND SCOPE

The provision of adequate health services in a custody setting is a constitutional right afforded to all inmates. The purpose of this policy is to provide custody personnel and qualified health care professionals with a process to inform newly booked inmates of the procedure to access health care services and how to use the grievance system, if necessary.

701.2 POLICY

It is the policy of this office that all inmates, regardless of custody status or housing location, will have timely access to a qualified health care professional and receive a timely professional clinical judgment and appropriate treatment.

The Skagit County Sheriff's Office facility will provide appropriate and cost-effective emergency and necessary medical, dental and mental health care as necessary to maintain the health and well-being of inmates to a reasonable and socially acceptable standard (RCW 70.48.130).

701.3 ACCESS TO CARE

Inmate medical requests will be evaluated by qualified health care professionals or health-trained custody staff. Health care services will be made available to inmates from the time of admission until they are released. Information regarding how to contact the medical staff will be posted in all inmate housing areas. Medications and community health resources and referrals may be provided upon request when the inmate is released.

Unreasonable barriers shall not be placed on an inmate's ability to access health services. Health care that is necessary during the period of imprisonment shall be provided regardless of an inmate's ability to pay, the size of the facility or the duration of the inmate's incarceration (RCW 70.48.130). Such unreasonable barriers include:

- Punishing inmates for seeking care for their health needs.
- Assessing excessive co-payments that prevent or deter inmates from seeking care for their health needs.
- Deterring inmates from seeking care for their health needs by scheduling sick call at unreasonable times.

All routine requests for medical attention shall be promptly routed to a qualified health care professional.

Any incident of an inmate refusing medical treatment or causing a disruption in the delivery of health care services shall be documented in an incident report. The original incident report shall be forwarded to the Responsible Physician and a copy sent to the Corrections Chief.

Access to Health Care

701.4 HEALTH CARE GRIEVANCES

Custody personnel should authorize and encourage resolution of inmate complaints and requests on an informal basis whenever possible. To the extent practicable, custody personnel should provide inmates with opportunities to make suggestions to improve programs and conditions.

Inmates will be informed of the grievance process during inmate orientation. The grievance process is also explained in the inmate handbook, which all inmates receive and which they should have additional access to in their housing units. Grievances will be handled in accordance with the Inmate Grievances Policy.

Custody personnel should minimize technical requirements for grievances and allow inmates to initiate the grievance process by briefly describing the nature of the complaint and the remedy sought. For simple questions and answers regarding clinical issues, inmates may meet with a qualified health care professional or may submit a written correspondence.

Inmate grievances regarding health care issues will be investigated by an uninvolved member of the medical staff. If no such person is available or does not exist, an outside peer should be sought to investigate the grievance. The inmate should be provided with a written response in accordance with the schedule set forth in the Inmate Grievances Policy. Responses to inmate grievances should be based on the community standard of health care.

Copies of grievances and the facility's response shall be sent to the Corrections Chief, who, in consultation with the Responsible Physician, shall serve as the final authority in response to all inmate grievances.

If an inmate is not satisfied with the response, the inmate may appeal the grievance as outlined in the Inmate Grievances Policy.

701.5 POSTING AVAILABLE RESOURCES

A listing of telephone numbers for medical, dental, mental health and ambulance services shall be posted at the facility's medical area and in the primary staff control station, along with a schedule of availability.

Non-Emergency Health Care Requests and Services

702.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a daily triage system of inmate requests for health care services. This is to ensure that the health needs of the population are addressed properly and in a timely manner.

702.2 POLICY

It is the policy of this office to provide daily access to the qualified health care professionals or health-trained custody staff in order for inmates to request medical services. All health care requests will be documented, triaged and referred appropriately. Qualified health care professionals will conduct sick call and clinics for health care services on a scheduled basis to ensure a timely response to requests for medical services.

The Responsible Physician, in coordination with the Corrections Chief or the authorized designee, is responsible for developing a process that includes:

- (a) A process for inmates to request health services on a daily basis.
- (b) A priority system for health care services to acquire and address requests for routine health care, and for urgent or emergent injuries, illnesses and conditions.
- (c) Making health care request forms available in each housing unit and to all inmates upon request.
- (d) A system, in which health care requests are documented, triaged and referred appropriately.
- (e) Restrictions that prohibit anyone, except qualified health care professionals, from diagnosing or treating illnesses or injuries.

702.3 HEALTH CARE REQUESTS

Inmates will be instructed on how to obtain medical services during the intake process and in the inmate handbook. Inmates shall submit a medical request form to the housing unit deputy or the health-trained custody staff delivering medications, or a nurse, if appropriate.

Medical request forms should be available in languages representative of the population. Inmates who communicate in a language not available in printed form shall have access to interpreter services.

Inmates with disabilities should be provided with appropriate assistance or accommodation to ensure they are able to request health care services.

The housing unit deputy shall ensure the reason for seeking medical attention is on the medical request form. If no reason is given, the deputy shall encourage the inmate to indicate whether the

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matter is urgent or confidential. The deputy shall forward all requests to the correctional facility nurse.

702.4 TRIAGE OF HEALTH CARE REQUESTS

Qualified health care professionals shall perform a daily triage. Sick call shall be available to inmates at least five days a week and shall be performed by a qualified health care professional.

Other qualified health care professionals should schedule inmates in need of specialized treatment for the next available providers' clinic. The wait for the next available providers' clinic should not exceed two days. The qualified health care professional shall document the referral in the providers' scheduling book and on the inmate's medical record.

The frequency and duration of sick call should be sufficient to meet the needs of the inmate population, but should be conducted at least weekly by a qualified health care professional. If an inmate's custody status precludes attendance at sick call, arrangements shall be made to provide sick call services in the place of the inmate's detention.

702.5 GUIDELINES FOR ELECTIVE PROCEDURES OR SURGERY

The Responsible Physician and the Corrections Chief shall work cooperatively to develop guidelines that govern elective procedures or surgery for inmates. The guidelines must include decision-making processes for elective procedures or surgery that is needed to correct a substantial functional deficit or an existing pathological process that threatens the well-being of the inmate over a period of time. Any discussion of this nature with the inmate should be conducted in a language easily understood by the inmate and should be carefully documented in the inmate's medical record. This record should be maintained in accordance with established records retention schedules.

702.6 REQUESTS FOR OUTSIDE MEDICAL CARE

Inmates who request access to health care services outside the facility may do so with advance authorization from the Corrections Chief or the authorized designee and sufficient available funds to pay for all costs associated with transportation to the off-site facility and all costs associated with the medical services, diagnostics, treatment plans, medications or any other costs associated with off-site medical care.

Referrals and Coordination of Specialty Care

703.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process for referring inmates who need health care or specialty care that is beyond the resources available in the facility. The policy includes guidelines regarding transportation under appropriate security provisions, and the formulation of advance written agreements for around the clock or on-call availability of alternate services. Specialty care includes specialist-provided health care, such as nephrology, surgery, dermatology and orthopedics.

703.2 POLICY

It is the policy of this office that inmates have access to necessary hospitalization and specialty services for serious medical needs. This facility will provide, either directly or through contracted sources, specialty care and emergency medical services to inmates when the need is determined by the Responsible Physician.

703.3 CHIEF CORRECTIONS DEPUTY RESPONSIBILITY

The Corrections Chief or the authorized designee, in coordination with the Responsible Physician are responsible for establishing written agreements with outside specialty health care services for emergency and urgent care that is not available within the facility. In addition, a plan shall be developed for the secure transportation of inmates to a facility where such care is available.

703.4 REFERRAL TO OFF-SITE MEDICAL CARE

The Responsible Physician or the authorized designee shall evaluate the inmate, and if indicated, shall recommend specialty appointments in writing on the order sheet in the inmate's medical record. A referral form should be completed and any supporting documentation attached. The written referral shall be reviewed and authorized, if appropriate, by the Responsible Physician.

703.5 OFF-SITE COORDINATION

The qualified health care professional is responsible for recommending off-site medical and psychiatric care for inmates, coordinating outside appointments and notifying supervisory correctional staff of off-site transportation needs. The Corrections Chief should establish a written transportation procedure that ensures inmates are transported securely and in a timely manner for medical, mental health, dental clinic or other specialty appointments. The procedure shall include the secure transfer of medical information to the receiving health care service.

Any conflicts that arise regarding off-site consultation trips will be communicated by the deputy responsible for transportation to the Responsible Physician and Corrections Chief or the authorized designee so that modifications may be made.

The correctional facility supervisor shall keep a log of missed appointments to determine if transportation issues are impeding the ability of inmates to access appropriate medical care. Any

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issues identified shall be discussed and resolved between the Responsible Physician and the Corrections Chief.

Emergency Health Care Services

704.1 PURPOSE AND SCOPE

The purpose of this policy is to establish plans and procedures for responding to medical emergencies in the facility when the level of medical or mental health services exceed the licensure or certification of staff who are on-duty and to define staff training requirements.

704.2 POLICY

It is the policy of this office that emergency medical, mental health and dental services are available 24 hours a day. These services may include off-site health care services.

704.3 PROCEDURES

The Corrections Chief or the authorized designee shall work cooperatively with the Responsible Physician to develop plans and procedures for responding to emergency medical incidents that occur when the level of medical or mental health services needed exceeds the licensure or certification of staff who are on-duty. The plans should include: on-site emergency first aid, basic life support and crisis intervention; emergency evacuation of an inmate from the facility, including security procedures, to ensure an immediate transfer when appropriate; on-call physicians, dentists and mental health professionals; predetermined back-up health care services when the emergency health facility is not located in a nearby community; and the identification of primary, secondary and tertiary acute care facilities.

The plan may additionally include, but is not limited to, these components:

- (a) First Aid and CPR trained custody staff shall respond to all emergencies immediately upon notification.
- (b) Contact information for emergency on-call health care services, both on- and off-site, is available and accessible for facility supervisors.
- (c) Qualified health care professionals shall respond by reporting to the area of the emergency with the necessary emergency equipment and supplies.
- (d) Emergency equipment and supplies are regularly maintained and accessible to the qualified health care professionals and health-trained custody staff.
- (e) Most inmates will be stabilized on-site and then transferred to an appropriate health care unit, if necessary.
- (f) Notification of on-call physicians and mental health staff will be done as soon as the situation reasonably allows.
- (g) The qualified health care professionals will determine if the inmate needs to be transported to a local emergency room for treatment.
- (h) When necessary, facility staff shall activate 9-1-1 and notify a supervisor as soon as reasonably practicable.

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- (i) The Corrections Chief and the Responsible Physician will coordinate on the notification of the inmate's next of kin in cases of serious illness and injury. Death notifications will be made in accordance with the Inmate Death - Clinical Care Review Policy.

The goal of any emergency medical response plan is to provide emergency medical care to those in need as expeditiously as possible. While facility size and patient proximity to the health care service will vary, staff training will emphasize responding to medical emergencies as soon as reasonably possible.

704.4 EMERGENCY PROCEDURES

The Corrections Chief or the authorized designee is responsible for ensuring the following information, equipment and personnel are available in the event an inmate requires emergency treatment:

- (a) A current list of names, addresses and telephone numbers of all persons and agencies to be notified in an emergency. The list should be available to all health care and custody staff at all times, and should be updated quarterly.
- (b) Emergency drugs, equipment and supplies should be readily available at all times and replenished after each use. An inventory control system should be in use to ensure the necessary supplies are present when needed and have not expired. This includes:
 - 1. Opioid overdose medication as provided by RCW 69.41.095.
 - 2. Epinephrine as provided by Washington law (RCW 70.54.440).
- (c) A physician, dentist and mental health professional should be available on-call 24 hours a day, seven days a week (this can include off-site health care services) and there should be a back-up health care services plan.
- (d) Ambulances should be accessed through the facility staff or by calling the appropriate emergency number. There should be a clear security plan in place for the transportation of inmates.
- (e) The Shift Supervisor will be contacted and informed of any emergency as soon as practicable.
- (f) All decisions regarding medical treatment and the need for emergency transportation are to be made by the qualified health care professionals or health-trained custody staff.
- (g) Whenever reasonably possible, the on-call health care service should be notified prior to transporting the inmate to the hospital or other emergency care. However, in the event of a life- or limb-threatening emergency, the inmate shall be sent to the hospital in the most expedient way possible, which may require notifying the specific health care service after the inmate has been transported.

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704.5 TRAINING

The Corrections Chief shall ensure that all qualified health care professionals are trained in the delivery of emergency medical services in the custody environment during new employee orientation.

The Corrections Chief or the authorized designee shall ensure that all facility staff members who have contact with inmates receive first-aid and basic life support training during new employee orientation, and that appropriate refresher training is conducted for the facility and qualified health care professionals. Training should include, but not be limited to:

- (a) The location of all emergency medical equipment and medications, and the proper use of the equipment, such as automated external defibrillators (AED).
- (b) How to properly summon internal and external emergency services.
- (c) Recognition of basic life support signs and symptoms, and the actions required in emergency situations.
- (d) Administration of basic first aid.
- (e) Certification in CPR in accordance with the recommendations of the certifying health organization.
- (f) Recognition of the signs and symptoms of mental illness, violent behavior and acute chemical intoxication and withdrawal.
- (g) Procedures for inmate transfers to appropriate medical facilities or health care service.
- (h) Suicide recognition, prevention and intervention techniques.

All records of the training provided, testing procedures and the results, and certificates achieved shall be maintained in each qualified health care professional's training file in accordance with established records retention schedules. The Responsible Physician should be bound by similar requirements in the contractual language between the Office and the vendor.

704.6 AUTOMATED EXTERNAL DEFIBRILLATORS

The Responsible Physician or the authorized designee is responsible for ensuring that an AED is available in the facility and that all staff members are trained in its use. The AEDs shall be inspected and tested at a frequency consistent with the manufacturer's recommendations to ensure functionality.

704.7 FIRST-AID KITS

The Responsible Physician or the authorized designee is responsible for determining the contents, number, location and procedures for monthly inspections of all first-aid kits in the facility. The Responsible Physician shall also ensure that:

- (a) The contents of each first-aid kit are:
 - 1. Appropriate for its location and approved by the Responsible Physician.
 - 2. Arranged for quick use.

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3. Documented on the outside cover.
4. Inventoried every month.
5. Secured with a plastic tamper-proof seal.
 - (a) Once the seal has been broken, the kit should be taken to the medical unit so the contents can be inventoried and restocked.
 - (b) Written protocols and training materials are developed for the use of medical supplies and equipment by health-trained custody staff.
 - (c) Inspections and testing of supplies and equipment are documented and maintained in accordance with established records retention schedules.

Health Care for Pregnant Inmates

705.1 PURPOSE AND SCOPE

The purpose of this policy is to establish prenatal and postpartum health care services for inmates who are pregnant. Services may include assistance recovering from the effects of potentially unhealthy lifestyles, which could include tobacco use, alcohol and drug abuse or addiction, and a lack of previous adequate medical care. Because of unhealthy lifestyle choices prior to incarceration, many inmate pregnancies are classified as high risk. This policy is intended to protect the health of the pregnant inmate and her fetus.

705.2 POLICY

It is the policy of this office that a qualified health care professional should provide comprehensive prenatal and postpartum care for all pregnant inmates during their incarceration, which includes but is not limited to the following:

- Pregnancy testing
- Prenatal care, both routine and high-risk if needed
- Management of drug- or alcohol-addicted pregnant inmates
- Comprehensive counseling and assistance services
- Nutrition modification for term of pregnancy and lactation
- Birthing in an appropriate setting
- Postpartum care
- Family planning education and services
- Access to privately funded pregnancy alternative options

A qualified health care professional shall provide counseling and information to pregnant inmates regarding planning for their unborn child.

705.3 BOOKING - PREGNANCY SCREENING

When booking a female inmate, the following steps shall be taken:

- (a) All females shall be asked if they are pregnant. If the inmate states she is pregnant, a confirming urine test should be performed within 48 hours and documented in the medical record.
- (b) Pregnant inmates who are under the influence of or withdrawing from alcohol or other substances should be referred to a nurse, if available, or other available resource.
- (c) The Responsible Physician, in collaboration with facility staff, shall ensure the appropriate clinic visits are scheduled.
- (d) A medical record should be opened with a notation indicating pregnancy.

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- (e) The inmate should be interviewed by a qualified health care professional for the following information, which should be written in the medical record:
 - 1. Last menstrual period (LMP)
 - 2. Estimated date of conception (EDC)
 - 3. Estimated due date (40 weeks from EDC)
 - 4. Number of pregnancies (Gravidity)
 - 5. Number of live births (Parity)
 - 6. Therapeutic abortions (TAB)
 - 7. Spontaneous abortions (SAB), aka miscarriages
 - 8. Prenatal care history
 - 9. Current medications
 - 10. Any current adverse symptoms: vaginal bleeding or discharge, abdominal cramping or pain (if yes, notify on-site or on-call physician)
 - 11. High-risk factors if known: drug or alcohol use/abuse, smoking, previous pregnancy problems, other medical problems (cardiac, seizures, diabetes/DM, hypertension/HTN)
 - 12. If recent heroin or methadone use is identified, notify the on-site or on-call physician for orders.
- (f) Each pregnant inmate should have:
 - 1. A completed medical recommendation form for a low bunk assignment, in a lower tier, with no waist chains, as appropriate.
 - 2. A completed special diet form ordering a pregnant diet.
 - 3. Prenatal vitamins prescribed at one per day for the duration of the pregnancy.
 - 4. An appointment at the next available obstetric clinic if the inmate is 10 or more weeks gestation.

705.4 HOUSING

Inmates who are known to be pregnant may be housed in any unit appropriate for their classification, with the following exceptions:

- (a) All pregnant inmates identified at intake or the obstetric clinic to be high-risk or who are in their last trimester of pregnancy shall be housed in the medical unit.
- (b) Housing in the medical unit shall be by order of an obstetric specialist or the Responsible Physician.

705.5 COUNSELING AND TREATMENT

The Office will provide all necessary counseling and treatment to pregnant inmates to ensure they are receiving the proper care. To accomplish this, the following shall occur:

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Health Care for Pregnant Inmates

- (a) The directions of the obstetric specialist shall be followed throughout the pregnancy and postnatal period. No non-medical staff has the unilateral authority to change or overrule an order or care recommendation made by the Responsible Physician. The Corrections Chief and Responsible Physician shall develop a process by which perceived conflicts between medical orders/recommendations and safety and security interests of the correctional facility can be discussed and resolved. Ultimately, the correctional facility must provide adequate treatment for an inmate's medical needs.
- (b) The Responsible Physician shall be consulted immediately if a patient is under 10 weeks gestation and has medical concerns.
- (c) Any pregnant inmate with medical problems that occur between scheduled obstetric appointments shall be seen by a qualified health care professional. If the qualified health care professional assesses the problem as urgent and a physician is not available on-site, the inmate shall be sent to the hospital for evaluation.
- (d) The inmate shall be advised to notify health-trained staff immediately of the following:
 - 1. Vaginal bleeding
 - 2. Acute, persistent abdominal or pelvic pain and/or severe cramping
 - 3. Leaking fluid
 - 4. Decreased or no fetal movement
 - 5. Headache or blurred vision
 - 6. Rapid weight gain with swelling (edema)
 - 7. Abnormal vaginal discharge
 - 8. Symptoms of a urinary tract infection (UTI)
 - 9. Fever
- (e) Postpartum examinations and additional appointments shall be scheduled by the obstetric clinic as needed.
- (f) Upon request of the inmate, reasonable efforts should be made to provide midwifery or doula services to inmates who are pregnant or who have given birth within the last six weeks (RCW 70.48.135).

705.6 RESTRAINTS

Inmates who are known to be pregnant or who are in labor shall not be placed in restraints except as provided in the Use of Restraints Policy.

705.6.1 PRESENCE DURING LABOR AND DELIVERY

Non-medical staff are not permitted in the room during labor or childbirth unless requested by medical personnel. Should medical personnel request the presence of a member of the facility, a female member should respond, if practicable (RCW 70.48.500(4)).

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Health Care for Pregnant Inmates

705.6.2 NOTICE REGARDING RESTRAINTS

The Corrections Chief or the authorized designee should ensure notices are posted regarding the use of restraints on inmates who are pregnant, in labor, or in postpartum recovery in locations where medical care is provided within the facility and provide notice of the requirements to appropriate staff. Appropriate staff includes all medical staff, staff who are involved in the transportation of pregnant inmates, and other staff designated by the Corrections Chief (RCW 70.48.501).

705.7 ABORTIONS

Inmates who wish to terminate their pregnancy shall be referred to outside counseling services for further information regarding available options. The Office shall not impede the woman's access to abortion counseling or services and shall provide necessary transportation and supervision to such services. Any financial obligations will be the responsibility of the inmate. These rights will be posted in all areas that house female inmates.

705.7.1 STAFF INVOLVEMENT

Staff members who object to facilitating an inmate's elective abortion (including arranging, transporting, security) should not be required to perform such duties.

705.8 PRESENCE DURING LABOR AND DELIVERY

Members are not permitted in the room during labor or childbirth unless requested by medical personnel. Should medical personnel request the presence of a member of the facility, a female member should respond, if practicable (RCW 70.48.500(4)).

Inmate Medical Fees

706.1 PURPOSE AND SCOPE

The purpose of this policy is to provide facility staff and qualified health care professionals with the information necessary to educate newly processed inmates on the procedures and their responsibilities for inmate medical fees at the time of intake.

706.2 POLICY

It is the policy of this office that all individuals booked into and held at the facility shall be informed of the guidelines associated with inmate medical fees. All inmates will be advised of the guidelines in writing during the orientation. This information will be conveyed in a language that is easily understood by the inmate.

There are no fees for medical, mental health, or dental services provided inside the jail facility.

Inmates are responsible for any off-site medical care. These will be billed to an Inmates account and collected at 40% initially and at 40% of any future deposits to the account. 100% of funds in an Inmates account is collected at the time the outside medical services are charged to the inmate and 100% of funds in an inmates account, at release, will be collected and paid toward any debts on their account. Debts will remain on the account after release and if re-incarcerated 40% will again be collected toward debt with each deposit and 100% will be collected at release.

It is the policy of this office that necessary medical, mental health or dental services will not be denied or delayed because of disputes over the cost of medical care, the inability to pay or a determination of financial responsibility (RCW 70.48.130).

Any incident of an inmate refusing medical treatment or causing a disruption in the delivery of health care services shall be documented in an incident report. The original incident report shall be forwarded to the Responsible Physician and a copy sent to the Corrections Chief or designee.

706.3 INMATE MEDICAL FEE GUIDELINES

An inmate may request to accounting, in writing, 3 years after date of service, to have any remaining amounts owed, removed from their account.

706.4 FEE APPEAL PROCESS

Inmates charged for health services shall be permitted to challenge the fee in accordance with the Inmate Grievance Policy.

Health Authority

707.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the responsibility of the health authority as arranging for all levels of health services, assuring the quality of all health services, identifying lines of medical authority for the inmate health program and assuring that inmates have access to all health services.

The policy also establishes properly monitored processes, policies, procedures and mechanisms to ensure that the contracted scope of services is adequately and efficiently delivered.

The health authority is defined as the Responsible Physician, health services administrator or health agency responsible for providing all health care services or coordinating the delivery of all health care services (see the Health Care Administrative Meetings and Reports Policy).

707.2 POLICY

The health authority is responsible and accountable for all levels of health care, and has the final authority regarding clinical issues within this correctional facility. The health authority is responsible for establishing, implementing and annually reviewing/revising policies for all clinical aspects of the health care program and for monitoring the appropriateness, timeliness and responsiveness of care and treatment. The health authority also approves all medical decisions and protocols.

707.3 SELECTION PROCESS

The Sheriff or the authorized designee shall select a health authority using an existing office procurement or selection process. The individual or organization selected shall be designated as the health authority for inmate health care on behalf of the facility.

Aside from any monetary or term considerations, the contract between the Office and the selected individual or organization shall minimally include:

- (a) Language establishing the scope of services being contracted and the type of health care service needed.
- (b) Job descriptions, minimum qualifications, and performance expectations for contract personnel.
- (c) Language requiring the contractor to develop appropriate measures and review processes for assessing the quality, effectiveness, and timeliness of the services provided, and periodically reporting those findings to the facility.
- (d) Identification of a Responsible Physician, who shall serve as the medical authority on treatment matters requiring medical expertise and judgment.
- (e) Language regarding the minimum frequency that the health authority shall be present at the facility.

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- (f) The roles and responsibilities of staff in ensuring that the contractor may adequately deliver services in a safe and secure environment.
- (g) A written plan for coordinating medical care from multiple health care services.
 - 1. The plan should include procedures for making inmate medical records available to a managed health care system as permitted by RCW 70.48.100.
- (h) A written plan for the collection and maintenance of inmate health records that is compliant with the Health Insurance Portability and Accountability Act (HIPAA).
- (i) Identification of a dispute resolution process for the contracted parties and for inmates who may be questioning treatment plans.
- (j) Language and a plan addressing issues of liability and indemnification for issues related to inmate health care.

The health authority shall be authorized and responsible for making decisions about the deployment of health resources and the day-to-day operation of the health services program. If the health authority is other than a physician, any final clinical judgments shall rest with a single, designated, Responsible Physician.

The health authority or the authorized designee will meet at least monthly with custody representatives to discuss the health care program and any issues that require correction or adjustment.

Security regulations are applicable to facility staff and health care personnel.

707.4 PROVISION OF HEALTH CARE

The health authority is responsible for arranging the availability of health care services. The qualified health care professionals should determine what medical services are needed on a case-by-case basis. The Corrections Chief shall provide the administrative support for making the health care services available to inmates. Clinical decisions are the sole province of the qualified health care professionals and should not be countermanded by non-health care professionals.

If routine health services are provided by medical personnel outside this facility, all office policies regarding treatment, transfer, transportation or referral of emergencies shall be followed.

The health authority is responsible for ensuring that the health services manual complies with all applicable state and federal law and that a review is conducted annually. An annual audit of the quality and adequacy of health care services should be done, with corrective action taken when deficiencies are identified.

Health Appraisals

708.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the process for conducting health appraisals on all inmates following their arrival at this facility and for the continuity of care for inmates who remain in custody for extended periods. Further, it is to ensure the inmate's health care needs are met and that health care started at one facility continues as needed.

708.2 POLICY

It is the policy of this office that all inmates will receive a comprehensive health appraisal within 14 days of incarceration unless there is documented evidence that the inmate has received a health appraisal within the previous 90 days. In addition to the initial health appraisal, the inmate should have an annual evaluation to reassess his/her health status and to provide access to preventive medicine through education and lifestyle programs.

708.3 INITIAL HEALTH APPRAISAL

- (a) Qualified health care professionals shall have access to the daily inmate roster. From this, they can determine who needs a health appraisal and hands-on physical evaluation. The health appraisal should include:
 - 1. A review of earlier medical screening information.
 - 2. Administration of a skin test for tuberculosis (TB).
 - 3. Recording of height and weight.
 - 4. Recording of vital signs (blood pressure, pulse, respiration rate and temperature).
 - 5. Ordering other tests or examinations as appropriate.
 - 6. The collection of any additional data needed to complete medical, dental, psychiatric and immunization histories
- (b) Inmates shall be scheduled for a hands-on physical evaluation by a qualified health care professional (physician, mid-level practitioner or registered nurse) within 48 hours of arrival at the correctional facility. The evaluation shall include:
 - 1. Review of the medical screening.
 - 2. Review of the health history questionnaire.
 - 3. Review of all vital signs and TB skin test results.
 - 4. A medical examination, including a review of mental and dental status.
 - 5. Initiation of treatment or therapy, as appropriate.
 - 6. Development and implementation of a treatment plan, including recommendations for housing, job assignment and program participation.

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Health Appraisals

The Responsible Physician shall review and authorize all health appraisals within 72 hours.

708.3.1 PRISON RAPE ELIMINATION ACT (PREA) SCREENING FOLLOW-UP

Inmates who have an identified history of sexual victimization shall be offered a follow-up meeting with a qualified health care professional or mental health provider within 14 days of intake screening (28 CFR 115.81).

708.3.2 OPIOID USE DISORDER

Individuals who are experiencing an opioid use disorder will be provided with opioid treatment medications pursuant to the procedures developed by the health authority and in compliance with the requirements of RCW 71.24.599.

Prior to the release of the inmate receiving opioid treatment medication, the health authority will connect the inmate to an appropriate provider or treatment site in the geographic region where the inmate will reside. If a connection is not possible, the health authority should document the efforts made in the inmate's file (RCW 71.24.599).

708.4 ANNUAL HEALTH EXAMINATIONS

The Responsible Physician will determine the criteria for periodic health examinations for inmates. Inmates should be scheduled for an annual health examination within 14 days of the inmate's annual incarceration anniversary. The examination should include:

- A review of current vital signs and weight.
- A TB skin test and review of the results.
- An evaluation of any health-related issues arising since the last health evaluation.
- Initiation of treatment, as appropriate.
- Any updates to the inmate treatment plan.

All inmates should also be examined prior to release to protect both the inmate and the public.

Healthy Lifestyle Promotion

709.1 PURPOSE AND SCOPE

The purpose of this policy is to affirm the Office's commitment to promote healthy lifestyle choices by inmates by providing health education and inmate self-care learning opportunities that include classes, audio and video presentations and brochures and pamphlets.

709.2 POLICY

This office will encourage inmates to maintain a healthy lifestyle by providing health education and wellness information.

709.3 HEALTH CARE ENCOUNTERS

During health care encounters, the qualified health care professionals should instruct inmates at the time service is rendered on how to avoid preventable diseases, such as athlete's foot, flu and the common cold, tooth decay and sexually transmitted diseases. Such instruction should be documented in the health record. Documentation should include the topics discussed, the written materials provided, if any, and that the inmate acknowledged an understanding of the information.

Informative brochures from various health organizations should also be available to inmates in the medical unit.

Following are examples of appropriate topics for inmate education:

- Access to health care services
- Dangers of self-medication
- Personal hygiene and dental care
- Prevention of communicable diseases
- Education, smoking cessation
- Family planning
- Self-care for chronic conditions
- Self-examination for health concerns
- The benefits of physical fitness
- Chronic diseases and disabilities
- Counseling in preparation for release
- Domestic violence
- Medications
- Nutrition

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- Sexually transmitted diseases
- Substance abuse
- Tuberculosis

709.4 GENERAL HEALTH PROMOTION INFORMATION

Whenever possible, written materials, audio and video presentations should be made available to inmates for educational purposes. These materials are often available in bulk quantity through the public health department and other community-based organizations.

All items intended for distribution to the inmate population shall be approved by the Corrections Chief to avoid any conflict with rules regarding contraband in the facility.

Classes should also be conducted to inform the inmate on various healthy lifestyles. Class schedules should be posted in advance, curriculum and lesson plans developed and attendance rosters maintained.

All documentation regarding health education and inmate self-care should be retained in inmate medical files in accordance with established records retention schedules. Statistics on program offerings and attendance may be used to determine program effectiveness and interest.

Transfer Screening

710.1 PURPOSE AND SCOPE

This policy recognizes that inmates are frequently transferred within the correctional authority's system and to facilities outside the system and that a summary of the current health care plan is critical to ensure continuity of care and to avoid unnecessary diagnostics.

710.2 POLICY

It is the policy of this office that the medical needs of an inmate will be clearly communicated to the receiving facility, including the ongoing treatment plan, scheduled surgeries and outside appointments.

Inmates who are transferred to other correctional or health care facilities shall be sent with a discharge summary that includes information about the inmate's medical and mental health condition, the current treatment plan and any medications, if needed.

710.3 TRANSFERS

Any inmate being transferred to another correctional or health care facility should be medically screened as described below.

The medical screening should include:

- (a) A determination of whether the inmate is being treated for a medical, mental health or dental problem.
- (b) A determination of whether the inmate has any apparent, current medical, mental health or dental needs or complaints.
- (c) What medication, if any, the inmate is presently prescribed.
- (d) Whether the inmate has any evidence of abuse or trauma.
- (e) Whether the inmate has any physical deformities or special daily living assistance needs.
- (f) The inmate's classification and clearance status (i.e., general population, segregation).
- (g) Whether the inmate has any pending follow-up appointments or requirements.

Completed discharge summaries shall accompany inmates being transferred to another office's jurisdiction to ensure that the receiving health care service can assume and continue necessary care. A release of information authorization is not required.

If the receiving facility requests a copy of the medical record, it will be supplied within five working days.

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The discharge summary and any related medical records being transferred shall be placed in a file or envelope that maintains the patient's confidentiality. The transporting personnel shall be provided written separate instructions regarding medication or health interventions, including necessary precautions that are required en route. The transporting personnel shall also document on the transfer log the date, time and name of the person receiving the inmate and the medical records.

710.3.1 EXTENDED TRANSPORTATION OF INMATES

When an inmate will be in transfer status for several days and housed temporarily at various custody facilities along the way, a transfer packet shall be prepared by the qualified health care professional in a form that will advise the temporary housing facilities of any medical needs of the inmate. When medically appropriate, a small supply of medication should be provided with the transfer packet so it will be available to the temporary housing facility as needed.

710.4 RECEIVING TRANSFERRED INMATES

Where an inmate being transferred to this facility arrives without a medical transfer packet, the inmate should, within 24 hours, be given a health care appraisal comparable to the 14-day appraisal provided to newly admitted inmates. The medical department of the sending facility should be promptly contacted to determine if the transferred inmate has any medical needs that require immediate attention or any scheduled surgeries or appointments with community health care services. The receiving facility should arrange for the delivery of a more detailed review of the inmate's medical needs.

Medical Screening

711.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a medical screening process for newly booked inmates so that medical, mental health and dental issues are properly identified and addressed, and to obtain a medical clearance when necessary.

711.2 POLICY

It is the policy of this office that a medical screening be performed on all inmates upon arrival at the intake area to ensure that existing, emergent and urgent health care, dental or mental health needs are identified, risks are assessed and inmates with contagious and communicable diseases are properly classified and housed for their health and the health of the general population.

711.3 ELEMENTS OF MEDICAL SCREENING

The medical screening shall be performed by health services personnel. The Responsible Physician, in cooperation with the Corrections Chief, shall establish protocols for use by health-trained correctional staff during the medical screening. All completed medical screenings should be forwarded to the Responsible Physician. A review of any positive finding shall be performed by a qualified health care professional.

Regardless of training, no inmate should be allowed to conduct health care evaluations or provide treatment to any other inmate.

All inmates shall complete a medical screening as part of the booking process. If an arrestee refuses to cooperate with the medical screening, the screener will complete as much of the health assessment as reasonably possible and the arrestee will be closely observed until he/she cooperates with the remainder of the screening process.

The Responsible Physician should work cooperatively with the Corrections Chief to develop the medical screening forms, which should be applicable for general health, mental health and suicide screening purposes. The forms should be completed no later than 24 hours after the arrival of an inmate but prior to an inmate being housed in the general population. All medical screening forms shall be forwarded to the medical unit, and the qualified health care professionals shall be alerted to those that need priority attention.

711.3.1 MEDICAL SCREENING INQUIRY

The medical screening inquiry should include a review of the inmate's prior correctional facility medical record, if any, and document the following:

- History of any infectious or communicable diseases that are considered serious in nature; current symptoms, treatment or medications; chronic illness or health issues, including communicable diseases or and any special health requirements and/or dietary needs

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- Acute dental problems
- Past and recent serious communicable disease symptoms (e.g., chronic cough, coughing up bloody sputum, lethargy, weakness, weight loss, loss of appetite, fever, night sweats)
- Mental illness, including psychiatric hospitalizations within the last three months
- Gender issues
- History of or current suicidal ideation
- Acute allergies
- History of or current prescription or illegal drug use, including the time of last use
- History or current symptoms of substance abuse withdrawal
- Current, recent or suspected pregnancy; any history of gynecological problems and present use and method of birth control
- Appearance or history of developmental disability, body deformities or other physical abnormalities
- Other health issues as identified by the Responsible Physician

The medical screening shall also seek general information about the inmate's ability to pay for medical care, including insurance or other medical benefits or resources to which an inmate is entitled (RCW 70.48.130).

Qualified health care professionals should assist in developing specific mental health medical screening questions and should provide training in analyzing inmate responses. The Responsible Physician should establish the role of the qualified health care professional in the medical screening process.

Should the medical screening identify a need for a more comprehensive medical assessment of the inmate, a qualified health care professional should initiate appropriate follow-up action, which may include transporting the inmate to an off-site medical facility.

711.3.2 MEDICAL SCREENING OBSERVATION

The health professional personnel completing the medical screening shall document the following observations:

- (a) Appearance (e.g., sweating, tremors, anxious, disheveled)
- (b) Behavior (e.g., disorderly, appropriate, insensible)
- (c) State of consciousness (AVPU):
 1. Alert - spontaneously responsive
 2. Verbal - requires verbal stimulation to respond
 3. Pain - requires painful stimulation to respond

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4. Unresponsive - does not respond
- (d) Ease of movement (e.g., body deformities, gait)
- (e) Breathing (e.g., persistent cough, hyperventilation)
- (f) Skin (e.g., lesions, jaundice, rashes, infestations, bruises, scars, recent tattoos, needle marks or other indications of drug abuse)
- (g) Any other observable health symptoms

The Corrections Chief and the Responsible Physician should develop a procedure through which it can be reliably determined what prescription medications the inmate is taking and the medical urgency for continuing those medications without interruption.

711.3.3 DOCUMENTATION

Written documentation of the medical screening should include the name of the screener, the date and time and the following information:

- Immediate or scheduled referral to a medical, dental or mental health professional
- Guidance regarding housing placement, including disciplinary detention if necessary
- Guidance regarding activity limitations and work assignment
- The inmate's responses to questions asked by the interviewer
- Other individualized observations and recommendations

The initial medical screening should become part of the inmate's medical record and should be retained in accordance with established records retention schedules.

711.4 MEDICAL SCREENING DISPOSITIONS

Persons who are brought to the facility who are obviously in need of immediate medical attention shall be referred to a medical facility room for a medical clearance. Medical conditions that require a medical clearance include, but are not limited to, the following:

- Unconsciousness
- Uncontrolled bleeding
- Significant injuries from a motor vehicle accident
- Significant injuries from an altercation
- Significant injuries from handcuffs or other restraint devices
- Knife wounds, gunshot wounds, or lacerations
- Exposure to pepper spray, electronic control device (ECD) deployment or blunt force trauma during arrest

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- Intoxication to a degree that the individual cannot speak coherently or stand or walk unaided
- Recent drug overdose
- Suspected or known complications of pregnancy
- Active seizures
- Suspected or know complications of diabetes
- Exhibiting behavior indicating a potential danger to themselves or others
- Active tuberculosis or other serious contagious diseases
- Actively suicidal
- Any other medical condition, which, in the opinion of the booking personnel, should be urgently referred for evaluation by medically trained personnel

Inmates with these medical conditions are not suitable for admission to the facility until medically cleared by a qualified health care professional. This office requires medical clearance from an outside entity when such inmates are identified.

Medical clearance documentation shall include the medical diagnosis, treatment received at the emergency medical facility, any medications prescribed, any ongoing medical requirements and any follow-up medical care that may be indicated before the arrestee is accepted for booking.

The Corrections Chief is responsible for notifying local police agencies and medical facilities of the correctional facility admission refusal policy and the required clearance documentation.

Based upon the information obtained during the screening process, the classification disposition of the inmate shall be one of the following:

- General population, or other appropriate cell assignment
- General population, or other appropriate cell assignment and timely referral to appropriate health care services
- Immediate referral to health care services prior to housing

711.5 HEALTH APPRAISAL

Generally, a comprehensive health appraisal should occur within 14 days of booking (see Health Appraisal Policy). However, when it is appropriate and based on an inmate's health condition, an early health appraisal should be recommended. An inmate may also be cleared for housing in general population with a prompt referral to the appropriate health care services when it is in accordance with the inmate's overall classification. Upon the identification of a mentally disordered inmate, a physician's opinion will be secured within 24 hours, or next sick call, whichever is earliest.

Mental Health Services

712.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure that all inmates have access to mental health services and that inmates identified as needing these services are referred appropriately.

712.1.1 DEFINITION

Definitions related to this policy include:

Mental health services - A variety of psycho-social and pharmacological therapies, either individual or group, including biological, psychological and social therapies to alleviate symptoms, attain appropriate functioning and prevent relapse.

712.2 POLICY

It is the policy of this office that a range of mental health services shall be available for any inmate who requires them.

712.3 MENTAL HEALTH SERVICES

The Corrections Chief should collaborate with the local public and private organizations that offer mental health services, treatment and care to those inmates in need of such services.

Such services may include:

- Assistance with mental health screening, diagnosis and care, including intake screening.
- Referral to services for the detection, diagnosis and treatment of mental illness and follow-up care after release from custody.
- Crisis intervention and the management of psychiatric episodes.
- Stabilization of the mentally ill and the prevention of psychiatric deterioration in the correctional setting.
- Psychotropic medication management and psychotherapy.
- Suicide prevention.
- Segregation rounds by qualified health care professionals.
- Treatment of severe adjustment disorders.
- Referral, transportation and admission to licensed mental health facilities for inmates whose psychiatric needs exceed the treatment or housing capability of the facility.
- Obtaining and documenting informed consent.
- Release planning services.

Mental Health Services

712.4 BASIC MENTAL HEALTH SERVICES

Inmates may be referred to qualified health care professionals through a variety of methods, which include the medical screening process, the mental health appraisal process and self-referral or staff referral. Qualified health care professionals should respond to all referrals in a timely manner and initiate the appropriate treatment services.

- (a) If the inmate has received previous mental health treatment, the inmate should be asked to complete a release of information form so his/her treatment records can be obtained.
- (b) Inmates who have been determined to be in need of ongoing mental health services after their release from this facility should be provided with information about community mental health treatment resources. Arrangements for more comprehensive mental health care may be made, if appropriate.
- (c) Inmates who are identified as being developmentally disabled should be evaluated for special housing needs. The qualified health care professional should work in cooperation with classification personnel to establish the best reasonably available housing option.
- (d) Inmates who are suspected or known to be developmentally disabled should receive a mental health appraisal by the qualified health care professional or health-trained deputies as soon as reasonably practicable but no later than 24 hours after booking. Inmates who are developmentally disabled should be referred, where appropriate and available, for placement in non-correctional facilities or in units specifically designated for housing the developmentally disabled.
- (e) Inmates enrolled in mental health treatment, including psychiatric medication management, should be provided information regarding the risks and benefits to treatment. Informed consent documents should be signed by the inmate to establish his/her consent to treatment. The signed forms should be placed in the inmate's health record and retained in accordance with established records retention schedules.
- (f) A treatment plan should be established for all inmates enrolled in mental health services.
 - 1. Psychiatric and special needs treatment plans shall be reviewed every 180 days, at a minimum. Inmates taking psychotropic medication should be seen by a psychiatrist at least every 90 days. Inmates classified as requiring mental health special needs should be seen at least monthly by a qualified health care professional.
 - 2. Inmates enrolled in other ongoing forms of mental health treatment should have treatment plan updates completed every six months, at a minimum.
 - 3. Inmates who present to the qualified health care professional as having notable difficulty adjusting to the correctional environment, but who are not diagnosed

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with a serious mental illness, should be evaluated for the appropriateness of mental health treatment. Consideration should be given to the qualified health care professional and the facility staff working together to address the issues that may be affecting the inmate's ability to adjust to incarceration.

- (g) The qualified health care professional should utilize a site-specific suicide prevention program to ensure the safety of inmates who present with a risk of self-harm.
 - 1. Qualified health care professionals should be assigned to daily rounds in the segregation unit to determine the mental health status of inmates housed there.
 - 2. Segregated inmates may be referred by the correctional facility staff to qualified health care professionals for follow-up if concerns arise regarding their ability to function in disciplinary detention.
- (h) If the qualified health care professional has concerns about the level of mental health services that are required to manage an inmate housed in the facility, the health authority shall be notified and the Responsible Physician shall be the decision-maker regarding the health care needs of the inmate.
 - 1. The Responsible Physician may consult with a psychiatrist, specialist or other health care service in determining whether the inmate should be transferred to a facility that is better equipped to handle the inmate's psychiatric needs.
 - 2. The Responsible Physician should notify the Corrections Chief of the request to transfer the inmate for medical treatment.
 - 3. The case review and disposition of the patient should be documented in the inmate's health record and retained in accordance with established records retention schedules.

Inmates determined to be in need of substance abuse treatment services should be informed of the facility programs available and shall be provided information about community substance abuse treatment resources.

712.5 COMPETENCY EVALUATIONS AND RESTORATION SERVICES

The Corrections Chief shall ensure competency evaluators have reasonable, timely, and appropriate access to inmates for the purpose of performing their evaluations (RCW 10.77.078).

If an offer of admission for competency evaluation or restoration services is received for an inmate, the Corrections Chief shall ensure the inmate is transported to a facility designated by the Washington Department of Social and Health Services within one day of receipt (RCW 10.77.078).

Mental Health Screening and Evaluation

713.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the process by which all inmates receive an initial mental health screening. The initial mental health screening takes place at the time of booking, and is for the safety of the inmate and the general population. It helps the staff to make appropriate classification and housing decisions and to ensure that the treatment and intervention needs of the inmate are met.

713.2 POLICY

It is the policy of this office that all individuals booked into the facility shall receive an initial mental health screening. A more comprehensive medical appraisal shall be conducted within the first 14 days of incarceration to confirm the initial findings and to ensure that, if needed, an appropriate treatment plan that meets the individual needs of the inmate is in place.

713.3 MENTAL HEALTH SCREENING

An initial medical screening shall be performed on inmates upon arrival at the facility. This is to identify whether mental health conditions exist that require immediate or ongoing intervention. The screening shall be performed prior to the inmate being placed in the general population and should include:

- (a) Inquiry into whether the inmate:
 - 1. Has a present suicidal ideation.
 - 2. Has a history of suicidal behavior.
 - 3. Is presently prescribed or is taking psychotropic medication.
 - 4. Has a current mental health complaint.
 - 5. Is being treated for mental health problems.
 - 6. Has a history of inpatient and outpatient psychiatric treatment.
 - 7. Has a history of treatment for substance abuse.
- (b) Observation of:
 - 1. General appearance and behavior.
 - 2. Evidence of abuse and/or trauma.
 - 3. Current symptoms of psychosis, depression, anxiety and/or aggression.
- (c) Disposition of the inmate:
 - 1. Cleared for general population
 - 2. Cleared for general population with appropriate referral to mental health services
 - 3. Referral to appropriate mental health care service for emergency treatment

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This information shall be recorded on the medical screening form. It will become part of the inmate's health record and be retained in accordance with established records retention schedules.

713.4 MENTAL HEALTH APPRAISAL

All inmates shall receive a mental health appraisal within 14 days of incarceration to the facility. This appraisal is not required if there is documented evidence of a mental health appraisal having been performed in the previous 90 days. Mental health appraisals include:

- Assessment of the inmate's current mental status and condition
- Assessment of current suicidal potential and inmate-specific circumstances (e.g., holds a position of high regard in the community, charged with a crime of notoriety) that increase suicide potential
- Indicators of violence potential and inmate-specific circumstances that increase violence potential
- Review of inpatient and outpatient psychiatric treatment, if available
- Any history of treatment with psychotropic medication, if applicable
- Any history of psychotherapy, psycho-educational groups and classes or support groups
- Any history of drug and alcohol abuse or treatment
- An educational history assessment
- Any history of sexual abuse victimization or predatory behavior
- A current assessment of drug and alcohol abuse and/or addiction
- Review of additional assessment tools, as indicated
- Referral to treatment options, as indicated
- Development of a treatment plan, including recommendations concerning housing, job assignment and program participation

713.5 MENTAL HEALTH REFERRALS

Inmates referred for mental health treatment should receive a comprehensive evaluation by a licensed mental health professional. The evaluation should be completed within 14 days of the referral request date and should include:

- Review of the mental health screening and appraisal data.
- Direct observations of behavior.

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- Collection and review of additional data from individual diagnostic interviews and tests assessing personality, intellect and coping abilities.
- Compilation of the individual's mental health history.
- Development of an overall treatment/management plan with an appropriate referral to include transfer to a mental health facility for inmates whose psychiatric needs exceed the treatment capability of the facility.

Comprehensive individual psychological evaluations should be performed when there is a reasonable expectation that such evaluation will serve a therapeutic or dispositional function that is useful to the overall interests of the inmate.

Special Needs Medical Treatment Plan

714.1 PURPOSE AND SCOPE

This purpose of this policy is the proper treatment and management of inmates with chronic diseases and special needs. This is accomplished by utilizing nationally recognized, generally accepted clinical guidelines and establishing communication between health care providers and custodial personnel.

714.2 POLICY

It is the policy of this office that all individuals identified as having chronic diseases or special needs are enrolled in a chronic disease program to decrease the frequency and severity of the symptoms, prevent disease progression and complication, and foster improved function.

When a qualified health care professional recognizes that an inmate requires accommodation due to a special need, correctional personnel should be notified in writing. Consultation between the qualified health care professional and custodial personnel should occur regarding the condition and capabilities of inmates with known special needs prior to a housing, work or program assignment, transfer to another facility or the imposition of disciplinary action.

Qualified health care professionals shall furnish special needs information regarding inmates to custodial personnel in order for them to accurately classify and house inmates in the facility. It is the responsibility of the Corrections Chief or the authorized designee to ensure that inmates with special needs are receiving the proper care and that their needs are effectively communicated to custodial staff for appropriate accommodation.

714.3 CLINICAL PRACTICE GUIDELINES

The Responsible Physician or the authorized designee is responsible for establishing and annually reviewing clinical protocols to ensure consistency with the National Clinical Practice Guidelines.

The clinical protocols for the management of chronic disease and special needs include, but are not limited to:

- Asthma
- Communicable diseases
- Developmentally disabled inmates
- Diabetes
- Dialysis
- Frail or elderly inmates
- High blood cholesterol
- HIV

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- Hypertension
- Mental illness
- Mobility impairments
- Pregnancy
- Seizure disorder
- Suicidal ideation
- Terminally ill
- Tuberculosis

714.4 DOCUMENTATION

Documentation in an inmate's medical record should include information regarding the chronic disease protocols deployed, who is responsible for the various protocols, the extent to which the chronic disease protocols are being followed and should include, but not be limited to:

- The frequency of follow-up for medical evaluation.
- How the treatment plan was adjusted when clinically indicated.
- The type and frequency of diagnostic testing and prescribed therapeutic regimens.
- The prescribed instructions for diet, exercise, adaptation to the correctional environment and medication.
- Clinical justification of any deviation from the established protocol.

A master list of all chronic disease and special needs patients should be maintained by health care personnel for easy reference and follow-up.

714.5 CHRONIC CARE PROGRAM

- (a) Newly incarcerated inmates shall receive a medical screening. This screening includes the documentation of any acute or chronic health problems or injuries, special needs, and any medications or treatments the inmate is currently receiving.
 1. If the inmate has been incarcerated previously, his/her health records should be reviewed.
 2. A special needs communication form should be completed and sent to the classification unit, the Shift Supervisor and the housing officer to ensure the inmate is properly housed.
 3. Current medications being taken by the inmate should be verified and continued as deemed appropriate by the Responsible Physician.
 4. A health assessment shall be completed within 14 days of incarceration and a physical examination conducted within six months of incarceration.

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5. The status of a special needs inmate should be evaluated, at minimum, every 90 days to determine the need for the continued designation.
- (b) The Corrections Chief or the authorized designee and the Responsible Physician or the authorized designee should consult with one another prior to taking action regarding any special needs inmate with regard to housing, program or work assignments, disciplinary measures or transfers to other facilities.
 1. When immediate action is required and prior consultation is not reasonably practicable, that consultation should occur as soon as practicable but no later than 72 hours post-action.
- (c) Individual treatment plans are used to guide treatment for episodes of illness. The format for treatment planning may vary, but should include, at a minimum:
 1. The frequency of follow-up for medical evaluation and adjustment of treatment modality.
 2. The type and frequency of diagnostic testing and therapeutic regimens.
 3. When appropriate, instructions about diet, exercise, adaptation to the correctional environment and medication.
- (d) Reasonable effort should be made to obtain health information and records from previous health care services, with the consent of the inmate, when the inmate has a medical problem that was being treated prior to incarceration.
- (e) Upon transfer to another correctional facility, a summary of the inmate's current condition, medications and treatment plan will be forwarded to the receiving facility in a sealed envelope to maintain inmate privacy.
- (f) Requests for health information from community health care services must be submitted with the inmate's written consent. If the inmate does not consent, the community health care service may be advised that the person is an inmate and the health information may not be provided without the inmate's written consent.
- (g) When inmates are sent out of this facility for emergency or specialty treatment, written information regarding the inmate's current medical status and treatment should accompany the inmate. Upon return to the facility, treatment recommendations from outside health care services should be reviewed by the Responsible Physician or the authorized designee for any changes in the custodial environment or in-house treatment plan.
- (h) Inmates identified as developmentally disabled shall be considered for discharge planning services.
 1. The guardian or provider for the developmentally disabled will be contacted within 24 hours of incarceration of an inmate suspected to be developmentally disabled.
 2. Referrals will be made to the correctional facility's discharge planning specialist. If no such position exists, the need for transition planning should be noted on the treatment plan.

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- (i) With the inmate's written consent, the health services staff should:
 - 1. Share necessary information with outside health care services.
 - 2. Arrange for follow-up appointments.
 - 3. Arrange for transfer of health summaries and relevant parts of the health record to health care services or others assisting in planning or providing for services upon release.
- (j) Contacts with community providers should be documented via an administrative note in the patient's health record.
- (k) Patients with serious mental health issues, including those receiving psychotropic medication, will be informed about community options for continuing treatment and provided with follow-up appointments when possible.
- (l) Medications should be provided as appropriate.
- (m) The Responsible Physician is responsible for ensuring that local site-specific procedures facilitate discharge planning.

Communicable Diseases

715.1 PURPOSE AND SCOPE

This policy is intended to provide guidelines for facility staff to assist in minimizing the risk of contracting and/or spreading communicable diseases. The policy offers direction in achieving the following goals:

- (a) Managing the risks associated with bloodborne pathogens (BBP), aerosol transmissible diseases (ATD) and other potentially infectious substances.
- (b) Providing appropriate treatment for ill inmates while minimizing the risk of the spread of disease.
- (c) Making decisions concerning the selection, use, maintenance, limitations, storage and disposal of personal protective equipment (PPE).
- (d) Ensuring proper reporting to local, state and federal agencies.
- (e) Establishing procedures for the identification, education, immunization, prevention, surveillance, diagnosis, medical isolation (when indicated), treatment and follow-up care for new inmates, and for inmates or employees who have contracted a communicable disease from an ill inmate.
- (f) Providing appropriate treatment, counseling and confidentiality should an employee become exposed to a communicable disease.
- (g) Protecting the privacy rights of all personnel who may be exposed to or contract a communicable disease during the course of their duties.

715.1.1 DEFINITIONS

Definitions related to this policy include:

Aerosol transmissible disease (ATD) - A disease or pathogen for which droplet (whooping cough, influenza, streptococcus) or airborne (measles, chickenpox, tuberculosis) precautions are required.

Aerosol transmissible disease (ATD) exposure - Any event in which all of the following have occurred:

- An employee has been exposed to an individual who has or is suspected to have an ATD, or the employee is working in an area or with equipment that is reasonably expected to contain aerosol transmissible pathogens associated with an ATD.
- The exposure occurred without the benefit of applicable exposure controls required by this section.
- It reasonably appears from the circumstances of the exposure that transmission of disease is likely sufficient to require medical evaluation.

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Airborne precautions - These include the use of an Airborne Infection Isolation Room (AIIR) that meets the American Institute of Architects/Facility Guidelines Institute (AIA/FGI) standards for AIIRs, for infectious agents such as measles, chickenpox, and tuberculosis, in addition to medical personnel wearing masks or respirators.

Bloodborne pathogens (BBP) - Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV), hepatitis C virus (HCV) and human immunodeficiency virus (HIV).

Bloodborne pathogen exposure - Includes but is not limited to the contact of blood or other potentially infectious materials with the eyes, mouth, other mucous membranes, non-intact skin, needle sticks, human bites, cuts, abrasions, or any contact with blood or bodily fluids that is synonymous with BBP exposure as defined by the federal Centers for Disease Control and Prevention (CDC).

Ectoparasitic infections - Parasites that live on the skin, such as lice (pediculosis) and scabies (sarcoptic mange). Both infections are communicable and may lead to secondary infections.

HBV - Hepatitis B

HIV - Human Immunodeficiency Virus

Medical isolation - Housing in a separate room with a separate toilet, hand-washing facility, soap, and single-service towels, and with appropriate accommodations for showering.

NIOSH - National Institute for Occupational Safety and Health

Nosocomial - Acquired during hospitalization. Nosocomial infections are infections that present 48 to 72 hours after admission to a hospital.

OSHA - Occupational Health and Safety Administration

Personal protective equipment (PPE) - Respiratory equipment, garments, gloves, and other barrier materials designed to reduce employee exposure to hazards.

Source control measures - The use of procedures, engineering controls, and other devices or materials to minimize the spread of airborne particles and droplets from an individual who has or exhibits signs or symptoms of having an ATD.

Standard precautions - Infection control practices used to prevent the transmission of disease that can be acquired by contact with blood, bodily fluids, non-intact skin (including rashes), and mucous membranes. Applies to all inmates receiving care, regardless of diagnosis or presumed infection status.

Universal precautions - A set of precautions designed to prevent transmission of HIV, HBV and other BBP when providing first aid or health care.

715.2 POLICY

It is the policy of this office to maintain an effective program that focuses on the identification, education, immunization, prevention, surveillance, diagnosis, medical isolation (when indicated),

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treatment, follow-up and proper reporting to local, state and federal agencies of communicable diseases. The program is designed to ensure that a safe and healthy environment is created and maintained for all occupants of the facility.

715.2.1 EXPOSURE CONTROL OFFICER

The Corrections Chief shall designate an Exposure Control Officer (ECO) who shall be responsible for:

- (a) Establishing written procedures and a training program related to BBPs.
- (b) Establishing written procedures and a training program related to ATDs.
- (c) Working with the Corrections Chief to develop and administer any additional related policies and practices necessary to support the effective implementation of an Exposure Control Plan.
- (d) Acting as a liaison during OSHA inspections and conducting program audits to maintain a current Exposure Control Plan.
- (e) Maintaining a current list of facility staff requiring training, developing and implementing a training program, maintaining class rosters and quizzes, and periodically reviewing the training program.
- (f) Reviewing and updating the Exposure Control Plan annually, on or before January 1 of each year.

Supervisors are responsible for exposure control in their respective areas. They shall work directly with the ECO and the affected employees to ensure that the proper procedures are followed.

715.2.2 PROCEDURES

The ECO shall be responsible for establishing, implementing and maintaining effective written procedures for the following:

- (a) Incorporating the recommendations contained in the CDC's "Respiratory Hygiene/ Cough Etiquette in Healthcare Settings."
- (b) Screening and referring cases and suspected cases of ATD to appropriate facilities within five hours of identification.
- (c) Creating a multidisciplinary team, including the Responsible Physician, and security and administrative representatives, who will meet at least quarterly to review and discuss communicable disease issues and activities. The ECO shall retain minutes of these meetings in accordance with established records retention schedules. The ECO also shall coordinate with the local public health entity on appropriate policy and procedure.
- (d) Conducting an assessment on the incidence and prevalence of tuberculosis (TB) within the facility's population and the surrounding community. If the statistics indicate

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a risk, the ECO shall develop a written plan that addresses the management of TB, from testing to follow-up care.

- (e) Communicating with employees, other employers and the local health office regarding the suspected or diagnosed infectious disease status of referred inmates, including notification of exposed employees.
- (f) Reducing the risk of ATDs through the Exposure Control Plan and reviewing the plan at least annually.
- (g) Reducing the risk of exposure to BBPs (HIV, hepatitis).
- (h) Providing a system of medical services for employees who may become exposed to communicable diseases during the course of their employment.
- (i) Ensuring that all employees who have occupational exposure to communicable diseases participate in a training program at the time of their initial assignment, at least annually thereafter, and any time there is a change in working conditions.
- (j) Making all exposure and treatment plans available for employees, employee representatives and NIOSH review.

715.3 COMMUNICABLE DISEASE PROGRAM COMPONENTS

715.3.1 SURVEILLANCE

Surveillance takes place throughout the period of the inmate's incarceration and is done in a variety of encounters and inspections. These should include, but are not limited to, the following:

- (a) **Medical screening** - Each newly booked inmate should be evaluated for health care needs and signs and symptoms of infectious disease. The receiving screening includes questions regarding known symptoms of TB, HIV, sexually transmitted diseases (STDs) and HBV. The individual completing the medical screening should observe the inmate for obvious signs of infection.
- (b) **Health assessment** - Inmates should have a health assessment within the first 14 days of incarceration. The health assessment process includes screening for symptoms of communicable disease. Inmates will have a Purified Protein Derivative (PPD) test or a chest X-ray for TB and a blood test for STDs if symptomatic. Voluntary HIV testing is provided based on identified risk.
- (c) **Periodic health assessments** - Annual testing for TB should be performed on all inmates who are in the facility for one year or more if indicated by local incidence rate.
- (d) **Sick call and referrals** - At any time during incarceration an inmate may request to be evaluated for an infectious disease through the sick call process. Health and correctional staff can request that an inmate be evaluated if they notice any signs of potentially infectious disease.
- (e) **Contact investigation** - When an inmate housed in the general population develops symptoms of an infectious disease, the Responsible Physician should work cooperatively with the Corrections Chief or the authorized designee and the public

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health department to provide appropriate screening and testing of potentially exposed persons.

- (f) **Environmental health and safety inspections** - The health and safety of the facility environment should be inspected by the HSA (Health Services Administrator) of the contracted medical provider and reported to the Corrections Chief at least quarterly in a written report. Conditions identified as adversely affecting the health and safety of the inmates and/or employees or visitors should be promptly addressed and corrected.

715.3.2 IDENTIFICATION

Any inmate suspected of having a communicable disease will be evaluated by a qualified health care professional as soon as reasonably practicable. Inmates suspected of having communicable diseases will be appropriately isolated until disease confirmation and the period of communicability is determined. Long-term housing consideration will be based on the classification status as well as the behavior, medical needs and safety of inmates and staff. These inmates should be examined by a qualified health care professional within 24 hours. The instructions of the qualified health care professional regarding care of the patient and sanitizing of eating utensils, clothing and bedding shall be carefully followed.

715.3.3 TREATMENT

Qualified health care professionals shall provide care as directed by the Responsible Physician.

- (a) The Responsible Physician and the Corrections Chief should collaborate on treatment planning with the public health department, as appropriate.
- (b) Complete documentation of the signs, symptoms, diagnostic results, treatment and outcome of care provided to inmates who are suspected or confirmed as having a communicable disease should be entered into the inmate's health record.

715.3.4 COMMUNICATION

The Responsible Physician should ensure the following notifications are made whenever a communicable disease is identified:

- (a) Notification to the public health authority of all reportable diseases and conditions should be made as soon as practicable. This is done by completing appropriate forms, and if necessary, contacting the public health department directly for situations of multiple spread occurrences.
- (b) The Responsible Physician and the Corrections Chief should be kept informed of any incidence of communicable disease.
- (c) The Corrections Chief should be apprised of any medical situation that raises the risk of disease level for inmates, correctional officers or any other staff members.

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715.3.5 CONTINUOUS QUALITY IMPROVEMENT

A continuous quality improvement committee shall be formed consisting of the Responsible Physician, the Corrections Chief or the authorized designee and a representative from the local public health entity. The purpose of the committee is to monitor infection control issues and evaluate infection control processes to ensure effectiveness.

Monthly statistics should be collected by health care services and assembled into a report presented by the Responsible Physician or the authorized designee, detailing surveillance activities, disease identification and cases treated. The committee should meet quarterly and should discuss topics specific to infection control and communicable disease. Minutes of the meetings should be retained in accordance with established records retention schedules.

715.3.6 EMPLOYEE TRAINING

The Responsible Physician or the authorized designee shall provide education to all correctional staff who have contact with infected inmates during the initial employee orientation and annually thereafter. The Training Sergeant shall schedule this training and shall retain all associated records in accordance with established records retention schedules.

715.3.7 DATA COLLECTION AND REPORTING

The health authority should be responsible for ensuring the systematic collection and analysis of data to assist in the identification of problems, epidemics or clusters of nosocomial infections. All reportable illnesses as defined by the public health department should be reported as required.

715.3.8 STANDARD PRECAUTIONS

Standard precautions should be used by health care professionals to minimize the risk of exposure to blood and bodily fluids of infected patients. The Responsible Physician shall be responsible for establishing basic guidelines including, but not limited to:

- Washing hands or using hand sanitizer before and after all patient or specimen contact.
- Handling all blood and bodily fluids such as saliva, urine, semen and vaginal secretions as if they are known to be infectious. Where it is not possible to distinguish between fluid types, all bodily fluids are to be assumed infectious.
- Wearing gloves for potential contact with blood and other bodily fluids.
- Placing used syringes immediately in a nearby, impermeable container. Do not recap or manipulate any needle in any way.
- Wearing protective eyewear and a mask if splatter with blood or other bodily fluids is possible.
- Handling all linen soiled with blood and/or bodily secretions as infectious.
- Processing all laboratory specimens as infectious.
- As appropriate, wearing a mask for TB and other ATDs.

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715.3.9 TRANSMISSION-BASED PRECAUTIONS

Transmission-based precautions may be needed in addition to universal precautions for selected patients who are known or suspected to harbor certain infections. These precautions are divided into three categories that reflect the differences in the way infections are transmitted. Some diseases may require more than one category (RCW 70.48.480).

- (a) Airborne precautions are designed to prevent the spread of ATDs, which are transmitted by minute particles called droplet nuclei or contaminated dust particles. These particles, because of their size, can remain suspended in the air for long periods of time, even after the infected person has left the room. Some examples of diseases requiring airborne precautions are TB, measles and chicken pox.
 - 1. An inmate requiring airborne precautions should be assigned to a designated respiratory isolation room with special ventilation requirements. The door to this room must be closed at all possible times. If an inmate must move from the isolation room to another area of the facility, the inmate should wear a mask during transport. Anyone entering the isolation room to provide care to the inmate must wear a respirator.
- (b) Droplet precautions are designed to prevent the spread of organisms that travel on particles much larger than the droplet nuclei. These particles do not spend much time suspended in the air, and usually do not travel beyond a few feet of the inmate. These particles are produced when an inmate coughs, talks or sneezes. Examples of disease requiring droplet precautions are meningococcal meningitis, influenza, mumps and German measles (rubella).
 - 1. All staff should wear masks within 3 feet of the inmate. Inmate movement should be restricted to the minimum necessary for effective facility operations. The inmate should wear a mask during transport.
- (c) Contact precautions are designed to prevent the spread of organisms from an infected inmate through direct (touching the inmate) or indirect (touching surfaces or objects the inmate touched) contact. Examples of inmates who might be placed in contact precautions are those infected with the following:
 - 1. Antibiotic-resistant bacteria
 - 2. Hepatitis A
 - 3. Scabies
 - 4. Impetigo
 - 5. Lice

The following guide shall be used to determine the appropriate precautions that are necessary to reduce the risk of infection transmission while inmates are being transported. Inmates shall receive training on the disease transmission process and will be provided with appropriate barrier devices.

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Precautions for inmate contact and transportation

	GLOVES	SURGICAL MASKS	N95 MASKS	ISOLATION GOWNS
Contact				
Inmate	No	No	No	No
Personnel	Yes	No	No	Yes
Droplet				
Inmate	No	Yes	No	No
Personnel	No	Yes	No	Yes
Airborne				
Inmate	No	Yes	No	No
Personnel	No	No	Yes	No

715.3.10 ENVIRONMENTAL HEALTH AND SAFETY

The Responsible Physician or the authorized designee shall conduct a monthly inspection of areas where health services are provided to verify the following:

- The equipment is inspected and maintained to the manufacturer's recommendations.
- The area is clean and sanitary.
- The appropriate measures are being taken to ensure the unit is occupationally and environmentally safe.

715.3.11 REGULATED WASTE

The Corrections Chief or the authorized designee, in coordination with the Responsible Physician, will provide for the management of biohazardous materials and waste and the establishment of a protocol for the decontamination of equipment used in medical and dental treatment. Medical and dental equipment decontamination shall comply with all applicable local, state and federal regulations. Precautions may include, but are not limited to:

- (a) Discarding biohazardous waste in red plastic bags marked with the word BIOHAZARD and displaying the international symbol for biohazardous material. Contaminated disposable PPE shall be discarded in these receptacles.
- (b) Whenever a large amount of fluid blood is present, an absorbent powder should be used to gelatinize the fluid, which should assist in clean up. Standard precautions shall be used when removing the product that should then be placed in a red biohazard bag.
- (c) Used biohazard bags shall be stored in covered, rigid waste receptacles in designated locations pending weekly removal by a biohazard waste removal contractor.
- (d) Records documenting biohazardous waste removal, spore count logs and cleaning logs shall be retained in accordance with established records retention schedules.

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715.4 ECTOPARASITE CONTROL

Ectoparasite control will be initiated, where clinically indicated, immediately following the medical screening or when the inmate manifests signs and symptoms of lice or scabies.

- (a) Any inmate who indicates parasitological infection upon entering the facility shall be treated by a qualified health care professional.
- (b) Any inmate suspected of having lice/scabies may be referred to sick call by a deputy.
- (c) An inmate may access sick call if he/she believes there is a problem with lice/scabies.
- (d) A qualified health care professional shall evaluate any inmate with a lice/scabies complaint. If there are positive findings, the inmate shall be treated for the infestation accordingly.
 - 1. The lice and scabies treatment guidelines will be followed by the qualified health care professional if a physician's order for administering medication is obtained.
 - (a) The prescribing physician shall be notified if the inmate is pregnant, as certain medications are contraindicated for pregnant women. An alternative topical application must be prescribed in these situations.
 - (b) Documentation in the medical record should include the patient's symptoms, observations regarding the condition, patient education and prescribed treatment.
 - 2. The inmate's clothing and linen shall be removed from his/her cell, placed in a plastic bag and sent to the laundry. These items are considered contaminated and must be disinfected by:
 - (a) Machine washing (hot cycle), machine drying (hot cycle), dry cleaning or ironing, or
 - (b) Storage in a plastic bag for non-washable items for 10-14 days (head lice), seven days (pubic lice). This method is not recommended for body lice.
 - (c) Isolation is not necessary as long as clothing and bedding are properly disinfected and inmates do not share items.
 - 1. An inmate having poor hygiene should be housed in a single cell until 24 hours after beginning treatment.
 - 2. Gloves are to be used for direct contact until the inmate has been treated and the clothing/bedding have been removed for disinfecting.
 - 3. Cellmates, sexual partners and any personnel having direct hands-on contact with an infected inmate should be evaluated for prophylactic treatment because of the long incubation period of the scabies parasite.

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715.5 EMPLOYEE EXPOSURE CONTROL

All facility staff that may come in contact with another person's blood or bodily fluids shall follow these procedures and guidelines. For the purposes of this policy, contact with blood or bodily fluids is synonymous with BBP exposure.

All employees shall use the appropriate barrier precautions to prevent skin and mucous membrane exposure whenever contact with blood or bodily fluid is anticipated. Disposable gloves shall be worn, if reasonably possible, before making physical contact with any inmate and when handling the personal belongings of an inmate.

Should gloves come in contact with blood or other bodily fluids, the gloves shall be disposed of as contaminated waste. Care should be taken to avoid touching other items (e.g., pens, books or other personal items) while wearing disposable gloves in a potentially contaminated environment. All procedures involving blood or other potentially infectious materials shall be done in a way to minimize splashing, spraying or otherwise generating droplets of those materials.

Eating, drinking, smoking, applying lip balm and handling contact lenses shall be prohibited in areas where the potential for exposure exists.

715.5.1 IMMUNIZATIONS

All facility staff members who may be exposed to, or have contact with, a communicable disease shall be offered appropriate treatment immunization. The ability of staff to provide health care services is predicated on a safe and secure working environment where employees feel safe to do their work, and assures public safety.

Staff shall also receive a TB test prior to job assignment and follow up testing thereafter with any potential or known active TB, at no cost to the employee.

The HBV immunization shall be available to all employees who have direct inmate contact and who test negative for HBV antibodies. The immunization is voluntary and provided at no cost to the employee. Employees who decline the offer of immunization and/or test shall be required to sign a waiver. Employees receiving immunization and testing shall be required to sign a consent form. Employees may reverse their decision to decline at any time by signing a consent form.

715.5.2 PERSONAL PROTECTIVE EQUIPMENT (PPE)

The PPE is the last line of defense against communicable disease. Therefore, the following equipment is provided to all personnel to assist in the protection against such exposures:

- Disposable gloves
- Safety glasses or goggles
- Rescue mask with a one-way valve
- N95 mask
- Alcohol (or similar substance) to flush skin

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The PPE should be inspected at the start of each shift and replaced immediately after each use and when it becomes damaged.

715.5.3 DECONTAMINATION OF PERSONAL PROTECTIVE EQUIPMENT

After using any reusable PPE, it shall be washed or disinfected and stored appropriately. If it is not reusable (e.g., disposable gloves), it shall be discarded in a biohazard waste container.

Any PPE that becomes punctured, torn or loses its integrity shall be removed as soon as reasonably feasible. The employee shall wash up and replace the PPE if the job has not been terminated. If the situation resulted in a contaminated non-intact skin event, the affected area shall be decontaminated as described below.

A contaminated reusable PPE that must be transported prior to cleaning shall be placed into a biohazard waste bag. Gloves shall be worn while handling the biohazard waste bag and during placement into the biohazard waste container. The gloves shall be included with the waste.

715.5.4 DECONTAMINATION OF SKIN AND MUCOUS MEMBRANES

Personnel shall wash their hands as soon as possible following the removal of potentially contaminated gloves. Antibacterial soap and warm water or an approved disinfectant shall be used, paying particular attention to the fingernails.

If an employee's intact skin contacts someone else's blood or bodily fluids or other potentially infectious materials, the employee shall immediately wash the exposed part of his/her body with soap and warm water and/or an approved disinfectant as soon as possible. If the skin becomes grossly contaminated, body washing shall be followed by an approved hospital strength disinfectant. If large areas of the employee's skin are contaminated, the employee shall shower as soon as reasonably possible, using warm water and soap and/or an approved disinfectant. Medical treatment should be obtained.

Contaminated non-intact skin (e.g., injured skin, open wound) shall be cleaned using an approved disinfectant and then dressed or bandaged as required. Medical treatment is required. All hand, skin and mucous-membrane washing that takes place shall be done in the designated cleaning or decontamination area. Cleaning shall not be done in the kitchen, bathrooms or other locations not designated as a cleaning or decontamination area.

715.5.5 DECONTAMINATION OF CLOTHING

Contaminated clothing such as uniforms and undergarments shall be removed as soon as reasonably feasible and rinsed in cold water to prevent the setting of bloodstains. If the clothing may be washed in soap and hot water, do so as soon as reasonably possible.

If the clothing must be dry-cleaned, place it into a biohazard waste bag and give it to the ECO. The ECO will secure a dry cleaner that is capable of cleaning contaminated clothing, and shall inform the dry cleaner of the potential contamination.

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Contaminated leather boots shall be brushed and scrubbed with detergent and hot water then placed in an appropriately ventilated area to dry. If the contaminant soaked through the boot, the boot ECO shall decide whether to discarded the boots.

715.5.6 DECONTAMINATION OF VEHICLES

Contaminated vehicles and components such as the seats, radios and doors, shall be cleaned and disinfected with an approved germicide as soon as reasonably feasible.

715.5.7 DECONTAMINATION OF THE CLEANING AREA

The ECO shall designate a location in the facility that will serve as the area for cleaning/decontamination. This area is to be used to keep equipment clean and sanitary and for employees to wash any potential contamination from their bodies. This area is to be thoroughly cleaned after each use and to be maintained in a clean and sanitary order at all times between each use. The application of cosmetics, smoking of cigarettes and consumption of food and drink are prohibited in this area at all times.

715.6 SHARPS AND ITEMS THAT CUT OR PUNCTURE

All personnel shall avoid using or holding sharps (needles) unless they are assisting medical personnel or collecting them for evidence. Unless required for reasons related to evidence preservation, employees are not to recap sharps. If recapping is necessary, a one-handed method shall be employed to avoid a finger prick. Disposal, when possible, shall be into a puncture-proof biohazard container.

All sharps and items that cut or puncture (e.g., broken glass, razors and knives) shall be treated cautiously to avoid cutting, stabbing or puncturing one's self or any other person. In addition, if a sharp object contains known or suspected blood or other bodily fluids, that item is to be treated as a contaminated item. If the item is not evidence, touching it with the hands shall be avoided. Rather, use a device such as tongs or a broom and a dustpan to clean up debris. If the material must be touched, protective gloves shall be worn.

715.7 POST-EXPOSURE REPORTING AND FOLLOW-UP REQUIREMENTS

In actual or suspected employee exposure incidents, proper documentation and follow-up action must occur to limit potential liabilities and to ensure the best protection and care for the employees.

715.7.1 EMPLOYEE RESPONSIBILITY TO REPORT EXPOSURE

To provide appropriate and timely treatment should exposure occur, all employees should verbally report the exposure to their immediate supervisor and complete a written exposure report as soon as possible following the exposure or suspected exposure. That report should be submitted to the employee's immediate supervisor. Employees should document in the exposure report whether they would like the person who was the source of the exposure to be tested for communicable diseases.

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715.7.2 SUPERVISOR REPORTING REQUIREMENTS

The supervisor on-duty shall investigate every exposure that occurs as soon as reasonably possible following the incident, while gathering the following information:

- (a) Name and employee identification number of the employee exposed
- (b) Date and time of incident
- (c) Location of incident
- (d) What potentially infectious materials were involved
- (e) Source of material or person
- (f) Current location of material or person
- (g) Work being done during exposure
- (h) How the incident occurred or was caused
- (i) PPE in use at the time of the incident
- (j) Actions taken post-event (e.g., clean-up, notifications)

The supervisor shall advise the employee of the laws and regulations concerning disclosure of the identity and infectious status of a source, and of information contained in this policy regarding source testing.

If the ECO is unavailable to seek testing of the person who was the source of the exposure, it is the responsibility of the exposed employee's supervisor to ensure testing is sought according to the guidelines in this policy.

715.7.3 MEDICAL CONSULTATION, EVALUATION AND TREATMENT

Any employee who was exposed or who suspects he/she was exposed to HIV or to hepatitis B or C should be seen by a physician or qualified health care professional as soon as reasonably possible.

The doctor or qualified health care professional should be given the supervisor's report and the employee's medical records relevant to the visit and examination. The blood of the exposed employee shall be tested.

The qualified health care professional will provide the ECO and/or the Office's risk manager with a written opinion/evaluation of the exposed employee's medical condition. This opinion should only contain the following information:

- If a post-exposure treatment is indicated for the employee
- If the employee received a post-exposure treatment
- Confirmation that the employee received the evaluation results
- Confirmation that the employee was informed of any medical condition that could result from the exposure incident and whether further treatment or evaluation will be required

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- Whether communicable disease testing from the source is warranted, and if so, which diseases the testing should include

All other findings or diagnosis shall remain confidential and are not to be included in the written report.

715.7.4 COUNSELING

The Office shall provide the exposed employee (and his/her family if necessary) the opportunity for counseling and consultation.

715.7.5 CONFIDENTIALITY OF REPORTS

Most of the information involved in this process must remain confidential. The ECO shall ensure that all records and reports are kept in the strictest confidence. The ECO shall be responsible for maintaining records containing the employee's treatment status and the results of examinations, medical testing and follow-up procedures.

The Office's risk manager shall be responsible for keeping the name and Social Security number of the employee and copies of any information provided to the consulting health care professional on file.

This information is confidential and should not be disclosed to anyone without the employee's written consent (except as required by law). Test results from persons who may have been the source of an exposure should be kept confidential as well.

715.7.6 SOURCE TESTING

Testing a person for communicable diseases when that person was the source of an exposure should be done when it is desired by the exposed member, or when it is otherwise appropriate. Source testing is the responsibility of the ECO. If the ECO is unavailable to seek timely testing of the source, it is the responsibility of the Corrections Chief to ensure testing is sought.

Source testing may be achieved by:

- (a) Obtaining consent from the individual.
- (b) Filing a request with a state or local health officer to order blood-borne pathogen testing when an employee is exposed to the bodily fluids of an arrestee (RCW 70.24.340; WAC 246-100-205).
- (c) Receiving an order from the Corrections Chief for blood-borne pathogen testing for a detainee at the correctional facility (RCW 70.24.360; WAC 246-100-206).

Since there is the potential for overlap between the different manners in which source testing may occur, the ECO is responsible for coordinating the testing to prevent unnecessary or duplicate testing.

The ECO should seek the consent of the individual for testing and consult the Prosecuting Attorney to discuss other options when no statute exists for compelling the source of an exposure to undergo testing if he/she refuses.

Aids to Impairment

716.1 PURPOSE AND SCOPE

This policy acknowledges the high priority of inmate health and recognizes that some inmates will require adaptive devices to assist them with daily living activities on a temporary or permanent basis.

The Skagit County Sheriff's Office has established this policy for physicians and dentists to review and evaluate the need for adaptive devices, while considering facility security concerns regarding the use of such items.

When a physician or dentist determines that the medical condition of an inmate indicates that an adaptive device is clinically appropriate, the parameters of this policy will determine if authorization for the use of such items during incarceration should be granted, and if any equipment modifications are indicated for safety or security purposes.

716.1.1 DEFINITIONS

Adaptive device - Any orthotic, prosthetic or an aid to impairment that is designed to assist an inmate with the activities of daily living or that is clinically appropriate for health, as determined by the responsible physician or dentist.

Aids to impairment - Includes, but is not limited to, eyeglasses, hearing aids, pacemakers, canes, crutches, walkers and wheelchairs.

Orthoses - Specialized mechanical devices, such as braces, shoe inserts or hand splints that are used to support or supplement weakened or abnormal joints, limbs and/or soft tissue.

Prostheses - Artificial devices designed and used to replace missing body parts, such as limbs, teeth or eyes.

716.2 POLICY

It is the policy of the Office that, in accordance with security and safety concerns, medical and dental orthoses or prostheses and other adaptive devices will be permitted or supplied in a timely manner when appropriate, as determined by the responsible physician or dentist. Inmates may be required to provide co-payments for adaptive devices.

716.3 FACILITY-OWNED MEDICAL EQUIPMENT

All adaptive devices belonging to the Office shall be marked and numbered, identifying them as office property.

- (a) A medical equipment inventory form shall be completed by the intake deputy for all medical equipment issued to the inmate, regardless of who owns the property.
- (b) Upon the release of an inmate, the releasing deputy shall review the medical equipment issued to the inmate and contact the medical clinic for instructions regarding any office-owned adaptive device.

Aids to Impairment

716.4 MEDICAL OR DENTAL ORTHOSES, PROSTHESES OR ADAPTIVE DEVICE

Subject to safety and security concerns, persons who are detained in this facility shall be permitted to retain an orthopedic or prosthetic appliance if it is prescribed by or recommended and fitted by a physician or dentist. However, if the appliance presents a risk of bodily harm to any person or is a risk to the security of the facility, the appliance shall be removed from the prisoner and booked for safekeeping. It shall be promptly returned if it is later determined that such risk no longer exists.

Whenever a prosthetic or orthopedic appliance is removed from a prisoner, the Shift Supervisor shall be promptly apprised of the reason for the removal. If it is determined that the appliance will not be returned, the prisoner shall be examined as soon as practicable by a physician or dentist, but no later than 24 hours after the removal, to determine if the removal will be injurious to the health or safety of the prisoner.

If the responsible physician or dentist determines that the removal of the adaptive device may be injurious to the health or safety of the prisoner, and the adaptive device cannot be returned because of safety or security concerns, options include:

- (a) Transfer the prisoner to an appropriate medical detention facility.
- (b) With physician or dentist approval, modify the adaptive device to meet the medical needs of the prisoner and the safety and security needs of the facility.

Once an adaptive device has been approved for use, the facility nurse shall enter the authorization into the inmate's health file. If the inmate requires special housing, the nurse shall document this in writing and notify custody or classification personnel appropriately. The nurse shall document the general condition of the prostheses and have the inmate sign in the medical record that he/she received the prostheses.

Any prostheses that are brought to the facility by family members or others after the inmate has been incarcerated shall be subject to a security check. The facility shall accept no responsibility for loss or damage to any adaptive device.

Any repair or replacement of any adaptive device shall be the responsibility of the inmate. If the repair is medically necessary and the inmate is indigent, funds for the repair shall be sought through the Inmate Welfare Fund.

716.5 REQUESTS FOR MEDICAL AND DENTAL PROSTHESES

All requests for new or replacement medical or dental prostheses shall be individually evaluated and approved by the responsible physician or dentist. Considerations for approval shall be based upon the following:

- Medical needs of the inmate.
- Anticipated length of incarceration.
- Safety and security of the facility.

Detoxification and Withdrawal

717.1 PURPOSE AND SCOPE

Significant percentages of inmates have a history of alcohol and/or drug abuse. Newly incarcerated individuals may enter the facility while under the influence of a substance or they may develop symptoms of alcohol or drug withdrawal. This policy is intended to ensure that the staff is able to recognize the symptoms of intoxication and withdrawal from alcohol or drugs, and that those inmates who are intoxicated or experiencing withdrawal are provided appropriate medical treatment.

This policy also identifies protocols to be used by medical staff. These protocols are appropriate for inmates who are under the influence of alcohol or drugs or who are experiencing withdrawal from any type of substance abuse.

717.2 POLICY

Withdrawal from alcohol or drugs can be a life-threatening medical condition requiring professional medical intervention. It is the policy of this office to provide proper medical care to inmates who suffer from drug or alcohol overdose or withdrawal.

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

The responsible physician shall develop written medical protocols on detoxification symptoms necessitating immediate transfer of the inmate to a hospital or other medical facility, and procedures to follow if care within the facility should be undertaken.

Inmates who are booked into the facility who are participating in a narcotic treatment program may, with the approval of the responsible physician continue in the the program. The responsible physician shall coordinate continued participation with the director of the program, to be entitled to continue in the program.

717.3 STAFF RESPONSIBILITY

Staff should remain alert to signs of drug and alcohol overdose and withdrawal. These symptoms include, but are not limited to, sweating, nausea, abdominal cramps, anxiety, agitation, tremors, hallucinations, rapid breathing and generalized aches and pains. Any staff member who suspects that an inmate may be suffering from overdose or experiencing withdrawal symptoms shall promptly notify the Shift Supervisor, who shall ensure that a qualified health care professional is promptly notified.

717.4 MEDICAL STAFF RESPONSIBILITY

The qualified health care professional will evaluate the inmate using approved protocols in order to determine the most appropriate care plan, which will be based on the patient's history, current

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Detoxification and Withdrawal

physical status and treatment needs. Any patient who cannot be safely treated in the facility will be referred to an appropriate treatment facility off-site.

717.5 PROCEDURE

Inmates who are observed experiencing severe, life-threatening intoxication (overdose) or withdrawal symptoms will be promptly seen by a physician or referred to an off-site emergency facility for treatment. Detoxification shall be conducted under medical supervision at the facility or in a hospital or community detoxification center under appropriate security conditions.

If the qualified health care professional determines that an inmate is at risk for progression to a more severe level of withdrawal, the inmate will be appropriately housed in an area where he/she can be kept under constant observation by qualified health care professionals or trained correctional staff.

717.6 WITHDRAWAL AND DETOXIFICATION PROTOCOLS

The responsible physician shall develop protocols to guide the care and treatment of persons who are intoxicated or experiencing drug or alcohol withdrawal.

717.7 ALCOHOL WITHDRAWAL SYMPTOMS CHART

The following chart describes typical symptoms of mild, moderate and severe withdrawal. It is to be used as a guide for determining when to refer inmates to a qualified health care professional. Not all symptoms are always present.

	MILD	MODERATE	SEVERE (Delirium Tremens)
ANXIETY	Mild restlessness and anxiety	Obvious motor restlessness	Extreme restlessness and agitation with appearance of intense fear is common
APPETITE	Impaired appetite	Marked anorexia	Often rejects all food and fluid except alcohol
BLOOD PRESSURE	Normal or slightly elevated systolic	Usually elevated systolic	Elevated systolic and diastolic
CONFUSION	Oriented, no confusion	Variable confusion	Marked confusion and disorientation
CONVULSIONS	No	May occur	Severe convulsions are common

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HALLUCINATIONS	No hallucinations	Often vague, transient, visual and auditory hallucinations and delusions, often with insight, often occurring only at night	Visual and occasional auditory hallucinations, usually of fearful or threatening content. Misidentification of persons and frightening delusions relating to hallucinatory experiences
MOTOR CONTROL	Inner "shaky"	Visible tremulousness	Gross uncontrollable shaking
NAUSEA	Nausea	Nausea and vomiting	Dry heaves and vomiting
PULSE	Tachycardia	Pulse 100-120	Pulse 120-140
SLEEP	Restless sleep or insomnia	Marked insomnia and nightmares	Total wakefulness
SWEATING	None or slight	Obvious	Extreme

Administration of Psychotropic Medication

718.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines under which an inmate may be involuntarily administered psychotropic medications during a mental health emergency, to protect the safety of the inmate and others.

718.1.1 DEFINITIONS

Definitions related to this policy include:

Mental health emergency - Any emergency situation that requires an immediate response to an individual in psychiatric crisis where an individual in psychiatric crisis where and inmate presents and imminent likelihood of serious bodily harm to him or herself, staff, or others. It is not necessary for harm to take place or to become unavoidable prior to involuntary treatment being imposed.

Psychotropic medication - Any medication prescribed for the treatment of symptoms of psychoses and other mental and emotional disorders.

718.2 POLICY

It is the policy of this office that an inmate may be involuntarily given psychotropic medication on an emergency basis only when a psychiatrist or physician finds that the inmate suffers from a mental disorder, presents an imminent likelihood of serious harm to self or others, and will not respond to less restrictive medically acceptable alternatives or such alternatives are unavailable or have not been successful.

718.3 MEDICATION IN AN EMERGENCY

Psychotropic medication shall not be administered to an inmate absent an emergency unless the inmate has given his/her informed consent or administration has been authorized under a court order (RCW 10.77.065).

Involuntary emergency administration of psychotropic medication shall occur only under the following conditions:

- The inmate has been afforded interventions, beginning with the least restrictive options, as approved by the Responsible Physician or psychiatrist.
- The administration and duration are authorized by a physician.
- A physician specifies the conditions under which the medication is to be administered.

The details of each condition must be documented in the inmate's medical record.

This policy limits the number of times that involuntary psychotropic medication may be administered to one dose only during the mental health emergency, as defined by a qualified health care professional. If the emergency is not resolved, the inmate shall be transferred from the jail to an appropriate facility that is designed to treat mental health emergencies.

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Administration of Psychotropic Medication

Psychotropic medication shall not be administered for disciplinary reasons.

718.3.1 PROCEDURES

When it has been determined that an inmate's behavior might lead to death or serious injury to the inmate or others, and that a mental health emergency is imminent, the following procedures shall be followed:

- The inmate shall be subdued by custody personnel using tactics that provide the safest resolution for the inmate and the involved staff given the circumstances.
- A qualified health care professional shall evaluate the inmate for any injuries and mental status. If no qualified health care professional is available, the inmate shall be transported to an appropriate facility that is designed to treat mental health emergencies as soon as reasonably practicable.
- The Responsible Physician shall be contacted for direction.
- If psychotropic medication is authorized by the Responsible Physician, the qualified health care professional will attempt to gain inmate consent.
- If consent is not obtained, the medication shall be involuntarily administered in the safest manner possible.
- The inmate will be monitored for any adverse reactions and side effects twice every hour by custody personnel.
- A qualified health care professional shall check the inmate at 30-minute intervals for the first two hours.
- The inmate shall be evaluated by the Responsible Physician within 24 hours to determine continued treatment planning.
- If the emergency is not resolved within 72 hours, or if the inmate does not continue treatment on a voluntary basis, consideration should be given to the prompt transfer of the inmate to an appropriate facility that is designed to treat mental health emergencies.
- All clinical interaction with the inmate shall be fully documented in the inmate's medical record and shall include the date and time of treatment and the signature of the qualified health care professional.

718.3.2 POST ADMINISTRATION CARE

Less restrictive treatment alternatives should be developed as soon as reasonably practicable.

Clinical Performance Enhancement

719.1 PURPOSE AND SCOPE

This office recognizes the importance of ensuring that qualified health care professionals are competent in their clinical skills and that the clinical performance enhancement review addresses areas in need of improvement.

719.2 POLICY

It is the policy of this office to conduct a biannual peer review of all qualified health care professionals. The clinical performance enhancement review process is neither an annual performance review nor a clinical case conference process. It is a professional review focused on the qualified health care professional's clinical skills. Its purpose is to enhance competence and address areas in need of improvement.

An immediate peer review may be authorized by the Responsible Physician if serious problems of practice arise with a specific qualified health care professional.

719.3 COMPONENTS OF THE CLINICAL PERFORMANCE ENHANCEMENT

The clinical performance enhancement review process is to be conducted biannually on all primary care clinicians. The result of these reviews shall be kept confidential. Documentation from the review shall include the following:

- Name of the individual being reviewed
- Date of the review
- Name and credentials of the reviewer
- Confirmation that the review was shared with the clinician
- Summary of findings and corrective action, if any

If a clinical performance enhancement review identifies a serious concern, the Responsible Physician shall implement an independent review by someone who is not directly employed by this office. The result of this review shall be shared with the appropriate health care service by the Responsible Physician, and a plan of correction shall be implemented.

The Responsible Physician will keep a log of clinical performance enhancement reviews of all qualified health care professionals to ensure compliance with this policy.

719.4 HEALTH CARE GRIEVANCES

The Corrections Chief, in cooperation with the Responsible Physician, shall be responsible for developing and implementing a process by which inmates may submit grievances about the health care services they have received. There shall also be a means of collecting and analyzing the

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Clinical Performance Enhancement

observations of other qualified health care professionals, correctional staff or other non-medical staff regarding the delivery of health care services.

When appropriate Responsible Physician shall convene a panel of independent physicians to review the practice of the physician about whom complaints or observations have been made. The Responsible Physician shall take appropriate action at the recommendation of the panel.

719.5 RECORDS

All clinical performance enhancement review reports and complaint investigations shall be considered confidential. The contents of such files shall not be revealed to other than the involved employee or authorized personnel, except pursuant to lawful process or as otherwise authorized or required by statute.

Sustained grievances shall be maintained in the employee's personnel file. Complaints that are unfounded, exonerated or not sustained shall be maintained apart from the employee's personnel file in accordance with established records retention schedules.

Clinical Decisions

720.1 PURPOSE AND SCOPE

This policy recognizes that a coordinated effort between the Responsible Physician and the Corrections Chief is needed to ensure an adequate health care system. It emphasizes the importance of clinical decisions being the sole responsibility of the qualified health care professional.

720.1.1 DEFINITIONS

Definitions related to this policy include:

Clinical decisions - The process of formulating a differential diagnosis with information gathered from an inmate's medical history and physical and mental examinations, developing a list of possible causes and ordering tests to help refine the list or identify a specific disease.

Differential diagnosis - A systematic method of identifying unknowns or diagnosing a specific disease using a set of symptoms and testing as a process of elimination.

720.2 POLICY

Clinical decisions and actions regarding inmate health care are the sole responsibility of qualified health care professionals and should not be countermanded by others. The Responsible Physician shall be responsible for arranging for appropriate health resources and for determining what services are needed. The Corrections Chief or the authorized designee shall be responsible for providing the custodial support to ensure a safe and secure environment for delivery of services and accessibility to the inmates.

720.3 MEDICAL AUTONOMY

Clinical decisions shall be made only after a thorough evaluation of the patient's complaint and physical or mental condition. The implementation of clinical decisions is to be completed in an effective and safe manner that does not violate the security regulations of the facility.

720.4 PROBLEM RESOLUTION

Any issues arising because of the clinical decision process shall be reviewed under the provisions of the Continuous Quality Improvement Policy using medical records, grievances, staff complaints and any other relevant data.

Health-Trained Staff

721.1 DUTIES OF THE HEALTH-TRAINED STAFF

The Corrections Chief or the authorized designee, in coordination with the Responsible Physician, shall be responsible for developing a job description for health-trained staff positions. Designated health-trained staff shall be responsible for the following:

- Reviewing the screening forms completed during the booking process for any follow-up care needed.
- Managing triage of health care requests.
- Preparing inmates and their medical records for sick call.
- Assisting with the implementation of orders regarding diets, housing and work assignments.

721.2 TRAINING

The Corrections Chief, Training Sergeant and the Responsible Physician shall be jointly responsible for developing a training curriculum for the health-trained staff positions and for the delivery of that training, which shall include the following:

- Instruction on proper action in the case of a medical emergency.
- Documentation requirements.
- Appropriate triage of health care requests and follow-up.
- Confidentiality of health information.

721.3 UNREASONABLE BARRIERS

No member of the Skagit County Sheriff's Office correctional facility shall create unreasonable barriers that affect an inmate's access to health care services. The following are examples of conduct that are likely to create unreasonable barriers and are prohibited:

- (a) Punishing inmates for seeking care for their serious health needs.
- (b) Assessing excessive inmate medical fees that prevent or deter inmates from seeking care for their serious health needs.
- (c) Deterring inmates from seeking care for their serious health needs by scheduling sick call at unreasonable times.

Licensure, Certification and Registration Requirements

722.1 PURPOSE AND SCOPE

The purpose of this policy is to recognize that inmates are entitled to health care services that are provided by qualified health care professionals working within the scope of their respective licensure, certification, registration and training. This policy also establishes a credentials verification process.

722.1.1 DEFINITIONS

Direct order - A written order issued by a qualified health care professional specifically for the treatment of an inmate's particular condition.

Qualified health care professionals - Physicians, physician assistants, nurses, nurse practitioners, dentists, mental health professionals and others who, by virtue of their education, credentials and experience, are permitted by law to evaluate and care for patients.

Standing order - A written order for the definitive treatment of identified conditions and for the on-site emergency treatment of any person having such condition.

722.2 POLICY

It is the policy of this office that all qualified health care professionals who provide health care services to inmates possess the required licensure, certification or registration appropriate to their field of expertise. Job descriptions shall include minimum qualifications and specific duties and responsibilities, and shall be approved by the health authority.

The current credentials and job descriptions for all qualified health care professionals will be on file at the facility and retained in accordance with established records retention schedules.

Any health care provided to inmates at the facility that is not provided by a qualified health care professional is provided in accordance with a standing order or direct order issued by personnel who are qualified under governing laws to give such orders.

722.3 CREDENTIALING AND FILE MAINTENANCE

A completed file of current licenses, certifications, registration, reference checks and applications shall be maintained by the Office Department of Human Resources and by the health services administrator or the authorized designee at this facility.

- (a) The health services administrator or the authorized designee shall obtain confirmation of current licensure, certification and registration prior to making any offer of employment.
- (b) Inquiries into any sanctions or disciplinary actions of state boards, employers and the U.S. Department of Health and Human Services' National Practitioner Data Bank shall be conducted prior to making any offer of employment.

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- (c) Employment references may be obtained via mail or over the phone with documentation. Each applicant is required to provide a minimum of two references.
- (d) Each employee shall be held responsible for providing renewal verification of licenses, certificates and registration prior to the expiration date.
- (e) Providers must complete the credentialing process that is conducted by the corporate office and must provide the facility a copy of current licensure and, when appropriate, a Drug Enforcement Administration (DEA) certificate to prescribe controlled substances.
- (f) To be eligible for hire, all clinical health care personnel must possess and maintain a current Cardiopulmonary Resuscitation (CPR) certification and provide documentation to the health services administrator.

722.4 STUDENTS AND/OR INTERNS

If the medical services provided to an inmate are performed by any intern, resident or student who is authorized to provide specific health care services as part of a formal medical training program, the individuals in training will work under the control and supervision of a qualified health care professional. Assigned tasks shall be commensurate with the intern, student or resident's level of training.

There shall be a written agreement between the facility and the entity sponsoring the training program that covers the scope of work, duration of the agreement and any legal or liability issues.

Any student, intern or resident working in the facility shall participate in a facility orientation that includes, but is not limited to, topics such as fire safety, facility security, items considered contraband and inmate culture.

All students, interns or residents shall be required to agree in writing to abide by all facility policies, including those relating to hostages, facility security and the confidentiality of information.

All training provided, written agreements and/or contracts shall be maintained in the student's file by the health services administrator in accordance with established records retention schedules.

Inmate Assistants

723.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines and establish parameters for the appropriate use of inmates as assistants in the provision of health care services.

723.2 POLICY

It is the policy of this office that all inmate assistants shall be under direct supervision and utilized in a manner that does not give them control or authority over other inmates, access to confidential medical information, or authority to make treatment decisions or provide patient care. Inmate assistants shall not be used as a substitute for qualified health care professionals.

723.3 INMATE ASSISTANTS

Inmates who have received appropriate training may perform limited duties involving assistance to other inmates while under the direct supervision of qualified health care professionals. The duties that inmate assistants may perform include the following:

- Peer support and education
- Emotional support activities for inmates who are ill
- Assisting disabled inmates with daily living activities, such as providing escort assistance or help with bathing and dressing
- When qualified and properly trained and when participating in a formal suicide prevention plan inmate assistants may serve as a companion to other inmates who are at risk of suicide.

723.4 PROHIBITED DUTIES

Inmate assistants shall not be used for any direct patient care activities, diagnostic or treatment decisions, dispensing of medications, scheduling health care appointments or any form of patient care normally provided by a qualified health care professional.

723.5 TRAINING

Inmate assistants assigned to health care services shall receive education and training specific to their anticipated duties to ensure that they understand and can perform their duties in a safe and lawful manner.

Suicide Prevention and Intervention

724.1 PURPOSE AND SCOPE

This policy establishes the suicide prevention and intervention to identify, monitor and, when necessary, provide for emergency response and treatment of inmates who present a suicide risk while incarcerated at the Skagit County Sheriff's Office detention facilities.

This policy is intended to reduce the risk of self-inflicted injury or death by providing tools to the staff that will allow a timely and organized emergency response to suicide, suicide attempts or an inmate's unspoken indication that suicide is being considered. The three key components of this plan are evaluation, training and screening with intervention.

724.2 POLICY

It is the policy of this office to minimize the incidence of suicide by establishing and maintaining a comprehensive suicide prevention and intervention program designed to identify inmates who are at risk of suicide and to intervene appropriately whenever possible. The program shall be developed and approved by the local public health entity and reviewed annually by the Corrections Chief. A copy of this policy shall be maintained in each unit of the facility where it can be easily accessed by all staff members.

724.3 SUICIDE PREVENTION TEAM

The Corrections Chief in cooperation with the Responsible Physician may establish a suicide prevention team that will evaluate and approve the suicide prevention and intervention program annually. The suicide prevention team should consist of qualified health care professionals and the Corrections Chief or the authorized designee. The yearly evaluation will include a review of all current policies to ensure they are relevant, realistic and consistent with the mission of the program. The program and policies will be updated as needed.

The suicide prevention team shall also ensure that each detention facility is evaluated annually to identify any physical plant characteristics or operational procedures that might be modified to reduce the risk of inmate suicide. This should be accomplished by conducting a review of suicides and suicide attempts, physical inspection, review of various facility inspection reports and by participating in inmate/management team meetings. If physical modifications are recommended, the team shall ensure the Corrections Chief is promptly notified.

It shall also be the responsibility of the suicide prevention team to coordinate with the Training Sergeant to ensure that suicide prevention training is provided in compliance with all applicable statutes and standards.

724.4 STAFF TRAINING

All facility staff members who are responsible for supervising inmates shall receive initial and annual training on suicide risk identification, prevention and intervention, to include minimally the following:

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Suicide Prevention and Intervention

- The provisions of this policy
- Identification of the warning signs and indicators of potential suicide, including training on suicide risk factors
- Identification of the demographic and cultural parameters of suicidal behavior, including incidence and variations in precipitating factors
- Responding to suicidal and depressed inmates
- Communication between corrections and health care personnel
- Using referral procedures
- Housing observation and suicide watch-level procedures
- Follow-up monitoring of inmates who attempt suicide

Recommendations for modification to the suicide training should be directed to the Corrections Chief, who shall review the recommendations and approve, if appropriate.

724.5 SCREENING AND INTERVENTION

All inmates shall undergo medical and mental health screening during the intake process. A portion of the intake medical screening is devoted to assessing inmates at risk for suicide. Before an arrestee/inmate may enter the facility, they should be assessed by custody staff for their ability to answer medical and mental health screening questions.

Any inmate who appears to be unable to answer the initial medical screening questions shall be examined by qualified health care professionals at a designated hospital and receive medical clearance before acceptance into the jail. Inmates who refuse to answer these questions shall be placed under observation until the screening can be completed or until sufficient information is obtained to allow the staff to make appropriate decisions concerning housing and care.

Staff members shall promptly refer any inmate or arrestee who is at risk for suicide to classification, health services and mental health services. The inmate shall remain under direct and constant observation in a safe setting until designated staff makes appropriate health care and housing decisions.

724.6 SUICIDE WATCH

Inmates should only be housed on suicide watch with the approval of a qualified health care professional and a Shift Supervisor. If a qualified health care professional is not present in the correctional facility, the Shift Supervisor may make the decision to place an inmate on suicide watch but should notify a qualified health care professional as soon as practicable. Inmates placed on suicide watch shall be closely monitored and housed in a cell that has been designed to be suicide resistant. Prior to housing the inmate, the staff should carefully inspect the cell for objects that may pose a threat to the inmate's safety.

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Qualified health care professionals are primarily responsible for the treatment of inmates on suicide watch. Deputies and general employees are responsible for the physical safety of the inmates. All staff members should coordinate efforts to ensure that inmates do not have the means or the opportunity to injure themselves.

An observation log shall be maintained for each inmate on suicide watch. A staff member shall be designated to make a direct visual observation of the inmate twice every 30 minutes at approximately 15-minute intervals. Each staff member who is required to observe the inmate shall make notations in the observation log documenting the time of observation and a brief description of the inmate's behavior.

An inmate classified as actively suicidal must be continuously monitored by direct visual observation of a deputy. While monitoring may be supplemented by video monitoring, it may never be a substitute for direct visual monitoring.

The status of suicidal inmates should be readily identifiable in a manner discernible by the staff. When standard-issue clothing presents a security or medical risk to the inmate or others, the inmate shall be supplied with a security garment that is designed to promote inmate safety and not cause unnecessary humiliation and degradation. Use of the security garment shall be documented in the inmate's health record. Suicidal inmates shall not be permitted to retain undergarments or any other item that can be fashioned into an implement for hanging (e.g., plastic bags, shoelaces or sheets). Inmates shall not be permitted to keep personal property while housed on suicide watch and shall not be permitted to possess razors or other sharp objects, such as pencils, items with staples or any other item that may be used to cause a self-inflicted injury. Physical restraints should only be used as a last resort measure. The decision to use or discontinue use of restraints should be made in consultation with qualified health care professionals.

Inmates who are not actively suicidal but who have expressed suicidal thoughts or have a recent history of self-injurious behavior should be observed by staff at irregular intervals, not to exceed every 15 minutes.

724.6.1 INTERVENTION

Any suicide attempt is a medical emergency. Staff should take action to facilitate emergency medical care and preserve and collect evidence as necessary. A qualified health care professional should be summoned immediately any time the staff suspects a suicide attempt is imminent. Staff should take reasonable and appropriate precautions to mitigate the ability of the inmate to injure him/herself, and should consider establishing and maintaining a non-threatening conversation with the inmate while awaiting assistance. If a qualified health care professional is not immediately available, the inmate should be placed in an appropriate and safe location until such time as qualified health care professionals or the Responsible Physician is available.

Following a suicide attempt, staff should initiate a medical emergency response and initiate and continue appropriate life-saving measures until relieved by qualified health care professionals. The arriving medical staff should perform the appropriate medical evaluation and intervention. The

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Responsible Physician or the authorized designee should be notified in situations when referral and transportation to the emergency room of a local hospital is required.

724.6.2 NOTIFICATION

In the event of an attempted or completed suicide, the Corrections Chief should be promptly notified. The Corrections Chief should promptly notify the Sheriff.

The location where a suicide or attempted suicide has occurred should be treated as a crime scene after the inmate has been removed from the cell or after emergency medical care is rendered. The area should be secured and access-controlled to preserve evidence until the appropriate investigation can be completed.

All suicides or attempted suicides should be documented in an incident report. Any injury must be documented in an inmate injury report.

All in-custody deaths, including those resulting from suicide, should be investigated and documented in accordance with the Reporting Inmate Deaths Policy.

724.7 FOLLOW-UP

Qualified health care professionals should evaluate any inmate placed on suicide watch within 24 hours of placement or at the next available physician's visit, whichever is earliest. After evaluation, qualified health care professionals should make a recommendation whether to keep the inmate on suicide watch. Only a qualified health care professional may remove an inmate from suicide watch.

All changes in inmate status should be reported to the qualified health care professional to ensure the inmate receives appropriate care. The inmate's health record should be updated to reflect all contacts, treatment and any other relevant information, and the records maintained in accordance with established records retention schedules.

Although the goal of this program is to significantly reduce the risk of in-custody deaths, the ongoing care of suicidal inmates after release must also be considered. Inmates who are at risk for suicide should be referred to local or area mental health resources after release. A deputy

724.7.1 DEBRIEFING

Any suicide attempt or death of an inmate or on-site staff member requires a staff debriefing. Information will be communicated to the oncoming Shift Supervisor and staff to apprise them of the incident and actions taken with regard to the incident. Such debriefing will be appropriately documented and shall be reviewed by administration, security and the Responsible Physician.

724.8 TRANSPORTATION

Inmates at risk for suicide pose additional challenges during transport and while being held in court holding facilities. The transportation staff should take reasonable steps to closely monitor at-risk inmates whenever they are transported or held in any cell that is not designated as a suicide-watch cell. All additional security and monitoring measures implemented by the staff should be documented in the inmate's record. The transporting deputy should ensure that the suicide threat or other danger is communicated to personnel at the receiving facility.

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Suicide Prevention and Intervention

Inmate Death - Clinical Care Review

725.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the actions and notifications required in the event of an in-custody death and the medical care received by the inmate. The policy requires that a review of all in-custody deaths be conducted to assess the appropriateness of the clinical care provided and the effectiveness of the facility's policies and procedures.

725.2 POLICY

It is the policy of this office that all in-custody deaths are reviewed to determine the appropriateness of the clinical care provided, to determine whether existing policies are appropriate or if revision is necessary, and to identify any other issues associated with the circumstances of the death. A postmortem examination should be performed according to the laws of the jurisdiction if the cause of death is unknown, if the death occurred under suspicious circumstances or if the inmate was not under current medical care.

725.3 NOTIFICATIONS

In the event of an in-custody death, all authorities with jurisdiction, including the Coroner or the authorized designee shall immediately be notified by the Corrections Chief or the authorized designee at the time of death.

The Responsible Physician should also be notified and should coordinate with the Corrections Chief, who will be responsible for notifying his/her chain of command regarding all medical issues surrounding the in-custody death.

Information regarding the individual designated by the deceased inmate for notification should be provided to the Coroner or the authorized designee, who is charged with the responsibility of making such notifications.

725.4 DOCUMENTATION

The qualified health care professional on-duty at the time of the in-custody death shall ensure that all witnessed facts concerning the death are documented on the inmate's health record. Written documentation should include, but is not limited to, the time of death, the preceding circumstances surrounding the death, nature of the death, treatment rendered and who was notified of the death and by whom.

The Responsible Physician should initiate a death report and document it in accordance with the Continuous Quality Improvement Policy.

725.5 CLOSING THE MEDICAL RECORD

The Responsible Physician should review the inmate's health record to ensure appropriate entries have been made, and within 24 hours of the death have the original and a complete copy of the medical record made and delivered as follows:

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Inmate Death - Clinical Care Review

- (a) Seal the original in an envelope and retain in the custody of the Responsible Physician.
- (b) Send the copy to the facility for inclusion into the inmate file and retain in accordance with established records retention schedules.

Also refer to the Reporting Inmate Deaths Policy.

725.6 DEATH BY SUICIDE

In the event of a suspected inmate suicide, the qualified health care professional shall make a report within 24 hours to the Responsible Physician containing:

- (a) The inmate's known mental health history.
- (b) The most recent known mental health treatment.
- (c) All known circumstances surrounding the suicide.

A psychological autopsy should be conducted by a qualified mental health care professional if the cause of death is determined to be a suicide.

The initial report should be reviewed by the Responsible Physician and, if available, a mental health care professional. The report should be finalized within 30 days by the Responsible Physician. The findings should be shared with the treating staff.

725.7 DEATH REVIEW

All deaths should be reviewed within 30 days. The review shall consist of an administrative review, the closed medical record and a psychological autopsy if the death was by suicide.

Treating staff shall be informed of the death review and the administrative review findings at the quarterly continuous quality improvement meeting.

Corrective actions identified through the death review should be implemented and monitored through the continuous quality improvement program for systemic issues, and through the patient safety program for staff-related issues.

Nursing Assessment Protocols

726.1 PURPOSE AND SCOPE

The purpose of this policy is to establish standards for evaluating and treating inmates with medical issues that are easily and effectively treated or triaged by nursing personnel who have been properly trained in the use of nursing assessment protocols.

726.2 POLICY

It is the policy of this office that medical care performed by personnel other than a physician shall be performed pursuant to a written protocol or order of the Responsible Physician.

726.3 PROTOCOL DEVELOPMENT AND AUTHORIZATION

The facility's Responsible Physician or the authorized designee shall develop, review and authorize all nursing protocols used for the treatment of inmates, and shall develop, deliver or procure appropriate training for the nurses on their use. Each nursing assessment protocol will have a signed declaration indicating it has been reviewed and approved by the nursing administrator and the Responsible Physician.

The protocols developed shall be appropriate for the training and experience of the health care services staff members who will deliver the services. Each protocol shall comply with the standards of practice for the level of care the health care services staff members are authorized to provide. The protocols shall only include the use of OTC medications.

The Responsible Physician shall review the nursing assessment protocols annually, revising as necessary and dating and signing approved protocols.

726.4 TRAINING

Nurses will be trained and approved in the nursing assessment protocols prior to their use. The training shall be documented and should include:

- (a) Evidence that new nurses have been trained.
- (b) Demonstration of knowledge and skills.
- (c) Evidence of annual review of skills.
- (d) Evidence of retraining when protocols are introduced or revised.

726.5 AUTHORIZED USE OF PROTOCOLS

Nursing staff may use a nursing assessment protocol only after they have been trained and authorized by the Responsible Physician. Nursing assessment protocols shall only be used after a nurse fully evaluates the inmate's complaint and the inmate's condition meets the appropriate criteria.

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Nursing Assessment Protocols

Inmates may only be treated using a nursing protocol for the same condition on two consecutive visits. If the inmate requests service for the same condition a third time, the inmate should be referred to a physician's assistant, nurse practitioner, registered nurse or physician.

The assessment protocols only include the use of OTC medication. When OTCs are administered per the protocol, they do not require the signature of a physician. However, the order and the administration of the medication shall be documented on the medication administration record.

A Registered Nurse (RN) is considered the minimum certification level required to independently initiate medical treatment. The RN must be present to physically assess the inmate; an assessment cannot be done via telephone or electronically.

A Licensed Practical Nurse (LPN) is generally prohibited from independently initiating any standardized protocol. Under very specific circumstances (e.g., early detoxification, history of a seizure disorder), it may be acceptable for an LPN to initiate a standing order following a telephone consultation with a physician, physician's assistant, psychiatrist, dentist or other person who meets the minimum certification level to initiate such orders. Under these circumstances, it is essential that the inmate be personally evaluated within 24 hours by a physician's assistant, nurse practitioner, registered nurse or physician.

Nursing assessment protocols shall not include the administration of any prescription medication, with the exception of protocols addressing an emergency or a life-threatening situation. Treatment with prescription medication may only be initiated upon a written or verbal order from a physician, psychiatrist, dentist or other person who is licensed to dispense medication in the state, either independently or under the supervision of a physician.

Infirmary Care

727.1 PURPOSE AND SCOPE

This policy recognizes that some inmates will need care for an illness or diagnosis that requires daily monitoring, daily medication and/or therapy, or assistance with daily activities at a level that requires skilled nursing intervention. Such inmates are best served in an area expressly designed and operated for providing medical care in close proximity to qualified health care professionals.

727.2 POLICY

It is the policy of this office that infirmary care is provided when appropriate to meet the serious medical needs of inmates. The Responsible Physician shall be responsible for developing and maintaining an infirmary manual that shall be available in the infirmary. The infirmary manual shall include, but is not limited to:

- Nursing care procedures.
- A definition of the scope of infirmary care services available.
- Provisions for a physician to be on-call or available 24 hours a day.
- Guidelines regarding the availability of health care personnel, who shall be on-duty 24 hours a day when inmates are present and shall have access to a physician or registered nurse.
- Provisions ensuring that all inmates are within sight or sound of a staff member.
- Provisions for an infirmary record that is separate from the complete medical record of the inmate.
- Requirements for compliance with applicable state statutes and local licensing.

Except in response to an emergency admission to and discharge from the infirmary shall be controlled by medical orders or protocols issued by a qualified health care professional after a clinical evaluation and the establishment of a treatment plan.

727.3 DOCUMENTATION REQUIREMENTS FOR INFIRMARY PATIENTS

A complete inpatient health record shall be kept for each inmate housed in the infirmary and should include:

- The admitting order that includes the admitting diagnosis, medications, diet, activity restrictions, diagnostic tests required and frequency of vital sign monitoring and other follow-up.
- Complete documentation of the care and treatment given.
- The medication administration record.
- A discharge plan and discharge notes.

Infirmary Care

727.4 INFIRMARY REQUIREMENTS

Inmates in the infirmary shall have access to operable washbasins with hot and cold running water at a minimum ratio of one basin for every 12 inmates, unless state or local building or health codes specify differently. Sufficient bathing facilities shall be provided in the infirmary to allow inmates to bathe daily. At least one bathing facility shall be configured and equipped to accommodate inmates who have physical impairments or who need assistance to bathe. Water for bathing is thermostatically controlled to temperatures ranging from 100 to 120 degrees.

Inmates in the infirmary shall have access to toilets and hand-washing facilities 24 hours a day. Toilets are provided at a minimum ratio of one for every 12 inmates in the male infirmary and one for every eight inmates in the female infirmary. Urinals may be substituted for up to one-half of the toilets in the male infirmary. All housing units with three or more inmates shall have a minimum of two toilets.

Medical Equipment and Supply Control

728.1 PURPOSE AND SCOPE

This policy outlines the control and inventory process to be utilized in accounting for all medical equipment and supplies. Medical equipment and supplies can pose a hazard for both the inmate population and the staff. Unauthorized possession of medical equipment and supplies constitutes possession of contraband. Unauthorized use of medical equipment and supplies violates inmate rules detailed in the inmate handbook. Since it is necessary to have a well-stocked medical space within the secure perimeter of the facility, there must be a plan to ensure that equipment and medical supplies are accounted for and tightly controlled.

728.2 POLICY

It is the policy of this office that all medical equipment, including sharps, dental instruments, needles and other items must be tightly controlled so they cannot be used as weapons or to facilitate the injection of drugs or other substances. Additionally, these tools and supplies must be controlled to prevent exposure to biohazards.

728.3 STAFF RESPONSIBILITIES

It is the responsibility of the Corrections Chief to ensure that the inmate handbook clearly defines the unauthorized possession and/or use of medical equipment and supplies as a rule violation that may result in discipline.

The Responsible Physician or the authorized designee shall create and maintain an inventory log for all medical equipment and supplies. This log will be utilized by medical personnel who work within the facility to track and control medical equipment and supplies. When not in use, all medical equipment and supplies shall be stored in a secure manner to prevent unauthorized access.

At the beginning of each shift, the qualified health care professional shall inventory the medical supplies and equipment within their control. Any time a disposable item is used, the log shall reflect its use and disposal. At the end of each shift, the qualified health care professional will conduct another inventory using the supply and equipment log, and reconcile any disposable supplies used during their shift.

If there is a discrepancy that indicates that medical supplies or equipment are missing, the Shift Supervisor shall be immediately notified. The Shift Supervisor shall initiate a search for the missing supplies and/or equipment. The Shift Supervisor shall document the incident and any actions taken, and provide the Corrections Chief with a complete report.

Continuation of Care

729.1 PURPOSE AND SCOPE

The purpose of this policy is to establish and maintain a proactive health system in the facility that fosters the continuation of health care needs that, if discontinued, would have a negative effect on the health of the inmate. The sole objective is to maintain or improve the health of the inmates. This policy is intended to ensure that inmates receive health services in keeping with current community standards as ordered by qualified health care professionals.

729.2 POLICY

It is the policy of this office that all inmates shall have access to the continuation of care for a health issue, provided the treatment plan meets community standards. The inmate's health care needs will be assessed by qualified health care professionals and continued as determined or referred after release.

729.3 CONTINUITY OF CARE

The Corrections Chief is responsible for coordinating with the Responsible Physician to ensure that all inmates receive appropriate health care, including, but not limited to:

- (a) Newly booked inmates shall have a medical screening as part of the booking and classification process. This screening includes documentation of acute or chronic health issues or conditions, existing injuries and medications or treatments the inmate is currently receiving.
 - 1. Any prior correctional facility health records, including those from other facilities, should be reviewed.
 - 2. Current medications will be verified and continued as deemed appropriate by the Responsible Physician or the authorized designee.
- (b) A health assessment is completed on or before the 14th day of continuous incarceration.
- (c) Individual treatment plans that are used to guide treatment. The format for planning may vary but should include, at a minimum:
 - 1. The frequency of follow-up for medical evaluation and adjustment of treatment modality.
 - 2. The type and frequency of diagnostic testing and therapeutic regimens.
 - 3. When appropriate, instructions about diet, exercise, medication and adaptation to the correctional environment.
 - 4. Custody staff is informed of the treatment plan when necessary, to ensure coordination and cooperation in the ongoing care of the inmate.

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- (d) Reasonable effort should be made to obtain information and records relating to previous health care professionals with the consent of the inmate, if the inmate is currently under medical care.
- (e) Upon transfer to another facility, a medical discharge summary of the inmate's current condition, medications and treatment plan will be forwarded in a sealed envelope (to maintain confidentiality) to the receiving facility.
- (f) Response to requests for health information from medical facilities and health care professionals, with the inmate's written consent.
- (g) When inmates are sent out of the facility for emergency or specialty medical treatment, written information regarding the inmate's reason for transfer, pertinent medical problems and list of current medications should be sent with the inmate and may be given to those providing care upon request. The name and phone number of a contact person who the medical facility can call should be included with the patient health information. Upon the inmate's return to the facility, treatment recommendations should be reviewed by the Responsible Physician or the authorized designee and appropriate plans should be made for continuing care in the facility based on the treating facility's diagnosis, recommended medications and other treatment.
- (h) Upon release from the facility, inmates should be given written instructions for the continuation of care including, but not limited to:
 - 1. The name and contact information of health care facilities for follow-up appointments.
 - 2. Prescriptions and/or an adequate supply of medication for those with chronic medical or psychiatric conditions.

Continuous Quality Improvement

730.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a Continuous Quality Improvement (CQI) process of health care review in an effort to identify improvement needs in policies, processes or staff actions, and to develop and implement better health care strategies to improve the processes and outcomes of the health care services delivered at this facility.

730.2 POLICY

It is the policy of this office that an internal review and CQI process for inmate health care delivery and outcomes is developed and maintained, measurable goals and objectives are established and reviewed annually, and that the process itself is periodically reviewed and updated as needed. The process should be supervised by the Responsible Physician. The data evaluated should result in more effective access to services, an improved quality of care and a better utilization of resources.

730.3 CQI TECHNIQUES AND MONITORING

The CQI process may be applied to any aspect of health care delivery and health service outcomes, including, but not limited to, monitoring and reviewing the following:

- Quality of the medical charts, by the Responsible Physician or the authorized designee
- Investigations of complaints and grievances
- Corrective action plans and plan outcomes
- Deaths in custody, suicide attempts, sentinel events, and incident and management of serious communicable disease outbreaks
- Plans for employee education and training, using investigation findings
- Records of internal review activities
- Quarterly reports to the Responsible Physician and Corrections Chief
- Legal requirements for confidentiality of medical records
- Credentialing (assessing and confirming qualifications), privileging (authorization to provide services), and training of employees and the associated peer review processes
- Condition and effectiveness of the care environment
- Adequacy and quality of supplies and equipment
- Quality of care provided to individual patients
- Accuracy and efficiency of pharmacy services and medication administration
- Ease of access to care

Continuous Quality Improvement

- Risk minimization tactics
- Data describing the types, quality and quantity of care provided
- Accreditation compliance

730.4 CQI COMMITTEE MEETINGS

The correctional facility CQI committee should meet quarterly under the direction of both the committee chair and the Responsible Physician. The CQI meetings may be conducted at the same time as quarterly administrative meetings, but CQI minutes must be produced and maintained separately from any other minutes.

The CQI minutes are not subject to disclosure outside of the CQI program, including requests from local, regional and national entities. Other interested parties with a need to know are only entitled to the disclosure of information that includes:

- (a) Problems that may have been identified.
- (b) Solutions that have been agreed upon.
- (c) Persons responsible for implementing the corrective action.
- (d) The time frame for implementing the corrective actions.

Informed Consent and Right to Refuse Medical Care

731.1 PURPOSE AND SCOPE

This policy recognizes that inmates have a right to make informed decisions regarding their health care. It establishes the conditions under which informed consent should be obtained prior to treatment, when medical care may proceed without consent, the documentation process for the refusal of medical care and the retention of refusal forms.

731.2 POLICY

It is the policy of this office that generally, all health care examinations, treatments and procedures shall be conducted with the informed consent of the inmate. Exceptions may include emergencies, life-threatening conditions and public health matters.

731.3 INFORMED CONSENT

The qualified health care professional initiating treatment shall inform the inmate of the nature of the treatment and its possible side effects and risks, as well as the risks associated with not having the treatment.

For invasive procedures or any treatment where there is some risk to the inmate, informed consent is documented on a written form containing the signatures of the inmate and a health services staff witness.

A signed informed consent shall be obtained and witnessed by the prescribing psychiatrist for the initiation of psychotropic medication.

Appropriate arrangements shall be made to provide language translation services as needed before an inmate signs any informed consent form.

For minors and conservatees, the informed consent of a parent, guardian, or legal custodian applies where required by law. Absent informed consent in non-emergency situations, a court order is required before involuntary treatment can be administered to an inmate.

731.4 REFUSAL OF TREATMENT

When an inmate refuses medical, mental health or dental treatment or medication, he/she shall be counseled regarding the necessity of the treatment/medication and the consequences of refusal. The inmate shall then be requested to sign a form acknowledging that he/she refused an examination and/or treatment.

The form shall be filled out completely by the qualified health care professional and include the inmate's name, booking number, treatment/medication refused, the risks or consequences of refusal and the inmate's mental status. The form must be signed by the inmate and a witness.

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In the event that the inmate refuses to sign, a notation to this effect shall be documented on the inmate signature line. This shall require a signed acknowledgement by two witnesses.

Documentation regarding the inmate's mental status shall be noted in the medical record, along with a brief note describing the intervention of the qualified health care professional.

The completed form is to be placed in the inmate's medical record.

It is the responsibility of the qualified health care professional to refer all refusal forms to the Responsible Physician.

Any time there is a concern about the decision-making capacity of the inmate, an evaluation shall be conducted, particularly if the refusal is for critical or acute care.

All refusals of psychotropic medication shall be referred to the Responsible Physician or the authorized designee.

Any time an inmate refuses to take his/her medication, attend sick call or a scheduled medical appointment, a signed refusal must be obtained by the qualified health care professional.

The refusal form shall be a permanent part of the inmate's medical record.

The inmate may revoke his/her refusal at any time.

731.5 RECORDS

The Corrections Chief or the authorized designee shall work with the Responsible Physician to develop medical care consent and refusal forms and a system for retaining records in the inmate's health file in accordance with established records retention schedules.

Management of Health Records

732.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a uniform manner of maintaining the active inmate health records for easy accessibility during clinical treatment, and the storage methods for inactive health records. This policy also recommends practices that will ensure the confidentiality of health record information by separating it from custody records.

732.2 POLICY

It is the policy of the office that active inmate health records will be maintained in the medical area in an order that provides for easy accessibility during treatment. Inmate health records should be maintained separately from custody records and under secure conditions, in compliance with all local, state and federal requirements.

The Responsible Physician or the authorized designee should establish standardized procedures for recording information in the file and for the control and access to inmate health records. Inmate workers shall not have any access to inmate health records.

732.3 INITIATING A HEALTH RECORD

Following the initial medical screening process, the qualified health care professional shall open a health record for each inmate who requires or requests additional health care. The Responsible Physician shall be responsible for developing and implementing procedures for standardized record formatting.

732.4 CONFIDENTIALITY OF INMATE HEALTH RECORDS

Information regarding an inmate's health status is confidential. Active health records shall be maintained separately from custody records. Access to an inmate's health record shall be in accordance with state and federal law.

The inmate's health record, may be disclosed, with the inmate's written authorization, to any person so designated. A fully completed authorization for release and/or a disclosure of medical information form shall be required prior to disclosure based upon informed consent.

The inmate's medical information may be disclosed by the qualified health care professional without the inmate's authorization under the following circumstances and when approved by the Responsible Physician or the authorized designee:

- (a) To known qualified health care professionals who are members of the health care team responsible for the inmate's care.
- (b) To a family member. However, the only information that may be released is the inmate's custody status and whether the inmate is receiving medical care.
- (c) To correctional staff regarding inmates in the any of following categories:
 - 1. Suicidal

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2. Homicidal
 3. A clear custodial risk
 4. Presenting a clear danger of injury to self or others
 5. Gravely disabled
 6. Receiving psychotropic medications
 7. A communicable disease risk
 8. In need of special housing
- (d) To the local public health officer when an inmate is part of a communicable disease investigation.
- (e) To the presiding judge of the court issuing a subpoena duces tecum.
- (f) To a law enforcement officer for purposes of a criminal investigation.
- (g) To the Prosecuting Attorney when necessary to resolve an inmate's claim or complaint.

Attorneys requesting health record information regarding an inmate should be advised that an authorization for release and/or a disclosure of medical information form or an attorney release form signed by the inmate is required. The signed release form should be given to the medical records clerk for processing.

The Corrections Chief, in consultation with the Responsible Physician, shall designate personnel who will be responsible for reviewing all requests for access to medical records and who will propose related policies and procedures and other activities designed to facilitate proper documentation of health care and access to records.

732.5 HEALTH RECORD CONTENTS

- (a) To standardize record keeping and to identify responsibilities, the following should apply to inmate health records:
1. The qualified health care professional or the authorized designee should be responsible for ensuring that all required information and forms are included in the medical records. There should also be a periodic informal review as described in the Continuous Quality Improvement Policy in this manual.
 2. The qualified health care professional or the authorized designee should be responsible for ensuring incoming written findings and recommendations are returned with the inmate from any off-site visit and filed in the inmate's medical record.
- (b) Inmate health records shall minimally contain, but are not limited to, the following elements:

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1. Identifying information (e.g., inmate name, identification number, date of birth, sex) on each sheet in the file
2. A completed inmate medical/mental health screening form
3. Health appraisal information and data forms
4. A problem summary, containing medical and mental health diagnoses and treatments as well as known allergies
5. Immunization records
6. Progress notes of all significant findings, diagnoses, treatments and dispositions
7. Clinician orders for prescribed and administered medications
8. X-ray and laboratory reports and diagnostic studies
9. A record of the date, time and place of each clinical encounter with inmates
10. Health service reports
11. Individualized treatment plans when available or required
12. Consent and refusal forms
13. Release of information authorization forms (including HIPPA forms)
14. Results of specialty consultations and off-site referrals
15. Special needs treatment plans, if applicable

732.6 ACTIVE INMATE HEALTH RECORDS

Active inmate health records will be accessible only to qualified health care professionals or the correctional facility supervisor under certain circumstances.

All entries in the inmate health record will have the place, date, time, signature and title of each individual providing care and should be legible.

Documentation in the inmate health record is done in the subjective, objective, assessment and plan (SOAP) format. An inmate health record is opened at the first health encounter following the initial medical screening.

If an inmate has been previously incarcerated, the previous health record should be reactivated. If a new record has been opened and a previous record exists, medical records personnel should merge the two records in order to compile a complete history, unless mandated statutory retention schedules have provided for the destruction of one file and there is a need to create a new file.

New information shall be entered on the health record at the completion of each encounter. All inmate health records shall be returned to the file prior to end of each watch.

Management of Health Records

732.7 INACTIVE MEDICAL RECORDS

When an inmate is released from custody, medical records personnel should remove the inmate's health record from the active file.

The health record should be reviewed for completeness. Any loose documents should be filed according to the established health record format.

The health record should be securely stored in the area designated for inactive inmate health records, in accordance with the laws of the state but no less than 10 years from the date of the last clinical encounter. Adult records and juvenile records may have different jurisdictional retention requirements.

Inactive inmate medical records may be stored off-site. Health record information from inactive files may be transmitted to specific and designated physicians or medical facilities upon the written request or authorization of the inmate.

732.8 ELECTRONIC MEDICAL RECORDS

If medical records are maintained in an electronic format, the system should be structured with redundancies to ensure the records will survive any system failure.

Inmate Health Care Communication

733.1 PURPOSE AND SCOPE

The purpose of this policy is to establish and maintain effective communication between the treating qualified health care professionals and custody personnel. This communication is essential at all levels of the organization to ensure the health and safety of all occupants of the facility.

733.2 POLICY

It is the policy of this office that effective communication shall occur between the Corrections Chief and the treating qualified health care professionals regarding any significant health issues of an inmate. All health issues should be considered during classification and housing decisions in order to preserve the health and safety of the occupants of this facility.

When a qualified health care professional recognizes that an inmate will require accommodation due to a medical or mental health condition, custody personnel shall be promptly notified in writing.

The Corrections Chief shall be responsible for establishing measurable goals relating to processes that enhance good communication between the qualified health care professionals and the custody staff. The Corrections Chief should also establish, in writing, the desired performance objectives relating to practices that support good communication between the qualified health care professionals and the custody staff. The Corrections Chief should review the documents annually for any necessary revisions or updates in support of continuous improvement in the delivery of health care services.

733.3 MANAGING SPECIAL NEEDS INMATES

Upon an inmate's arrival at the facility, the qualified health care professional, in consultation with the custody staff, should determine if the inmate has any special needs.

- (a) If staff determines that an inmate has special needs, a communication form or other appropriate documentation relating to special needs should be completed and sent to classification personnel, the Shift Supervisor and the housing officer. This is to ensure that the inmate is assigned to a housing unit that is equipped to meet his/her special needs.
- (b) The qualified health care professional should arrange for the appropriate follow-up evaluation.
- (c) The health care of special needs inmates should be continuous and ongoing. At minimum, the inmate should be seen by the Responsible Physician or a qualified health care professional at least once every 90 days to evaluate his/her continued designation as a special needs inmate.

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- (d) Inmates who have been determined by qualified health care professionals to require a special needs classification should be seen at least once monthly by a qualified health care professional.
- (e) Prior to transfer to another facility, a medical transfer summary should be completed detailing any special requirements that should be considered while the inmate is in transit and upon his/her arrival at the destination. Discharge planning should be included, as appropriate.
- (f) A treatment plan should be developed for each inmate and should include, at a minimum:
 - 1. The frequency of follow-up for medical evaluation and anticipated adjustments of the treatment modality.
 - 2. The type and frequency of diagnostic testing and therapeutic regimens.
 - 3. When appropriate, instructions about diet, exercise, adaptation to the correctional environment and using prescribed medications.
- (g) When clinically indicated, the qualified health care professionals and the custody personnel should consult regarding the condition and capabilities of inmates with known medical and/or psychiatric illnesses or developmental disabilities prior to any of the following:
 - 1. Housing assignment
 - 2. Program or job assignment
 - 3. Admissions to, and transfers from or between institutions
 - 4. Disciplinary measures for mentally ill patients
- (h) Qualified health care professionals and custody personnel should communicate about inmates who require special accommodation. These include, but are not limited to, inmates who are:
 - 1. Chronically ill
 - 2. Undergoing dialysis
 - 3. In an adult facility, as an adolescent
 - 4. Currently in treatment for a communicable disease
 - 5. Physically disabled
 - 6. Pregnant
 - 7. Frail or elderly
 - 8. Terminally ill
 - 9. Mentally ill or suicidal

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10. Developmentally disabled

733.4 NOTIFICATION TO SUPERVISORS

In the event that there is no mutual agreement regarding an individual or group of inmates who require special accommodation for medical or mental health conditions, supervisors in the respective chain of command within the health care and custody staff should address these issues.

Forensic Evidence

734.1 PURPOSE AND SCOPE

This policy provides guidelines for the collection of biological samples from those individuals required to provide samples upon arrest for certain offenses. This policy does not apply to biological samples collected at a crime scene. Nor does it apply to biological samples collected from those required to register, for example, as sex offenders.

734.2 DEFINITION

Forensic evidence is evidence obtained by scientific methods such as ballistic, blood test, and DNA test usually for presentation in court by an expert witness to establish the guilt or innocence of possible suspects. It does not include routine searches for contraband, but may include the later testing of the contraband.

734.3 POLICY

Health care services staff will assist in the expeditious collection of blood samples of forensic evidence from arrestees in accordance with the laws of this state and with as little reliance on force as practicable.

Health care providers trained and qualified to draw blood are the only persons authorized to perform the withdrawal of blood in a medically approved manner.

Health care services staff may also collect blood or urine for testing for alcohol or drugs when it is done for medical purposes and under a physician's order. Health care services staff may conduct inmate-specific court-ordered laboratory tests and examinations or radiology procedures with the consent of the inmate.

Collection may occur by court order or consent of subject.

Included in the procedures that health care services staff is prohibited from involvement are:

- (a) Body cavity searches.
- (b) Psychological evaluations for use in adversarial proceedings.
- (c) Any medical procedure, except emergency lifesaving measures, that does not have the inmate's written consent, unless ordered by the court.

It shall be the responsibility of the Sheriff or the authorized designee to arrange for appropriately trained professionals to collect forensic evidence for disciplinary or legal proceedings.

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734.4 POINT OF COLLECTION

As soon as administratively practicable after arresting agency has secured the arrestee in Law Enforcement observation room in the SCCJC booking area.

SCCJC staff should not be involved in the collection of blood draws.

Oral Care

735.1 PURPOSE AND SCOPE

The intent of this policy is to ensure that inmates have access to dental care and treatment for serious dental needs. While the focus of this policy is primarily on urgent and emergent dental care, as with medical or mental health care, dental care is available based upon patient need.

735.2 POLICY

It is the policy of this office that oral care is provided under the direction of a dentist licensed in this state, and that care is timely and includes immediate access for urgent or painful conditions. There are established priorities for care when, in the dentist's judgment, the inmate's health would otherwise be adversely affected.

735.3 ACCESS TO DENTAL SERVICES

Emergency and medically required dental care is provided to each inmate upon request. Dental services are not limited to extractions. It is the goal of dental services to alleviate pain and suffering, ensure that inmates do not lose teeth merely as a consequence of incarceration and to provide appropriate dental service whenever medically required to maintain nutrition.

Access to dental services should be as follows:

- (a) All inmates wishing to see the dentist for a non-emergency issue shall complete a sick call form. Requests should be triaged according to the nature and severity of the problem and should be seen by a dentist according to assigned priority. Inmates requesting dental services on weekends or after hours will initially be evaluated by a qualified health care professional and referred appropriately.
- (b) If an inmate suffers obvious trauma or other dental emergency, the qualified health care professional may arrange for immediate access to a dentist or may transfer the inmate to an emergency room for treatment.
- (c) Inmates who are furloughed or sentenced to work release or another form of community release may see their own dentist pursuant to approval of scheduling arrangements with facility medical and custody staff. The inmate will be financially responsible for any payment. The Office is under no obligation to transport the inmate to this appointment.
- (d) Records documenting all dental treatment should be maintained in the inmate's medical record file and retained in accordance with established records retention schedules. Examination results should be recorded on a uniform dental record using a numbered system.
- (e) Medications prescribed by a dentist should be administered in accordance with pharmacy procedures and documented in the medical record.

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- (f) Necessary dental services identified by a dentist that are not available on-site should be provided by referral to community resources as deemed necessary by the facility dentist.

735.4 DENTAL CARE OPTIONS

Inmates should be offered a dental screening by health care personnel or a dentist within 14 days of incarceration, unless such a screening was completed within the past six months. This dental screening should include an evaluation of the current dental status and instruction on oral hygiene and preventive oral education.

Inmates should be offered a dental examination, supported by diagnostic X-rays if necessary, by a dentist within 12 months of incarceration.

Inmates who are scheduled to be incarcerated for less than 12 months should have access to the treatment of dental pain, fillings, extractions of non-restorable teeth, cleaning and treatment of symptomatic areas and repair of partials and dentures.

Pharmacy Services

736.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the procedures and protocols under which the facility manages a pharmaceutical operation in order to comply with federal, state and local laws governing prescribing and administering medication.

736.1.1 DEFINITIONS

Definitions related to this policy include:

Administration - The act of giving a single dose of a prescribed drug or biological substance to an inmate, by a qualified health care professional or health-trained correctional staff member. The complete act of administration includes removing an individual dose from a properly labeled container dispensed by the pharmacy, verifying it with the prescriber's order, giving the individual dose to the proper inmate, at the proper time, by the proper route and promptly recording the time and dose given. Administration is limited to qualified health care professionals and health-trained correctional staff members in accordance with state law (RCW 70.48.490).

Compounding - The act of selecting, mixing, combining, measuring, counting or otherwise preparing a drug or medication.

Controlled substances - Medications classified as Schedule II-IV by the Drug Enforcement Administration (DEA) or under Washington's Uniform Controlled Substance Act (21 USC § 13) (RCW 69.50).

Delivery - The act of moving a properly labeled prescription container (e.g., a dated container that includes the name of the individual for whom the drug is prescribed, the name of the medication, dose and instructions for taking the medication, the name of the prescribing physician and expiration dates). Under these circumstances a single dose at a time can be delivered to the inmate, according to the written instructions, by any qualified health care professional or health-trained correctional staff member under the provisions of RCW 70.48.490.

Dispensing - Those acts of processing a drug for delivery or administration to an inmate pursuant to the order of a qualified health care professional. Dispensing consists of:

- Comparing directions on the label with the directions on the prescription or order to determine accuracy.
- Selection of the drug from stock to fill the order.
- Counting, measuring, compounding or preparing the drug.
- Placing the drug in the proper container and affixing the appropriate prescription label to the container.
- Adding any required notations to the written prescription.

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Dispensing does not include the acts of distributing, delivery or administration of the drug. The function of dispensing is limited to pharmacists and qualified health care professionals.

Distributing - The movement of a drug, in the originally labeled manufacturer's container or in a labeled pre-packaged container, from the pharmacy to a health care services area.

Dose - The amount of a drug to be administered at one time.

Drug - An article recognized in the United States Pharmacopoeia and National Formulary (USP-NF), the Homeopathic Pharmacopoeia of the United States or any supplement that is intended for use in the diagnosis, cure, mitigation, treatment or prevention of disease in humans. A substance, other than food, intended to affect the structure or any function of the human body.

Formulary - A list of drugs approved for use in the facility. The formulary is developed, maintained and periodically updated to ensure that drug therapy is safe, optimum and cost efficient.

Legend drug - Any article, substance, preparation or device that bears the legend "Federal law prohibits dispensing without a prescription." Legend drugs are available for use only on the written order of a qualified health care professional.

Non-legend drugs - Drugs commonly referred to as over-the-counter (OTC) drugs, available for use without the written order of a qualified health care professional.

Pharmacy services - The functions and activities encompassing the procurement, dispensing, distribution, storage and control of all pharmaceuticals used within the correctional facility, the monitoring of inmate drug therapy and the provision of inmate/patient drug information.

PRN - Pro re nata in Latin for "as needed."

736.2 POLICY

It is the policy of this office that all pharmaceutical operations shall meet all federal, state and local legal requirements and be sufficient in scope to meet the needs of the facility population. All pharmaceutical services shall be clinically appropriate and provided in a timely, safe and legal manner.

The Corrections Chief or the Sheriff shall consult with one or more pharmacists and one or more licensed physicians or nurses in the course of developing the procedures related to this policy. A copy of the current policy regarding medication management will be provided to the Washington Association of Sheriffs and Police Chiefs (RCW 70.48.490).

736.3 PRESCRIBING MEDICATIONS

All medications shall be prescribed in a safe and effective manner for clinically appropriate reasons that are well documented in the individual patient medical record and retained in accordance with established records retention schedules.

- (a) Any medication ordered by a qualified health care professional shall specify the drug name, strength, dose, route, frequency, discontinuation date and indication for use if the medication is intended to be used PRN (as needed). Medication orders shall not be

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prescribed for an indefinite period. The qualified health care professional shall review medication regimens at specified time intervals. An order to continue or discontinue any medication shall be documented in the medical record, which will supersede any earlier orders for that medication. A physician's signature shall be required on all verbal orders within 72 hours of the order.

- (b) Any medication order that is not complete or is questionable shall not be prepared until clarification is received from the qualified health care professional. Staff shall make an effort to obtain order clarification in a timely manner.
- (c) A formulary shall be established by the Responsible Physician and shall contain all prescription and non-prescription medications available for patient use. Non-formulary medication shall only be ordered upon approval of the Responsible Physician. Medication shall be prescribed from the approved formulary unless approval has been obtained for non-formulary medications.
- (d) Processes shall be established by the Responsible Physician and approved by the Corrections Chief for medication procurement, receipt, distribution, storage, dispensing, administration and proper disposal.
- (e) Inmates may be permitted to possess and self-administer some medications with the exception of psychotropic medication, seizure medication, controlled drugs, tuberculosis (TB) medication or any medication that is required to be directly observed therapy (DOT) where a qualified health care professional or health-trained correctional staff member monitors the inmate taking each dose. Self-administered medication shall be monitored and controlled in accordance with facility directives. Inmate drug education information shall be provided to inmates for all self-administered medication.
- (f) Apparent adverse drug reactions shall be recorded in the inmate's health record by the qualified health care professional.
- (g) The qualified health care professional or the Shift Supervisor shall be notified of all medication errors in a timely manner. Medication error reports shall be completed on all known medication errors.

736.4 PHARMACEUTICAL OPERATIONS

- (a) The Responsible Physician, in conjunction with the pharmacist, shall establish the facility formulary; ensure appropriate medication storage, handling and inventory control; provide direction for the destruction of expired medication; inspect the pharmacy operation quarterly and regularly review charts on medication utilization.
 - 1. All medication preparation, storage and administration areas shall be clean, organized, illuminated, ventilated and maintained at an appropriate temperature range. Any mobile medication cart that is not being used in the administration

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- of medication to inmates shall be stored in a locked room that meets similar requirements.
2. Medication and device cabinets (stationary or mobile) shall be closed and locked when not in use.
 3. Controlled substances shall be stored and handled in accordance with DEA regulations.
- (b) The Responsible Physician shall be responsible for establishing and maintaining a system for the secure storage and accountability of all controlled substances, syringes and needles. A count of syringes, needles and controlled substances shall be taken and verified as correct and documented at the change of each shift by two licensed personnel. An incorrect count shall be reported immediately to the Shift Supervisor. Medications shall be stored under proper conditions of security, segregation and environmental control at all storage locations.
1. Medication shall be accessible only to legally authorized persons.
 2. Medication requiring refrigeration shall be stored separately, either in a refrigerator that is locked or in a refrigerator that is in a locked room, and that is used exclusively for medication and medication adjuncts. The inside temperature of this refrigerator shall be maintained between 36 and 46 degrees. The inside temperature shall be monitored and recorded daily on a refrigerator temperature log.
 3. Antiseptics and other medications for external use shall be stored separately from internal and injectable medications.
- (c) Medication shall be kept in pharmacist-packaged or the original manufacturer's labeled containers. Medication shall only be removed from these containers in preparation of a dose for administration. Drugs dispensed to inmates who are off grounds or are being discharged from the facility shall be packaged in accordance with the provisions of the Federal Poison Prevention Packaging Act (15 USC § 1471, 15 USC § 1472, 15 USC § 1473, 15 USC § 1474, 15 USC § 1475, 15 USC § 1476 and 15 USC § 1477) and any other applicable state and federal law.
- (d) Medication shall be properly labeled with the label firmly affixed to the prescription package. Each label shall indicate the name, address and telephone number of the dispensing pharmacy in addition to the following:
1. The medication name, strength, quantity, manufacturer, manufacturer's lot number or internal control number and expiration date.
 2. Directions for use, dispensing date and drug order expiration date. Accessory or cautionary labels shall be applied as appropriate.

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3. In cases where a multiple dose package is too small to accommodate the prescription label, the label may be placed on an outer container into which the multiple dose packages are placed.
- (e) Medication that is outdated, visibly deteriorated, unlabeled, inadequately labeled, discontinued or obsolete shall be stored in a separate secure storage area and disposed of in accordance with the following requirements:
 1. Controlled substances shall be disposed of in accordance with the state and federal regulations.
 2. Unused, outdated or discontinued doses or excess inventories of non-controlled drugs that have not been in the possession of the inmate shall be returned to the pharmacy for disposition.
 3. Returned, non-controlled substances that have been in the possession of the inmate, unclaimed personal medication collected at intake or individual doses of medication removed from the original pharmacy packaging shall be destroyed at the facility by health services staff and placed in the medical waste disposal system.
 4. Pharmaceutical waste shall be separated from other types of medical waste for handling and disposal purposes, and will be discarded in designated containers distinctly identified for medical waste.

Current drug reference information, such as a Physician's Desk Reference (PDR) or an approved website, shall be available to staff.

An annual report on the status of the pharmacy operation will be prepared by the pharmacist and provided to the Responsible Physician and the Corrections Chief.

736.5 PER DOSE MEDICATION ADMINISTRATION

Psychotropic medication, controlled substances, TB medication, seizure medication and those listed as DOT shall be administered to inmates on a per dose basis. Health-trained correctional staff members may deliver medication acting on the order of the Responsible Physician.

- (a) Each medication ordered on a per dose basis for individual inmates shall be kept in the medication room of the facility.
 1. Medication administered by injection shall be given by a physician or other qualified health care professional.
 2. Under the orders of a physician or other qualified health care professional, insulin-dependent diabetic inmates shall be permitted to self-administer insulin under the direct supervision of a health-trained correctional staff member.
- (b) Medication dispensing envelopes bearing the inmate's name, booking number, housing location and the medication and its dosing schedule shall be generated

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for each inmate receiving per dose medication. These shall be administered from the individually packaged supply and delivered to the patient at each scheduled medication time.

- (c) The qualified health care professional or health-trained correctional staff member will confirm the inmate's identity prior to administering the medication by comparing the name/booking number on the dispensing envelope with appropriate inmate identification.
 - 1. Inmates should have a fluid container and adequate fluid to take the medication being administered.
 - 2. The qualified health care professional or health-trained correctional staff member should observe the inmate taking the medication to prevent "cheeking" or palming.
 - 3. The qualified health care professional or health-trained correctional staff member should inspect the inmate's mouth after the inmate swallows the medication to ensure it was completely ingested. If the inmate appears to be "cheeking" the medication, a chart entry will be made and a notation entered on the medication envelope, as well as the back of the Medication Administration Record (MAR).
- (d) The qualified health care professional or health-trained correctional staff member shall record each medication administered by initialing the appropriate date and time. The qualified health care professional or health-trained correctional staff member shall authenticate the initials by placing his/her initials, signature or name stamp in the designated area on the lower portion of the MAR. Pre-charting is not allowed.
 - 1. In the event that medication cannot be administered (the inmate is in court or the medication is not in stock), a note explaining the situation and planned action shall be made on the back of the MAR or on a progress note.
- (e) Inmates who refuse their medication must verbally inform the qualified health care professional at the medication round. The qualified health care professional shall indicate the refusal on the medication log. The qualified health care professional shall review the medication logs.
 - 1. Patterns of refused medications will be documented on the inmate's medical record.
 - 2. The qualified health care professional shall make a reasonable effort to convince the inmate to voluntarily continue with the medication as prescribed.
 - 3. The qualified health care professional shall report continued refusals to the Responsible Physician and have the inmate complete and sign a medication refusal form.
- (f) The delivery of medication should be made under the direction of the Responsible Physician or a qualified health care professional.
- (g) No inmate should be deprived of prescribed medication as a means of punishment.

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736.6 SELF-ADMINISTRATION OF MEDICATION

Select inmates may be allowed to self-administer medication, except psychotropic medication, seizure medication, controlled drugs, TB medication or any medication that is required to be DOT.

The qualified health care professional ordering medication should educate the inmate regarding potential side effects and the proper use of the medication.

- (a) The qualified health care professional should order prescription medication for inmates on an individual basis and must document that each inmate who is approved to receive medications for self administration is capable of understanding the rules regarding self-administration.
 - 1. Medication orders may also be generated through a pre-booking examination or medical clearance obtained at a hospital or other clinic, an emergency room visit or evaluation by an on-site qualified health care professional.
 - 2. Any questions the inmate may have concerning his/her medication should be addressed at this time.
 - 3. The inmate shall be instructed to carry medication at all times or to secure it in designated areas within the housing unit.
 - 4. All self-administered medications are to be documented on the MAR.
- (b) Upon receipt of the medication, the qualified health care professional or health-trained correctional staff member should issue the inmate his/her medication as follows:
 - 1. The qualified health care professional or health-trained correctional staff member issuing the medication should confirm correct identity by comparing the name/booking number of the self-carry package to the inmate's identification badge/armband.
 - 2. When issuing self-administered medication, documentation on the MAR should include the number of pills issued and the qualified health care professional or health-trained correctional staff member's initials.
- (c) The continuous quality improvement coordinator should monitor inmate compliance by randomly interviewing inmates about the name, purpose, dose, schedule and possible side effects of their prescription medication and will inspect the inmates' self-carry medication and review their medical records. Any violation of the rules will be reported to the custody liaison.
- (d) Any self-administered medication may be changed to per-dose at the discretion of the medical staff if the inmate is not responsible enough to self-administer the medication or has a history of frequent rule violations. Documentation in the medical record should accompany any decision to change the medication to per-dose.

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- (e) Inmates who arrive at the facility with prescribed medication should be administered per-dose for any new medications or refills until the new medication or refill is received from the pharmacy.

736.7 NON-PRESCRIPTION MEDICATION

Any OTC non-prescription medication available to inmates for purchase in the facility commissary shall be approved jointly by the Corrections Chief and the Responsible Physician and shall be reviewed annually.

The Corrections Chief and the Responsible Physician may establish a limit on the amount of non-prescription medication an inmate may purchase and have in his/her possession at any time. Inmates with medication in an amount above the proscribed limit may be subject to disciplinary sanctions.

736.8 TRAINING

All health-trained correctional staff members authorized to deliver, administer and provide medication assistance shall be trained pursuant to the provisions of RCW 70.48.490 prior to engaging in any tasks related to delivery or administration of medication (RCW 70.48.490).

Release Planning

737.1 PURPOSE AND SCOPE

This office recognizes that inmates may require information and assistance with health care follow-up upon release from custody. The purpose of this policy is to establish guidelines to assist staff with providing resources for the continuity of an inmate's health care after he/she is released from custody.

737.2 POLICY

The qualified health care professional should work with correctional staff to ensure that inmates who have been in custody for 30 or more days and have pending release dates, as well as serious health, dental or mental health needs, are provided with medication and health care resources sufficient for the inmate to seek health care services once released.

The Corrections Chief or the authorized designee shall be responsible for ensuring that release preparation curriculum and materials are developed and maintained for this purpose, and that community resource information is kept current. Release planning should include:

- (a) Resources for community-based organizations that provide health care services, housing, funding streams, employment and vocational rehabilitation.
- (b) Lists of community health professionals.
- (c) Discussions with the inmate that emphasize the importance of appropriate follow-up care.
- (d) Specific appointments and medications that are arranged for the inmate at the time of release.

737.3 PREPARATION FOR RELEASE

Upon notification of the imminent release of an inmate who has been identified as having serious medical or mental health needs, release planning shall include the following:

- (a) A medical screening shall be conducted to assess the inmate's immediate medical needs, and arrangements should be made for community follow-up where needed, including sufficient medication.
- (b) With the inmate's written consent, the qualified health care professional may:
 - 1. Share necessary information with health care services.
 - 2. Arrange for follow-up appointments.
 - 3. Arrange for the transfer of health summaries and relevant parts of the health record to community health care services or others who are assisting in planning for or providing services upon the inmate's release.

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- (c) Contact with community providers shall be documented via an administrative note in the inmate's health record.
- (d) Inmates with serious mental health issues, including those receiving psychotropic medication, shall be informed about community options for continuing treatment and provided with follow-up appointments, when reasonably possible.
- (e) Medication will be provided as appropriate.

737.4 RELEASE PLANNING RECORDS

All records of community referrals, transfer forms, logs, documentation of release planning, lists of medication provided, records release authorization forms and any other relevant documents shall be maintained in the inmate's health file and retained in accordance with established records retention schedules.

Privacy of Care

738.1 PURPOSE AND SCOPE

This policy recognizes that inmates have a right to privacy and confidentiality regarding their health-related issues. It also recognizes inmates' right to health care services that are provided in such a manner as to ensure that privacy and confidentiality, and encourage inmates use and trust of the facility's health care system.

738.2 POLICY

It is the policy of this office that, in order to instill confidence in the health care system by the inmate population, all discussions of health-related issues and clinical encounters, absent an emergency situation, will be conducted in a setting that respects the inmate's privacy and encourages the inmate's continued use of health care services.

738.3 CLINICAL EVALUATIONS

Emergency evaluations and rendering of first aid should be conducted at the site of the emergency, if reasonably practicable, with transfer to the medical clinic or emergency room as soon as the inmate is stabilized.

Inmates shall have a same-sex escort for encounters with an opposite-sex qualified health care professional or health-trained staff member, as appropriate.

Correctional personnel should only be present to provide security if the inmate poses a risk to the safety of the qualified health care professional or others.

738.4 REPORTING INAPPROPRIATE ACCESS OF MEDICAL INFORMATION

The Corrections Chief and health services administrator shall establish a process for staff, inmates or any other persons to report the improper access or use of medical records.

738.5 TRAINING

All corrections personnel, interpreters and qualified health care professionals who are assigned to a position that enables them to observe or hear qualified health care professional/inmate encounters shall receive appropriate training on the importance of maintaining confidentiality when dealing with inmate health care. The Training Sergeant shall be responsible for scheduling such training and for maintaining training records that show the employee attended, in accordance with established records retention schedules.

Chapter 8 - Environmental Health

Sanitation Inspections

800.1 PURPOSE AND SCOPE

The Skagit County Sheriff's Office has established a plan to promote and inspect the environmental safety and sanitation requirements established by applicable laws, ordinances and regulations. This policy establishes a plan of housekeeping tasks and inspections required to identify and correct unsanitary or unsafe conditions or work practices in this facility.

800.2 POLICY

It is the policy of the Office to maintain a safe and sanitary facility. To accomplish this goal the Office will maintain a written plan that contains schedules and procedures for conducting weekly and monthly sanitation inspections of the facility. The Corrections Chief will ensure that the plan addresses, at minimum, the following:

- (a) Schedules of functions (e.g., daily, weekly, monthly or seasonal cleaning, maintenance, pest control and safety surveys).
- (b) Self-inspection check lists to identify problems and to ensure cleanliness of the facility.
- (c) Procedures, schedules and responsibilities for coordinating annual inspections by the county health department, including how deficiencies on the inspection report are to be corrected in a timely manner.
- (d) A list of approved equipment, cleaning compounds, chemicals and related materials used in the facility, and instructions on how to operate, dilute or apply the material in a safe manner.
- (e) Record-keeping of self-inspection procedures, forms and actions taken to correct deficiencies.
- (f) Training requirements for custody staff and inmate workers on accident prevention and avoidance of hazards with regard to facility maintenance.

Consideration should be given to general job descriptions and/or limitations relating to personnel or inmates assigned to carrying out the plan. Specialized tasks, such as changing air filters and cleaning ducts or facility pest control, are more appropriately handled by the Facility Manager or by contract with private firms.

Inmates engaged in sanitation duties shall do so only under the direct supervision of qualified custody staff. When inmate work crews are used, additional controls should be implemented to account for all equipment and cleaning materials.

All staff shall report any unsanitary or unsafe conditions to a supervisor. Staff shall report repairs needed to the physical plant and equipment by submitting a work order to a supervisor. Shift Supervisors will conduct cleaning inspections on a daily basis. The Corrections Chief or the authorized designee will conduct weekly safety and sanitation inspections of the facility.

Sanitation Inspections

800.3 WORK ORDERS

All reports of unsafe or unsanitary conditions as well as repairs needed to the physical plant and equipment shall be documented in a work order. The Corrections Chief will designate a staff person to receive these work orders and take appropriate action to ensure the repairs or action taken. All work and action taken will also be documented. Reports for budget resources above and beyond already budgeted maintenance items shall be reported to the Corrections Chief.

800.4 MATERIAL SAFETY DATA SHEETS (MSDS)

Materials and substances used in the operation and maintenance of the facility may qualify as hazardous material. Hazardous material is required to have a companion Material Safety Data Sheet (MSDS) that is provided by the manufacturer or distributor of the material. The MSDS provides vital information on individual hazardous material and substances, including instructions on safe handling, storage, and disposal, prohibited interactions and other details relative to the specific material.

The Corrections Chief shall be responsible for ensuring that a written hazard communication plan is developed, implemented and maintained at each workplace. Each area of the facility in which any hazardous material is stored or used shall maintain a MSDS file in an identified location that includes (29 CFR 1910.1200(e)(1)):

- (a) A list of all areas where hazardous materials are stored.
- (b) A physical plant diagram and legend identifying the storage areas of the hazardous material.
- (c) A log for identification of new or revised MSDS materials.
- (d) A log for documentation of training by users of the hazardous material.

800.4.1 MSDS USE, SAFETY AND TRAINING

All supervisors and users of MSDS information must review the latest issuance from the manufacturers of the relevant substances. Staff and detainees shall have ready and continuous access to the MSDS for the substance they are using while working. In addition, the following shall be completed (29 CFR 1910.1200(e)(1)(ii)):

- (a) Supervisors shall conduct training for all staff and inmates on using the MSDS for the safe use, handling and disposal of hazardous material in areas they supervise.
- (b) Upon completion of the training, staff and inmates shall sign the acknowledgement form kept with each MSDS in their work area.
- (c) Staff and detainees using the MSDS shall review the information as necessary to be aware of any updates and to remain familiar with the safe use, handling and disposal of any hazardous material in their workplace.

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800.4.2 MSDS DOCUMENTATION MAINTENANCE

Changes in MSDS information occur often and without general notice. Any person accepting a delivery, addition, or replacement hazardous material shall review the accompanying MSDS. If additions or changes have occurred, the revised MSDS shall be incorporated into the file and a notation shall be made in the MSDS revision log.

Supervisors shall review MSDS information in their work areas semi-annually to determine if the information is up-to-date and that appropriate training has been completed. Upon review, a copy of the MSDS file and all logs shall be forwarded to the Maintenance Supervisor or the authorized designee.

800.4.3 MSDS RECORDS MASTER INDEX

The Maintenance Supervisor or the authorized designee will compile a master index of all hazardous materials in the facility, including locations, along with a master file of MSDS information. He/she will maintain this information in the safety office (or equivalent), with a copy to the local fire department. Documentation of the semi-annual reviews will be maintained in the MSDS master file. The master index should also include a comprehensive, up-to-date list of emergency phone numbers (e.g., fire department, poison control center) (29 CFR 1910.1200(g)(8)).

Hazardous Waste and Sewage Disposal

801.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a system for disposing of hazardous waste. The Office recognizes that the effectiveness of a disposal system depends not only on the written policies, procedures and precautions, but on adequate supervision and the responsible behavior of the staff and inmates. It is the responsibility of everyone in the facility to follow hazardous waste disposal instructions, utilizing prescribed precautions and using safety equipment properly.

801.1.1 DEFINITION

Definitions related to this policy include:

Hazardous waste - Material that poses a threat or risk to public health or safety or is harmful to the environment (e.g., batteries, paints, solvents, engine oils and fluids, cleaning products).

801.2 POLICY

It is the policy of this office that any sewage and hazardous waste generated at the facility shall be handled, stored and disposed of safely and in accordance with all applicable federal and state regulations and in consultation with the local public health entity. The Corrections Chief or the authorized designee shall be responsible for:

- Using a service provided by Skagit County or forcontracting with a hazardous waste disposal service, when required.
- Developing and implementing a storage and disposal plan that has been reviewed and approved by a regulatory agency, when required.
- Including hazardous waste issues on internal health and sanitation inspection checklists.
- Including hazardous waste issues in the inmate handbook and ensuring that inmates receive instruction on proper handling and disposal during inmate orientation.
- Developing and implementing procedures for the safe handling and storage of hazardous materials until such time as the contractor removes the items from the facility.
- Ensuring the staff is trained in the proper identification of hazardous waste and the appropriate handling, storage and disposal of such items.

801.3 DISPOSAL PROCEDURE

801.3.1 SEWAGE DISPOSAL

All sewage and non-hazardous liquid waste matter must be disposed of into a public system of sewerage..

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801.3.2 HAZARDOUS WASTE

Hazardous waste generated in the facility shall be properly disposed in designated containers and stored until removed by the contractor. Staff shall use universal standard precautions when in contact with hazardous materials, at a minimum, unless directed otherwise.

801.4 SAFETY EQUIPMENT

The Corrections Chief and the county emergency manager shall ensure that appropriate safety equipment is available. All supervisors shall be knowledgeable in how to access the safety equipment at all times. The county may coordinate with local fire departments or contracted vendors to obtain the necessary safety equipment.

801.5 TRAINING

The Training Sergeant shall be responsible for ensuring that all facility personnel receive appropriate training in the use of appropriate safety equipment and the identification, handling and disposal of hazardous waste. Training records shall be maintained, including the course roster, curriculum, instructor name and credentials, and testing instruments.

801.6 SUPERVISOR RESPONSIBILITY

Supervisors are responsible for monitoring any hazardous waste containment issue, ensuring that employees have the appropriate safety equipment, that any exposed persons receive immediate medical treatment, and that the appropriate measures are taken to lessen the exposure of others. Supervisors shall ensure that incident reports are completed and forwarded to the Corrections Chief in the event of an exposure to staff, inmates or visitors.

Housekeeping and Maintenance

802.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines to ensure that the facility is kept clean and in good repair in accordance with accepted federal, state and county standards.

802.2 POLICY

The Corrections Chief shall establish housekeeping and maintenance plans that address all areas of the facility. The plan should include, but is not limited to:

- Schedules that determine the frequency of cleaning activities on a daily, weekly or monthly timetable, by area of the facility.
- Supervision of the staff and inmates to ensure proper implementation of the procedures and to ensure that no inmate supervises or assigns work to another inmate.
- Development and implementation of an overall sanitation plan (cleaning, maintenance, inspection, staff training, inmate supervision).
- Development of inspection forms.
- All inmate responsibilities, which should be included in the inmate handbook.
- A process to ensure that deficiencies identified during inspections are satisfactorily corrected and documented.
- Detailed processes for the procurement, storage and inventory of cleaning supplies and equipment.
- A process for the preventive maintenance of equipment and systems throughout the facility.
- Staff supervision of the provision and use of cleaning tools and supplies.

To the extent possible, cleaning and janitorial supplies shall be nontoxic to humans. Any poisonous, caustic or otherwise harmful substances used for cleaning shall be clearly labeled and kept in a locked storage area.

802.3 SANITATION SCHEDULE

A daily, weekly and monthly cleaning schedule will be established by the housing unit supervisor. The facility staff should implement a site specific plan for cleaning and maintenance of each area of the correctional facility (e.g., housing, food preparation, laundry, loading dock/trash storage, barber shop, warehouse, common areas). The following recommendations include, but are not limited to, specific areas and items:

- (a) Daily cleaning:

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1. Sweep and then wet mop the entire jail floor
 2. Clean all cell block areas
 3. Empty all trash receptacles
 4. Clean all toilets and sinks
 5. Clean all showers
- (b) Weekly cleaning:
1. Dust bars and window ledges
 2. Clean air conditioning/heating grates
 3. Clean mattresses (mattresses are also to be cleaned prior to being issued to a new inmate)
 4. Pour water down floor drains to test for flow
- (c) Monthly cleaning:
1. Walls
 2. Ceilings
 3. Bunk pans

802.4 TRAINING

All custodial staff and inmate workers assigned cleaning duties shall receive instruction commensurate with their tasks, including proper cleaning techniques, the safe use of cleaning chemicals and areas of responsibility.

802.5 INSPECTION CHECKLIST

The Corrections Chief or the authorized designee should develop an inspection checklist that includes the cleaning and maintenance items that will be checked by supervisors on a daily, weekly and monthly basis throughout the facility.

The inspection checklist will closely correspond to the established cleaning and maintenance schedule.

Inspection checklists shall be forwarded to the Corrections Chief or the authorized designee for annual review, filing and retention as required by the established records retention schedule.

Physical Plant Compliance with Codes

803.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the timeline, process and responsibilities for facility maintenance, inspections and equipment testing in compliance with all applicable federal, state and local building codes.

803.2 POLICY

It is the policy of this office that all construction of the physical plant (renovations, additions, new construction) will be reviewed and inspected in compliance with all applicable federal, state and local building codes. All equipment and mechanical systems will be routinely inspected, tested and maintained in accordance with applicable laws and regulations.

803.3 COMPLIANCE WITH CODES AND STATUTES

Plumbing, sewage disposal, solid waste disposal and plant maintenance conditions will comply with rules and regulations imposed by local and state regulatory entities governing such practices.

803.4 RESPONSIBILITIES

The Corrections Chief shall be responsible for establishing and monitoring the facility maintenance schedule, the inspection schedules of the Shift Supervisors and deputies, and ensuring that any deficiencies discovered are corrected in a timely manner.

The local jurisdiction's applicable health and sanitation codes shall be accessible for use by the Corrections Chief or the authorized designee. The Corrections Chief or the authorized designee is responsible for developing internal health and sanitation inspection checklists, for maintaining valid licensing and sanitation certificates and inspection reports, and for proof of corrective actions.

803.5 PROCEDURE

All safety equipment (e.g., emergency lighting, generators) and/or an uninterruptible power source (UPS) shall be tested at least quarterly. Power generators and UPS equipment should be inspected weekly and load-tested quarterly or according to the manufacturer's instructions. All completed inspection forms shall be kept on file for review by the appropriate office committees or external agencies.

Any remodeling or new construction shall have prior approval of the local fire, building and health authorities. Any required plans and permits will be procured prior to the commencement of any changes to the facility.

The following areas of the facility shall be inspected and evaluated for functionality, wear, and rodent or pest infestation. The list is not meant to be all inclusive:

- Admissions
- Food services

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Physical Plant Compliance with Codes

- Inmate housing
- Laundry
- Barbershop
- Loading dock/trash storage
- Warehouse
- Water systems and plumbing
- Emergency generators
- Fire safety equipment
- The entire physical structure of the facility, including, roof, walls, exterior doors, mechanical systems and lighting

803.6 PLUMBING - FLOOR DRAINS

Floor drains must be flushed weekly and all traps must contain water to prevent the escape of sewer gas. Grids and grates must be present.

Water Supply

804.1 PURPOSE AND SCOPE

The Skagit County Sheriff's Office recognizes the importance of providing the facility with safe potable water. The purpose of this policy is to establish guidelines for testing the facility's water to ensure that the water is safe to consume.

804.2 POLICY

In compliance with the Federal Safe Drinking Water Act, and all other applicable state and local laws and regulations, this facility will ensure the continued supply of safe potable water for the use of inmates, staff and visitors through rigorous annual testing of water supplies (Title 42, The Public Health and Welfare, Chapter 6a, Public Health Service).

804.3 PROCEDURE

The Corrections Chief shall ensure that the facility's potable water source is tested by an independent public or private testing service at least once each year. Water quality will be certified to be in compliance with all state and local regulations. Corrective measures shall be promptly taken if the test results fall below acceptable regulatory standards.

In the event that water testing reveals any significant hazards to the inmates or staff at the facility, the Sheriff, Corrections Chief and the Responsible Physician shall take immediate action to mitigate the problem.

The testing results, valid certificates of the sampling entity and the testing laboratory shall be kept in accordance with established records retention schedules (WAC 44-14-03005).

Where the facility's water supply is obtained from a private source, the source shall be properly located, constructed and operated to protect it from contamination and pollution and the water shall meet all current standards set by the applicable state and/or local authority regarding bacteriological, chemical and physical tests for purity.

For facilities not served by a public or regulated private water supply, the water should be tested daily by the local authority within the facility's jurisdiction.

804.4 EMERGENCY PLAN

The Corrections Chief and the Responsible Physician shall develop a plan for the supply of potable water for drinking and cooking in the event that a man-made or natural disaster interrupts the regular water supply. The plan shall address methods for providing clean potable water for a minimum of three days, and should have contingency plans for emergencies lasting longer than three days. The plan should also include contingencies for the use of non-potable water to flush toilets and remove effluent from the facility.

Vermin and Pest Control

805.1 PURPOSE AND SCOPE

The purpose of this policy is to establish inspection, identification and eradication processes designed to keep vermin and pests controlled in accordance with the requirements established by all applicable laws, ordinances and regulations of the local public health entity.

805.2 POLICY

It is the policy of this office that vermin and pests be controlled within the facility. The Corrections Chief or the authorized designee shall be responsible for developing and implementing this policy, in cooperation with the responsible physician and the county health department, for the sanitation and control of vermin and pests and to establish medical protocols for treating inmate clothing, personal effects and living areas, with specific guidelines for treating an infested inmate.

805.3 PEST CONTROL SERVICES

The Corrections Chief or the authorized designee shall be responsible for procuring the services of a licensed pest control professional to perform inspections of the facility at least monthly and to treat areas as required to ensure that vermin and pests are controlled.

805.4 PREVENTION AND CONTROL

Many infestations and infections are the result of a recently admitted inmate who is vermin infested or whose property is vermin infested. Most infestations are spread by direct contact with an infected person or with infested clothing and bedding. Inmates with lice or mites should be treated with approved pediculicides as soon as the infestation is identified to avoid spreading it. To reduce the chance of further transmission, separate quarters for inmates undergoing treatment for lice should be used as described in the Communicable Diseases Policy.

Because the use of the treatment chemicals can cause allergic reactions and other negative effects, treatment should be done only when an infestation is identified and not as a matter of routine.

Clothing, bedding and other property that is suspected of being infested shall either be removed from the facility or cleaned and treated by the following methods, as appropriate or as directed by the pest control provider or responsible health care provider:

- Washing in water at 140 degrees for 20 minutes
- Tumbling in a clothes dryer at 140 degrees for 20 minutes
- Dry cleaning
- Storing in sealed plastic bags for 30 days
- Treating with an insecticide specifically labeled for this purpose

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Vermin and Pest Control

Head lice and their eggs are generally found on the head hairs. There may be some uncertainty about the effectiveness of some available pediculicides to kill the eggs of head lice. Therefore some products recommend a second treatment seven to 10 days after the first. During the interim, before the second application, eggs of head lice could hatch and there is a possibility that lice could be transmitted to others.

Pubic lice and their eggs are generally found on the hairs of the pubic area and adjacent hairy parts of the body, although they can occur on almost any hairy part of the body, including the hair under the arm and on the eyelashes.

Pubic lice and their eggs are generally successfully treated by the available pediculicides. However, when the eyelashes are infested with pubic lice and their eggs, a physician should perform the treatment.

Successful treatment depends on careful inspection of the inmate and proper application of the appropriate product. The area used to delouse inmates needs to be separate from the rest of the facility. All of the surfaces in the treatment area must be sanitized. There must be a shower as part of the delousing area.

The supervisor shall document the date of treatment, the area treated, the pest treated and the treatment used.

Inmate Safety Program

806.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a safety program to reduce inmate injuries by analyzing causes of injuries and identifying and implementing corrective measures.

806.2 POLICY

The Skagit County Sheriff's Office will provide a safe environment for individuals confined at this facility by establishing an effective safety program, investigating inmate injuries and taking corrective actions as necessary to reduce accidents and injury.

The Sheriff shall appoint a staff member who will be responsible for the development, implementation and oversight of the safety program. This program will include, but not be limited to:

- A system to identify and evaluate hazards, including scheduled inspections to identify unsafe conditions.
- Analysis of inmate injury reports to identify causes and to recommend corrective actions.
- Establishment of methods and procedures to correct unsafe and/or unhealthful conditions and work practices in a timely manner.

806.3 INVESTIGATION OF REPORTED INMATE INJURY

Whenever there is a report of an injury to an inmate that is the result of accidental or intentional acts, other than an authorized use of force by custody staff, the Sheriff or the authorized designee will initiate an investigation to identify witnesses, obtain statements, determine the cause of the injury and develop a plan of action whenever a deficiency is identified. Injuries resulting from use of force incidents will be investigated and reported in accordance with the Use of Force Policy.

806.4 INVESTIGATION REPORTS

The Shift Supervisor shall ensure that reports relating to an inmate's injury are completed and should include the following:

- Incident reports
- Investigative reports
- Health record entries
- Any other relevant documents

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806.5 ANNUAL REVIEWS

The Sheriff or the authorized designee shall conduct an annual review of all injuries involving inmates for the purpose of identifying problem areas and documenting a plan of action to abate circumstances relating to inmate injuries.

The plan of action should include, but not be limited to:

- The area where the deficiencies have been identified.
- Strategies to abate the deficiency.
- Resources needed to correct a deficiency.
- The person or persons responsible for taking corrective action and the target completion date.

The Sheriff shall consult with the Office risk manager to coordinate corrective action or to seek managerial/administrative guidance for implementing corrective action.

Inmate Hygiene

807.1 PURPOSE AND SCOPE

This policy outlines the procedures that will be taken to ensure the personal hygiene of every inmate in the Skagit County Sheriff's Office correctional facility is maintained. The Skagit County Sheriff's Office recognizes the importance of each inmate maintaining acceptable personal hygiene practices by providing adequate bathing facilities, hair care services, and the issuance and exchange of clothing, bedding, linens, towels, and other necessary personal hygiene items.

807.2 POLICY

It is the policy of the Skagit County Sheriff's Office to maintain a high standard of hygiene in compliance with the requirements established by all state laws, ordinances, and regulations. Compliance with laws and regulations relating to good inmate hygiene practice is closely linked with good sanitation practices. Therefore, the need to maintain a high level of hygiene is not only for the protection of all inmates, but for the safety of the correctional staff, volunteers, contractors, and visitors.

807.3 STORAGE SPACE

There should be adequate and appropriate storage space for inmates' bedding, linen, or clothing. The inventory of clothing, bedding, linen, and towels should exceed the maximum inmate population so that a reserve is always available.

The facility should have clothing, bedding, personal hygiene items, cleaning supplies, and any other items required for the daily operation of the facility, including the exchange or disposal of soiled or depleted items. The assigned staff shall ensure that the storage areas are properly maintained and stocked. The Corrections Chief should be notified if additional storage space is needed.

807.3.1 BEDDING ISSUE

Upon entering a living area of the Skagit County Sheriff's Office correctional facility, every inmate who is expected to remain in the facility for more than eight hours shall be issued bedding and linens including but not limited to:

- (a) Sufficient freshly laundered blankets to provide comfort under existing temperature conditions. Blankets shall be exchanged and laundered in accordance with facility operational laundry rules.
- (b) One clean, firm, nontoxic, fire-retardant mattress (16 CFR 1633.1 et seq.).
 - 1. Mattresses will be serviceable and enclosed in an easily cleanable, nonabsorbent material and conform to the size of the bunk. Mattresses will be cleaned and disinfected when an inmate is moved, released, or upon reissue.
- (c) Two sheets or one sheet and a clean mattress cover.
- (d) One clean washcloth, hand towel, and bath towel.

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- (e) One pillow and pillowcase.

Linen exchange, including towels, shall occur at least weekly and shall be documented in the daily activity log. The Shift Supervisor shall review the daily activity log at least once per shift.

The Corrections Chief or the authorized designee shall conduct both scheduled and unannounced inspections of the facility to ensure that bedding issuance policies and procedures are carried out in accordance with the applicable laws and regulations.

807.3.2 CLOTHING ISSUE

An inmate admitted to a facility for 72 hours or more and assigned to a living unit shall be issued a set of facility clothing. The issue of clothing appropriate to the climate for inmates shall include but is not limited to the following:

- Clean socks
- Suitable outer and undergarments
- Footwear

An inmate who is issued a change of clothing upon admission to the facility may have his/her personal clothing returned after laundering, at the discretion of the Corrections Chief.

Clothing shall be exchanged twice each week, at a minimum. All exchanges shall be documented on the daily activity log. The Shift Supervisor or unit supervisor shall review the daily activity log at least once per shift.

Additional clothing may be issued as necessary for changing weather conditions or as seasonally appropriate. An inmate's personal undergarments and footwear may be substituted for the institutional undergarments and footwear, provided there is a legitimate medical necessity for the items and they are approved by the medical staff.

Each inmate assigned to a special work area, such as food services, medical, farm, sanitation, mechanical, and other specified work, shall be clothed in accordance with the requirements of the job, including any appropriate protective clothing and equipment, which shall be exchanged as frequently as the work assignment requires.

The Corrections Chief or the authorized designee shall conduct both scheduled and unannounced inspections of the facility to ensure that clothing issuance policies and procedures are carried out in accordance with the applicable laws and regulations.

The Corrections Chief or the authorized designee shall ensure that the facility maintains a sufficient inventory of extra clothing to ensure each inmate shall have neat and clean clothing appropriate to the season.

An inmate's excess personal clothing shall be mailed, picked up by, or transported to a designated family member or stored in containers designed for such purpose. All inmate personal property shall be properly identified, inventoried, and secured. Inmates shall sign and receive a copy of the inventory record.

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807.4 LAUNDRY SERVICES

Laundry services shall be managed so that daily clothing, linen, and bedding needs are met.

807.5 INMATE ACCOUNTABILITY

To ensure inmate accountability, inmates are required to exchange item for item when clean clothing, bedding, and linen exchange occurs.

Prior to being placed in a housing unit, inmates shall be provided with an inmate handbook listing this requirement.

807.6 PERSONAL HYGIENE OF INMATES

Personal hygiene items, hair care services and facilities for showers will be provided in accordance with applicable laws and regulations. This is to maintain a standard of hygiene among inmates in compliance with the requirements established by state laws as part of a healthy living environment.

Each inmate held more than 24 hours shall be issued, at a minimum, the following items:

- One bar of bath soap or equivalent
- One unbreakable comb or brush
- Toothpaste or powder
- Toothbrush
- Shaving equipment, upon request
- Toilet paper
- Materials as appropriate to the special hygiene needs of women

The Corrections Chief or the authorized designee may modify this list to accommodate the use of liquid soap and shampoo dispensers. Personal hygiene items should be appropriate for the inmate's sex. Additional hygiene items shall be provided to inmates upon request, as needed.

Inmates shall not be required to share personal care items or disposable razors. Used razors are to be disposed into approved sharps containers. Other barbering equipment capable of breaking the skin must be disinfected between individual uses, as prescribed by the state governing body overseeing such practices.

Inmates, except those who may not shave for reasons of identification in court, shall be allowed to shave daily. The Corrections Chief or the authorized designee may suspend this requirement for any inmate who is considered a danger to him/herself or others.

807.7 BARBER AND COSMETOLOGY SERVICES

The Corrections Chief or the authorized designee shall be responsible for developing and maintaining a schedule for hair care services provided to the inmate population and will have written policies and procedures for accessing these services (see the Grooming Policy). The Corrections Chief shall ensure that the rules are included in the inmate handbook.

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807.7.1 SCHEDULE FOR HAIR CARE SERVICES

Inmates shall have the ability to receive hair care services once per month. Records of hair care services shall be documented in the daily activity log.

Prior to being placed in a housing unit, inmates will be given an inmate handbook, which details how to request hair care services.

807.7.2 HAIR CARE SPACE

Due to sanitation concerns, the hair care services should be located in a room that is designated for that purpose. The floors, walls, cabinets, countertops, and ceilings should be smooth, nonabsorbent, and easily cleanable. The room should be supplied with a hand washing sink with hot and cold water under pressure. The minimum hot water temperature must comply with local building and health department standards.

Each barbering room should have all the equipment necessary for maintaining sanitary procedures for hair care, including approved, covered metal containers for waste, disinfectants, laundered towels, and a means of separating sanitized equipment from soiled equipment.

After each haircut, all tools that came into contact with the inmate shall be thoroughly cleaned and sanitized according to established guidelines and regulations.

Regulations with detailed hair care cleaning and sanitation requirements shall be posted in a conspicuous place for use by all hair care personnel and inmates. Single-use items, such as cotton pads and neck strips, shall be properly disposed of immediately after a single use.

Barbers or beauticians shall not provide hair care service to any inmate when the skin of the face, neck, or scalp is inflamed, or when there is scaling, pus, or other evidence of skin eruptions, unless it is performed in accordance with the specific written authorization of the Responsible Physician. Any person infested with head lice shall not be given hair care service until cleared by the medical staff.

The hair care services area shall be maintained and kept clean according to the requirements of the state or local board of barbering and cosmetology and the health department standards.

807.8 AVAILABILITY OF PLUMBING FIXTURES

Inmates confined to cells or sleeping areas shall have access to toilets and washbasins with hot and cold running water that is temperature controlled. Access shall be available at all hours of the day and night without staff assistance.

The minimum number of plumbing fixtures provided for inmates in housing units is:

- One sink/washbasin for every 12 inmates.
- One toilet to every 12 male inmates (urinals may be provided for up to half the toilets).
- One toilet to every eight female inmates.

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807.9 INMATE SHOWERS

Inmates will be allowed to shower upon assignment to a housing unit and every other day thereafter or more often if possible. There should be one shower for every 20 inmates unless federal, state, or local building or health codes differ. Showering facilities for inmates housed at this facility shall be clean and properly maintained. Water temperature shall be periodically measured to ensure a range of 100 to 120 degrees for the safety of inmates and staff, and shall be recorded and maintained.

Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates (28 CFR 115.42).

807.10 DELOUSING MATERIALS

Delousing materials and procedures shall be approved through consultation with the Responsible Physician or qualified health care professionals.

807.11 RESPONSIBILITIES

The Corrections Chief shall ensure the basic necessities related to personal care are provided to each inmate upon entry into the general population. Appropriate additional personal care items may be available for purchase from the inmate commissary.

807.12 ADDITIONAL PRIVACY REQUIREMENTS

Inmates shall be permitted to shower, perform bodily functions, and change clothing without non-medical staff of the opposite sex viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Staff of the opposite sex shall announce their presence when entering an inmate housing unit (28 CFR 115.15).

Chapter 9 - Food Services

Food Services

900.1 PURPOSE AND SCOPE

The Office recognizes the importance of providing nutritious food and services to inmates to promote good health, to reduce tension in the correctional facility and ultimately support the safety and security of the correctional facility. This policy provides guidelines on the preparation of food services items and dietary considerations for inmates housed in the facility.

900.2 POLICY

It is the policy of this office that food services shall provide inmates with a nutritionally balanced diet in accordance with federal, state and local laws, and with regulations for daily nutritional requirements.

The food services operation shall be sanitary and shall meet the acceptable standards of food procurement, planning, preparation, service, storage and sanitation in compliance with Food and Drug Administration (FDA), United States Department of Agriculture (USDA) requirements.

900.3 FOOD SERVICES MANAGER

The food services manager shall be responsible for oversight of the day-to-day management and operation of the food services area, including:

- Developing, implementing and managing a budget for food services.
- Ensuring sufficient staff is assigned and scheduled to efficiently and safely carry out all functions of food services operations.
- Establishing, developing and coordinating appropriate training for staff and inmate workers.
- Developing a menu plan that meets all nutrition and portion requirements and can be produced within the available budget.
- Other duties and activities as determined by the Corrections Chief.

900.4 MENU PLANNING

All menus shall be planned, dated and available for review at least one month in advance of their use. Records of menus and of foods purchased shall be kept on file for one month. Menus shall provide a variety of foods and should consider food flavor, texture, temperature, appearance and palatability. Menus shall be approved by a registered dietitian or nutritionist before being served to ensure the recommended dietary allowance for basic nutrition meets the needs of the appropriate age group.

Any changes to the meal schedule, menu or practices should be carefully evaluated by the food services manager in consultation with the Corrections Chief, dietician, medical staff and other professionals, and shall be recorded. All substitutions will be of equal or better nutritional value. If

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any meal served varies from the planned menu, the change shall be noted in writing on the menu and/or production sheet.

Menus as planned, including changes, shall be evaluated by a registered dietitian at least annually. Facility menus shall be evaluated at least quarterly by the food services supervisory staff to ensure adherence to established daily servings.

Copies of annual reviews and quarterly evaluations should be maintained by the food services manager in accordance with established records retention schedules (WAC 44-14-03005).

900.5 FOOD SAFETY

Temperatures in all food storage areas should be checked and recorded at the beginning of each shift, but shall be checked and recorded at least once daily. Holding temperatures for cold and hot foods shall be checked and recorded every two hours. Hot food shall be reheated to 165 degrees if it falls below 135 degrees at any time.

All reach-in or walk-in refrigerators and cold storage must maintain food temperature below 41 degrees. All freezers, other than during the defrosting cycle, must maintain a temperature of 0 degrees or lower.

One sample for each meal served shall be dated and maintained under refrigeration for testing in the event of a food-borne illness outbreak. Sample meals shall be discarded at the end of three days if no food-borne illness is reported.

Food production shall be stopped immediately if there is any sewage backup in the preparation area or if there is no warm water available for washing hands. Food production shall not resume until these conditions have been corrected.

900.6 THERAPEUTIC DIETS

The food services manager shall be responsible for ensuring that all inmates who have been prescribed therapeutic diets by qualified health care professionals are provided with compliant meals. A therapeutic diet manual, which includes samples of medical diets, shall be maintained in the health services and food services areas for reference and information.

More complete information may be found in the Prescribed Therapeutic Diets Policy in this manual.

Women who are known to be pregnant or lactating shall be provided a balanced, nutritious diet approved by a physician.

900.7 RELIGIOUS DIETS

The Office, to the extent reasonably practicable, will provide special diets for inmates in compliance with the parameters of the Religious Programs Policy in this manual and the Religious Land Use and Institutionalized Persons Act (RLUIPA).

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A reasonable attempt will be made to accommodate religious diets. However, inmates do not have an absolute entitlement to special diets. When religious diets are provided, they shall conform to the nutritional and caloric requirements for non-religious diets.

900.8 FOOD SERVICES REQUIREMENTS

All reasonable efforts shall be made to protect inmates from food-borne illness. Food services staff shall adhere to sanitation and food storage practices and there shall be proper medical screening and clearance of all food handlers in accordance with the Food Services Workers' Health Safety and Supervision Policy in this manual.

Food production and services will be under staff supervision. Food production, storage and food handling practices will follow the appropriate federal, state or local sanitation laws.

900.9 MEAL SERVICE PROCEDURE

Inmate meals that are served in a day room should be provided in space that allows groups of inmates to dine together, with a minimum of 15 square feet of space per inmate. A dining area shall not contain toilets or showers in the same room without appropriate visual barriers.

Meals shall be served at least three times during each 24-hour period. At least one meal must include hot food. Any deviation from this requirement shall be subject to the review and approval of a registered dietitian to ensure that inmates receive meals that meet nutritional guidelines.

Inmates must be provided a minimum of 15 minutes dining time for each meal, with more time being allowed for inmates who have been prescribed a longer time to eat by a qualified health care professional, a dietitian or as deemed appropriate by a supervisor. There must be no more than 14 hours between a substantial evening meal and breakfast. A substantial evening meal is classified as a serving of three or more menu items at one time to include a high quality protein, such as meat, fish, eggs, or cheese. The meal shall represent no less than 20 percent of the day's total nutrition requirements. If more than 14 hours pass between meals, approved snacks will be provided. If a nourishing snack is provided at bedtime, up to 16 hours may elapse between the substantial evening meal and breakfast. A nourishing snack is classified as a combination of two or more food items from two of the four food groups, such as cheese and crackers or fresh fruit and cottage cheese.

Inmates who miss, or may miss, a regularly scheduled meal must be provided with a beverage and a sandwich or substitute meal. Approved snacks should be served to inmates on medical diets in less than the 14-hour period if prescribed by the Responsible Physician or registered dietitian. Inmates on medical or therapeutic meals who miss their regularly scheduled meal will be provided with their prescribed meal.

As the mealtime approaches, facility staff should direct the inmates who will eat in the dayroom to get dressed and be ready for meals. Inmates should be assembled and a head count taken, to verify all inmates in the housing location are present at the completion of each meal service. Staff should be alert to signs of injury or indications of altercations, and should investigate any such

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signs accordingly. Staff should remain alert to the potential for altercation during inmate movement and meals. Meals shall be served under the direct supervision of staff.

when required, staff should direct an orderly filing of inmates to the assigned seating in the day room. Staff should identify inmates who have prescribed therapeutic or authorized religious diets so those inmates receive their meals accordingly.

It shall be the responsibility of the deputies to maintain order and enforce rules prohibiting excessive noise and intimidation of other inmates to relinquish food during mealtime.

To the extent reasonably practical, an adequate number of food services staff and correctional personnel should supervise feeding in central dining areas. If reasonably possible, the Shift Supervisor should be in a position to observe the meal.

In the interest of security, sanitation and vermin control, inmates shall not be allowed to keep food from any meal beyond the next meal service.

900.10 EMERGENCY MEAL SERVICE PLAN

The food services manager shall establish and maintain an emergency meal service plan for the facility.

Such a plan should ensure that there is at least a seven-day supply of food maintained in storage for inmates. In the event of an emergency that precludes the preparation of at least one hot meal per day, the Corrections Chief may declare an "Emergency Suspension of Standards" for the period of time the emergency exists.

During an emergency suspension, the food services manager shall assign a registered dietician to ensure that minimum nutritional and caloric requirements are met.

In the event that the inmate food supply drops below that which is needed to provide meals for two days, the Corrections Chief or the authorized designee shall purchase food from wholesale or retail outlets to maintain at least a four-day supply during the emergency.

Depending on the severity and length of the emergency, the Sheriff should consider requesting assistance from allied agencies through mutual aid or the National Guard.

Food Services Training

901.1 PURPOSE AND SCOPE

The purpose of this policy is to reduce the risk of potential injury to staff, contractors and inmate workers in the food services areas by developing and implementing a comprehensive training program in the use of equipment and safety procedures.

901.2 POLICY

The Skagit County Sheriff's Office ensures a safe and sanitary environment is maintained for the storage and preparation of meals through the appropriate training of food services staff and inmate workers.

901.3 TRAINING

The food services manager, under the direction of the Corrections Chief or designee, is responsible for ensuring that a training curriculum is developed and implemented in the use of equipment and safety procedures for all food services personnel, including staff, contractors and inmate workers.

The training shall include, at minimum:

- (a) Work safety practices and use of safety equipment.
- (b) Sanitation in the facility's food services areas.
- (c) Reducing risks associated with operating machinery.
- (d) Proper use of chemicals in food services areas.
- (e) Employing safe practices.
- (f) Facility emergency procedures.

A statement describing the duties and proper time schedule should be developed for each job function in the facility's kitchen and food services operation. The food services manager, at the direction of the Corrections Chief, should establish an employee/kitchen worker training course, and all staff or inmate workers shall be trained on how to assemble, operate, clean and sanitize kitchen equipment.

Information about the operation, cleaning and care of equipment, including manufacturer's literature, that is suitable for use as reference material shall be kept in the food services operation area. The reference material should be used in developing training on the use of the equipment and the maintenance and cleaning procedures.

Safety and sanitation shall be the primary consideration in equipment purchase and replacement. Placement and installation of equipment must be carefully planned to facilitate cleaning, sanitizing, service and repairs. The equipment must also meet any applicable government codes.

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901.4 TESTING

A test should be developed to determine and document that the food services worker understands the proper procedures demonstrated during training. Food services workers should be required to pass the test in order to work in the food services area. Upon achievement of a passing score, the food services worker should acknowledge receipt of the training in writing. The signed document should be forwarded to the Training Sergeant and retained in the worker's training file. Contracted service providers should be required to provide documentation and certification of their employees. Only trained personnel are authorized to use food services equipment.

901.5 BRIEFING TRAINING

The food services manager should consider daily briefing training as a method of staff development. Regular and repetitive trainings of short duration (8 to 10 minutes) at the beginning of each shift are an effective and cost efficient way to maintain the competency of staff. A lesson plan and record of attendance should be incorporated into the briefing training. Records of all training, including training for contract workers, should be forwarded to the Training Sergeant and maintained in the worker's training files in accordance with established records retention schedules (WAC 44-14-03005).

Dietary Guidelines

902.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure that the nutritional needs of the inmates are met and that overall health is promoted through the use of balanced nutritious diets.

902.2 POLICY

It is the policy of this office that diets provided by this facility will meet or exceed the guidelines established in the current publication of the U.S. Department of Agriculture's Dietary Guidelines for Americans (DGA).

902.3 REVIEW OF DIETARY ALLOWANCES

The food services manager is responsible for developing the facility's menus and shall ensure that all menus served by food services comply with the DGA guidelines. Any deviation from the DGA guidelines shall be reviewed by the Sheriff and/or Corrections Chief and the Responsible Physician.

The food services manager or the authorized designee shall ensure that the facility's menus and dietary allowances are evaluated annually by a registered dietician, and that any changes meet the DGA guidelines. A registered dietitian must approve menus before they are used.

Menus should be evaluated at least quarterly by food services supervisory staff to verify adherence to the established daily serving requirements.

902.4 MENU CYCLE PLANNING

The food services manager or the authorized designee should plan the menus one month in advance of their use.

Any changes to the menu must be recorded and kept until the next annual inspection. Any menu substitutions must use better or similar items. The planning and preparation of all meals should consider the overall palatability of the planned meal including the appearance and temperature of the food, and the flavor and texture of food combinations.

Menus should include the following minimum food group allowances:

- (a) Dairy Group: Three servings of fat-free or low-fat milk or food providing at least 250 mg. of calcium and equivalent to 8 ounces of fluid milk. Four servings for juveniles 15-17 years of age or women who are pregnant or lactating.
- (b) Vegetable-Fruit Group: Five servings of fruits and vegetables. At least one serving shall be from each of the following three categories:
 - 1. One serving of a fresh fruit or vegetable.
 - 2. One serving of a Vitamin A source, fruit or vegetable, containing at least 200 micrograms retinol equivalents or more.

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3. One serving of a Vitamin C source containing at least 30 mg. or more.
- (c) Grain Group: A minimum of six servings of grains, three of which must be made with some whole grains.
- (d) Protein Group: Three servings of lean meat, fish, eggs, cooked dry beans, peas, lentils, nuts, peanut butter or textured vegetable protein, equivalent to 14 grams or more of protein. In addition, a fourth serving from the legumes category shall be served three days a week.
- (e) Total dietary fat should not exceed 30 percent of the total calories on a weekly basis. Fat shall be added only in minimum amounts necessary to make the diet palatable.

Providing only the minimum servings outlined in the requirements above is not sufficient to meet the caloric requirements of an inmate. Additional servings of dairy, vegetable-fruit and grain groups must be provided in amounts to meet caloric requirements.

Food Services Workers' Health, Safety and Supervision

903.1 PURPOSE AND SCOPE

The purpose of this policy is to establish basic personal health, hygiene, sanitation and safety requirements to be followed by all food services workers and to ensure the proper supervision of food services staff and inmate workers.

903.2 POLICY

The Skagit County Sheriff's Office will ensure that meals are nutritionally balanced, safe and prepared and served in accordance with applicable health and safety laws. All inmate food services workers will be properly supervised by custody staff to ensure safety and security at all times.

903.3 FOOD SERVICES MANAGER RESPONSIBILITIES

The food services manager is responsible for developing and implementing procedures to ensure that all meals are prepared, delivered and served only under direct supervision by staff.

Work assignments shall be developed to ensure that sufficient food services staff is available to supervise inmate food services workers. The food services manager should coordinate with the corrections supervisor to ensure that sufficient correctional staff is available to supervise inmate meal service.

The food preparation area must remain clean and sanitary at all times. The food services manager or the authorized designee shall post daily, weekly and monthly cleaning schedules for the equipment and food preparation area.

903.4 MEDICAL SCREENING

The food services manager shall work cooperatively with the Responsible Physician to develop procedures to minimize the potential for spreading contagious disease and food-borne illness. In an effort to prevent the spread of illness, the following shall be strictly observed:

- (a) All food services workers shall have a pre-employment/pre-assignment medical examination, in accordance with local requirements, to ensure freedom from diarrhea, skin infections and other illnesses transmissible by food or utensils.
- (b) Periodic reexaminations of food services workers shall be given to ensure freedom from any disease transmissible by food or utensils.
- (c) Food services workers shall have education and ongoing monitoring in accordance with the standards set forth in the applicable government health and safety codes.

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- (d) A supervisor shall inspect and monitor all persons working in any food services area on a daily basis for health and cleanliness, and shall remove anyone exhibiting any signs of food-transmissible disease from any food services area.
- (e) Any person working in any food services area who is diagnosed by a qualified health care professional with a contagious illness should be excluded from the food services areas until medically cleared to return to work.
- (f) All food handlers shall wash their hands when reporting for duty and after using toilet facilities. Aprons shall be removed and secured in a clean storage area before entering the toilet facility.
- (g) Food services workers shall wear disposable plastic gloves and a protective hair covering, such as a hat or hairnet, when handling or serving food. Gloves shall be changed after each task is completed.
- (h) Any outside vendor must submit evidence of compliance with state and local regulations regarding food safety practices.
- (i) Smoking at any time is prohibited in any food services area (RCW 70.160.030).
- (j) Documentation of compliance with all of the above and with any other risk-minimizing efforts implemented to reduce food transmissible disease shall be maintained in accordance with established records retention schedules (WAC 44-14-03005).
- (k) All food services workers shall report to a supervisor any information about their health and activities in accordance with health and safety codes as they relate to diseases that are transmittable through food, (e.g., open sores, runny nose, sore throat, cough, vomiting, diarrhea, fever, recent exposure to contagious diseases such as Hepatitis A or tuberculosis).

Any food services worker is prohibited from handling food or working in any food services area if he/she reports symptoms such as vomiting, diarrhea, jaundice, sore throat with fever or has a lesion containing pus, such as a boil or infected wound that is open or draining. Food service workers shall only return to work in food service areas when cleared by a qualified health care professional.

903.5 TRAINING REQUIREMENTS FOR FOOD SERVICES WORKERS

The food services manager is responsible for developing and implementing a training program for inmate food services that includes food safety, proper food-handling techniques and personal hygiene. Each inmate food services worker shall satisfactorily complete the initial training prior to being assigned to prepare, deliver or serve food. Food services workers should receive periodic supplemental training as determined by the food services manager.

The training curriculum for inmate food services workers should include, at minimum, the following topics:

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- Proper hand-washing techniques and personal hygiene as it applies to food services work
- Proper application and rotation of gloves when handling food
- Proper use of protective hair coverings, such as hats or hairnets
- Wearing clean aprons and removing aprons prior to entering toilet facilities
- Maintaining proper cooking and holding temperatures for food
- Proper portioning and serving of food
- Covering coughs and sneezes to reduce the risk of food-borne illness transmission
- Reporting illness, cuts or sores to the custody staff in charge

903.6 SUPERVISION OF INMATE WORKERS

Only personnel authorized to work in the food preparation area will be allowed inside. Inmate food handlers working in the kitchen must be under the supervision of a staff member. The Corrections Chief or designee will appoint qualified Food service staff members, who will be responsible for the oversight of daily activities and ensuring food safety. The Contracted Food service staff will obtain an American National Standards Institute food safety manager certification by applying and passing a certification examination within 60 days of appointment.

Sufficient Food service staff shall be assigned to supervise and closely monitor inmate food services workers. Food Service staff shall ensure that inmate food services workers do not misuse or misappropriate tools or utensils, and that all workers adhere to the following:

- Correct ingredients are used in the proper proportions.
- Food is maintained at proper temperatures.
- Food is washed and handled properly.
- Food is served using the right utensils and in the proper portion sizes.
- Utensils such as knives, cutting boards, pots, pans, trays and food carts used in the preparation, serving or consumption of food are properly washed and sanitized after use. Disposable utensils and dishes will not be reused.
- All utensils are securely stored under sanitary conditions when finished.

903.7 SUPERVISION OF THE FOOD SUPPLY

The risk of conflict and protest is reduced when the inmate population has confidence in the safety and quality of their food. Custody staff should supervise the transport and delivery of food to the respective serving areas. Custody staff should ensure the food is protected during transportation, delivered to the right location efficiently and under the right temperatures.

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Food services staff should report any suspected breach in the safety or security of the food supply. Staff should be alert to inmate behavior when serving food, and cognizant of any comments concerning perceived contamination or portioning issues. Staff should report any suspicion of inmate unrest to a supervisor.

Any change to the published menu or the standard portioning should be documented and reported to the food services manager as soon as practicable.

Food Preparation Areas

904.1 PURPOSE AND SCOPE

This policy establishes guidelines for the proper design and maintenance of the food preparation area.

904.2 POLICY

It is the policy of this office to comply with all federal, state and local laws and regulations concerning the institutional preparation of food.

904.3 COMPLIANCE WITH CODES

Health codes require that food preparation areas should be sanitary, well lit, ventilated and have adequate temperature controlled storage for food supplies. All remodeling and new construction of food preparation areas shall comply with federal, state and local building codes, and with food and agricultural laws and standards. The design of the food preparation area must be approved by the local regulatory authority. The flow of foods in the food preparation area must avoid cross contamination and remain free from vermin infestation.

Any physical changes in the food preparation area, such as changing equipment or making major menu changes (from cold production to hot food), must be approved by the local public health entity to ensure adequate food protection.

Living or sleeping quarters are prohibited in the food preparation and food services areas.

904.4 CONSTRUCTION REQUIREMENTS

The food preparation area shall be sized to include space and equipment for adequate food preparation for the facility's population size, type of food preparation and methods of meal service.

Floors, floor coverings, walls, wall coverings and ceilings should be designed, constructed and installed so they are smooth, non-absorbent and attached so that they are easily cleanable.

Except in the area used only for dry storage, porous concrete blocks or bricks used for interior walls shall be finished and sealed for a smooth, non-absorbent, easily cleanable surface.

Food storage areas shall be appropriately clean, sized, typed and temperature-controlled for the food being stored.

Lighting throughout the kitchen and storage areas shall be sufficient for staff and inmates to perform necessary tasks.

Mechanical ventilation of sufficient capacity to keep rooms free of excessive heat, steam, condensation, vapors, obnoxious odors, smoke and fumes shall be provided, if necessary. All equipment used in the food preparation area shall be commercial grade and certified by the American National Standards Institute or approved by a registered environmental health professional/sanitarian. Dishwashing machines will operate in accordance with the manufacturer

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recommendations and hot water temperatures will comply with federal, state and local health requirements.

Equipment must be smooth, easy to clean, and easy to disassemble for frequent cleaning.

Equipment should be corrosion resistant and free of pits, crevices or sharp corners. Dry food storage must have sufficient space to store a minimum of 15 days of supplies. All food must be stored in sealed containers and a minimum of 6 inches off the floor.

904.5 TOILETS AND WASHBASINS

Adequate toilet and washbasin facilities shall be located in the vicinity of the food preparation area in accordance with building codes and health regulations for convenient sanitation and proper hygiene. Toilet facilities shall be completely enclosed and shall have tight-fitting, self-closing, solid doors, which shall be closed except during cleaning and maintenance.

Signs shall be conspicuously posted throughout the food preparation area and in each restroom informing all food services staff and inmate workers to wash their hands after using the restroom. Signs shall be printed in English and in other languages as may be dictated by the demographic of the inmate population.

To reduce the potential for contaminants being brought into the food preparation area toilet facilities in the vicinity of the food preparation area should be limited to use by the food services staff and inmate workers only. Anyone working in the food services area must store their aprons in a designated clean area before entering the toilet facilities.

The food services manager shall be responsible for procedures to ensure:

- (a) All fixtures in the food services areas are clean and in good operating condition.
- (b) A supply of toilet tissue is maintained at each toilet at all times. Toilet facilities used by women shall have at least one covered waste receptacle.
- (c) The hand-washing station located adjacent to the toilet facility is kept clean and in good operating condition. Single-dispensing soap, nail brushes and a method for drying hands shall be provided at all times.

If the toilet facility is outside of the kitchen area, food services workers must wash their hands after using the toilet facility and again upon returning to the kitchen area before preparing or serving food.

Food Budgeting and Accounting

905.1 PURPOSE AND SCOPE

The purpose of this policy is to establish processes that will enable the facility's food services to operate within its allocated budget, and for the development of specifications for purchasing food, equipment and supplies for the delivery of food services.

905.2 POLICY

The Skagit County Sheriff's Office food services facilities shall serve nutritious meals in an efficient and cost-effective manner in accordance with the Washington State Department of Health regulations and with all other applicable laws and standards.

905.3 FOOD SERVICES MANAGER RESPONSIBILITIES

The food services manager is responsible for establishing a per meal, per inmate budget for food, equipment and supplies that are needed for the effective operation of the facility food services. This includes monitoring purchases according to the budgeted weekly and monthly spending plans.

The volume for purchasing should be based upon the food services needs and storage availability. The food services manager is responsible for establishing and maintaining detailed records and proper accounting procedures, and should be prepared to justify all expenditures and establish future budget requirements.

905.4 PROCEDURE

The food services manager is responsible for ensuring that food services are delivered in an efficient and cost-effective manner by employing the following procedures, including, but not limited to:

- (a) Developing an annual budget that is realistically calculated according to previous spending data and available revenue, and lists all anticipated costs for the food services operation for the coming year.
- (b) Establishing a per meal, per inmate cost using an inventory of existing supplies and planned purchases, minus the anticipated ending inventory.
- (c) Ensuring that accurate meal record data is collected and maintained. Meal records should include, but not be limited to, the date and time of service and the number of:
 1. Meals prepared and served for each meal period.
 2. Meals served per location.
 3. Prescribed therapeutic diet meals served.
 4. Authorized religious diet meals served.
 5. Authorized disciplinary detention diet meals served.

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- (d) Ensuring that food is purchased from an approved wholesale/institutional vendor to ensure food safety.
- (e) Bulk-purchasing nonperishable items to maximize the budget dollars.
- (f) Continuous monitoring and improvement to minimize poor food management and/or accounting, including, but not limited to:
 - 1. Following planned menus.
 - 2. Inspection of food deliveries to ensure the right quantity is delivered and the condition of the food is acceptable.
 - 3. Purchasing food that is in season.
 - 4. Purchasing the grade of product best suited to the recipe.
 - 5. Following standard recipes.
 - 6. Producing and portioning only what is needed.
 - 7. Minimizing food production waste and establishing appropriate food storage and rotation practices, including proper refrigeration.
 - 8. When reasonably practicable, responding to the inmate's food preferences.
 - 9. Establishing minimum staffing requirements based on the layout and security requirements of the facility.
 - 10. Budgeting adequately for equipment repair and replacement, factoring in any labor cost savings, the need for heavy-duty equipment with corrections packages for safety and inmate abuse.
- (g) Establishing purchasing specifications, which are statements of minimum quality standards and other factors, such as quantity and packaging. A basic specification should contain:
 - 1. The common name of the product.
 - 2. The amount to be purchased.
 - 3. The trade, federal or other grade or brand required.
 - 4. The container size and either an exact, or a range of the number of pieces in a shipping container.
 - 5. The unit on which prices are to be quoted (e.g., 6/#10 cans, 10/gallons).
- (h) Establishing accounting procedures for financial statements and inventory control.
- (i) Maintaining records of invoices, purchase orders, meal count sheets, food production records, therapeutic and religious diet records, inventory of food, supplies and equipment for the required period of time, as mandated by the governing body of the facility.

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905.5 MONTHLY REPORTING

The food services manager is responsible for ensuring that accurate meal record data is collected and maintained. Meal records should include, but not be limited to, the number of:

- (a) Meals prepared and served for each meal period.
- (b) Meals served per location.
- (c) Prescribed therapeutic diet meals served.
- (d) Authorized religious diet meals served.
- (e) Authorized disciplinary diet meals served.

A monthly report summarizing all data should be provided to the Corrections Chief.

All meal records shall be retained in accordance with office retention schedules and state statutory regulations (WAC 44-14-03005).

Inspection of Food Products

906.1 PURPOSE AND SCOPE

The purpose of this policy is to establish methods by which the Food and Drug Administration (FDA) and/or the United States Department of Agriculture (USDA) inspections and/or approvals are conducted on any food products grown or produced within the correctional facility system.

906.2 POLICY

The Skagit County Sheriff's Office will ensure the safety and quality of all food products grown or produced at this facility through routine inspections and approvals, as required by law.

906.2.1 FOOD INSPECTION PROCEDURES

The food services manager is responsible for developing procedures for ensuring that all food used in the food services operation has been inspected and/or approved to standards established by statute and that the delivery of all foodstuffs to the correctional facility kitchens and to the inmates occurs promptly to reduce the risk of any food-borne illness or contamination.

The food services manager shall establish inspection procedures in accordance with established standards and statutes. Such procedures shall include, but are not limited to:

- (a) The FDA or USDA inspection and/or approval of all food products grown or produced by this facility prior to distribution.
- (b) A system of periodic audits and inspections of the facility and of all raw material suppliers, either by custody staff or by a third-party vendor.
- (c) A system of thorough documentation of all inspection and approval processes, training activities, raw material handling procedures, activities, cleaning and sanitation activities, cleanliness testing, correction efforts, record-keeping practices and the proper use of sign-off logs shall be developed and implemented.
- (d) Processes of evaluating the effectiveness of training, and validating cleanliness through testing (e.g., swabs, bioluminescence and visual, taste and odor evaluations) shall be created and implemented. Records of all such activities shall be documented.
- (e) Documentation of any recommendations for continuous quality improvement and their implementation, with the intent of eliminating deficiencies. Documentation should include a post-deployment verification of the correction.
- (f) The food services manager is responsible for ensuring adherence to the following practices, including, but not limited to:
 - 1. The scope of food products being grown or processed internally is well-defined.
 - 2. All critical processes are validated to ensure consistency and compliance with specifications.

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3. Any changes to the process are evaluated for effectiveness.
4. There are clearly written instructions and procedures for the staff and inmates to follow.
5. The staff and inmates are trained to perform all established tasks and document all necessary procedures.
6. Physical barriers for separating raw and cooked food-processing areas are established and maintained.
7. The traffic flow of workers is designed to minimize the risk of any cross-contamination.
8. All drains are used and cleaned properly, within industry standards.
9. Proper equipment and/or tools are provided and designated for specific use.
10. All persons working in the food services areas are wearing proper clothing and protective devices at all times.
11. All persons working in the food services areas wash their hands properly and frequently.
12. Only authorized personnel are allowed in the food processing areas.
13. Only potable water is used for growing or washing produce.
14. The distribution of all prepared food is done in a manner that reduces the risk of food-borne illness or contamination.

Food Services Facilities Inspection

907.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for inspecting food services areas and facilities to ensure a safe and sanitary environment for staff and inmates.

907.2 POLICY

It is the policy of the Skagit County Sheriff's Office that the food services area be maintained in a safe, sanitary condition by conducting regularly scheduled inspections, by facility staff, the Skagit County Department of Public Health and when appropriate, by an outside independent inspection authority.

907.3 CLEANING AND INSPECTIONS BY STAFF

The food services manager shall ensure the dining and food preparation areas and all equipment in the food services area are inspected weekly. Adequate hot and cold water should be available in the kitchen. Water temperature of all fixtures, including washing equipment, should be checked and recorded weekly to ensure compliance with the required temperature range. Deficiencies noted by inspections shall be promptly addressed.

A cleaning schedule for each food services area shall be developed and posted for easy reference by staff, and shall include areas such as floors, walls, windows and vent hoods. Equipment, such as chairs, tables, fryers and ovens, should be grouped by frequency of cleaning as follows:

- After each use
- Each shift
- Daily
- Weekly
- Monthly
- Semi-annually
- Annually

The food services manager is responsible for establishing and maintaining a record-keeping system to document the periodic testing of sanitary conditions and safety measures, in accordance with established records retention schedules (WAC 44-14-03005). At the direction of the Corrections Chief or the authorized designee, the food services manager shall take prompt action to correct any identified problems.

907.3.1 SAFETY INSPECTION CHECKLIST

The following items should be part of the weekly inspection:

- Lighting is adequate and functioning properly.

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- Ample working space is available.
- Equipment is securely anchored.
- There are suitable storage facilities, minimizing the risk of falling objects.
- Floors are clean, dry, even and uncluttered.
- Machines have proper enclosures and guards.
- A clear fire safety passageway is established and maintained.
- Fire extinguishers and sprinkler systems are available, not expired and are tested regularly.
- The food preparation area has good ventilation.
- Furniture and fixtures are free from sharp corners, exposed metal and splintered wood.
- All electrical equipment is in compliance with codes and regulations.
- All workers wear safe clothing, hair coverings, gloves and protective devices while working.
- All workers are in good health, with no symptoms of illness or injury that would pose a risk to food safety.
- All ranges, ovens and hot holding equipment are clean and in good operating condition.
- Mixers and attachments are clean and in good operating condition.
- Dishwashing machines are clean and in good operating condition, and proper chemicals are in use.
- Water temperatures for hand sinks, ware washing sinks and dishwashing machines meet minimum acceptable temperatures.
- All hand-washing stations have free access, soap, nail brushes, hot and cold running water under pressure and a method to dry hands.
- Toilet facilities are in good repair and have a sufficient supply of toilet paper.
- All temperature charts and testing documents are current, accurate and periodically reviewed and verified by the food services manager.
- Only authorized personnel are allowed in the kitchen area.
- Foods are labeled and stored properly using the first-in first-out system.
- The refrigerators and freezers are in good operating condition and maintain proper temperature.
- There is no evidence of cross-connection or cross-contamination of the potable water system.

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907.4 CONTRACTING FOR INSPECTION

The food services manager is responsible for ensuring that the food services operation works in accordance with all state and local laws and regulations.

When appropriate, the Corrections Chief shall contract with an independent, outside source for periodic inspection of the food services facilities and equipment, to ensure that established state and local health and safety codes have been met.

Documentation of the inspections, findings, deficiencies, recommended corrective actions and verification that the corrective standards were implemented will be maintained by the facility in accordance with established records retention schedules (WAC 44-14-03005).

A contract for services from an independent and qualified inspector should include, but is not limited to, the following components:

- (a) The inspector should conduct a pre-inspection briefing with the Corrections Chief and other appropriate personnel, including the food services manager, to identify the applicable government health and safety codes and the areas to be inspected. The inspector should provide the necessary equipment to conduct the inspection.
- (b) The inspector should audit the policies and procedures of the food services operation.
- (c) During the course of the inspection, the inspector should study and report on whether the following meet acceptable standards:
 - 1. Walls, ceilings and floors are in good condition, smooth and easily cleanable.
 - 2. The kitchen layout is properly designed to avoid cross-contamination.
 - 3. The kitchen is properly lighted and ventilated.
 - 4. The temperature controlled storage areas are in good operating condition and proper temperatures are being maintained.
 - 5. Dry foods are properly stored off the floor, away from the walls and ceilings.
 - 6. There is no sign of vermin infestation.
 - 7. All equipment is properly maintained, in a sanitary condition and is certified by one of the American National Standards Institute certification agencies (e.g., Underwriters Laboratories, Extract, Transform and Load, or the National Science Foundation product certification mark).
 - 8. The dishwashing equipment is clean, in good operating condition and maintains proper washing and rinsing temperatures.
 - 9. There is no evidence of cross-contamination between the potable and contaminated water systems.
 - 10. The ware washing area is clean and supplied with proper chemicals and Material Safety Data Sheets.
 - 11. The food is properly stored, labeled and rotated according to first-in first-out procedures.

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12. The food services staff and inmate workers are wearing clean uniforms and practice proper personal hygiene.
13. All food services workers are trained for proper food handling and there is a person in charge who is responsible for the food safety of the facility.
14. There are ample hand-washing stations supplied with warm water under pressure, soap, nail brushes, a method to dry hands, a waste container and employee hand-washing signs.

Any deficiencies should be noted by the inspector in his/her inspection report and recommendations made for corrective action.

At the exit interview the inspector should cite any violations according to the government health and safety codes.

The inspector should conduct a follow-up inspection to verify the deficiencies have been corrected as recommended.

The food services manager should provide the Corrections Chief with a plan to implement the recommended corrections in a timely manner and schedule a post-correction inspection with the original independent inspector.

Food Storage

908.1 PURPOSE AND SCOPE

The purpose of this policy is to establish food storage methods that are designed to meet manufacturer's recommendations, health and safety codes, state laws and local ordinances, and to safely preserve food, extend storage life and reduce food waste.

908.2 POLICY

Food and food supplies will be stored in sanitary and temperature-controlled areas in compliance with state and local health laws and standards.

908.3 PROCEDURES

The food services manager shall be responsible for establishing procedures to ensure the safe preservation and storage of food in the most cost-effective manner, beginning with the receipt of the raw materials through the delivery of prepared meals.

When receiving food deliveries, food services staff shall inspect the order for quality and freshness and shall ensure that the order is correct by checking the order received against the order form. All delivery vehicles shall be inspected by food services staff to make certain that the vehicles are clean, free from vermin infestations and are maintained at the appropriate temperature for the type of food being carried.

If food quality and freshness do not meet commonly accepted standards or if it is determined that proper storage temperatures have not been maintained, the employee checking the order in will refuse the item and note the refusal on the invoice.

Any food destined for return to the vendor should be stored separately from any food destined for consumption. The food services manager will contact the vendor and arrange for replacement of the unacceptable food items.

Storage temperatures in all food storage areas should be checked and logged on a daily basis. Records of the temperature readings should be maintained in accordance with established records retention schedules (WAC 44-14-03005).

An evaluation system should be established for food stored in any area with temperature readings outside the normal range and should include contingency plans for menu changes, food storage relocation or food destruction, as indicated. All actions taken to ensure the safety of the food served should be documented and retained in accordance with established records retention schedules (WAC 44-14-03005).

908.4 DRY FOOD STORAGE

Canned items and dry food that does not need refrigeration should be stored in a clean, dry, secure storage area where temperatures are maintained between 45 and 80 degrees. Temperatures shall be monitored and recorded once each day on a checklist.

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All dry items shall be stored at least 6 inches off the floor and at least 6 inches away from any wall. Only full unopened cans and containers shall be stored in the storerooms. Open containers and packages shall be appropriately stored in the working or holding areas.

All storage areas will be kept locked when they are not in actual use. New food shipments shall be placed behind existing like items and rotated using a first-in first-out rotation method.

Personal clothing and personal items shall not be stored in food storage areas.

908.4.1 MAINTENANCE OF DRY FOOD STORAGE AREAS

Inmate workers or staff should clean the storage areas at least once each day by sweeping and mopping all floors and wiping down shelves and walls. Any damaged items should be inspected for spoilage and repackaged or discarded as appropriate. Food services staff should inspect the storage areas to ensure they are clean and orderly. Staff will document the inspection and record the daily temperature on the storage area checklist.

908.5 REFRIGERATED AND FROZEN STORAGE

Unless health codes dictate otherwise refrigerators must be kept between 32 and 41 degrees. Deep chill refrigerators will be set between 28 and 32 degrees for cook-chill products, dairy and meat items, to extend shelf life. Freezers shall be maintained at 32 degrees or below.

All freezer and refrigerator storage areas should have at least two thermometers to monitor temperatures. One thermometer should have a display visible to the outside. The second thermometer shall be placed in the warmest place inside the storage area. Daily temperature readings shall be recorded on the storage area checklist. Any variance outside of acceptable temperature range shall be immediately addressed.

All food must be covered and dated when stored. Cooked items shall not be stored beneath raw meats. Cleaned vegetables shall be stored separately from unwashed vegetables. Storage practices shall use a first-in first-out rotation method.

908.5.1 MAINTENANCE OF REFRIGERATED AND FREEZER AREAS

Refrigeration storage units should be cleaned daily, including mopping floors and wiping down walls. A more thorough cleaning should occur weekly to include dismantling and cleaning shelves. Food services staff should inspect the contents of freezers and storage units daily to ensure all items are properly sealed and labeled.

908.5.2 STORAGE OF CLEANING SUPPLIES AND MATERIALS

The storage of soaps, detergents, waxes, cleaning compounds, insect spray and any other toxic or poisonous materials are kept in a separate locked storage area to prevent cross contamination with food and other kitchen supplies.

908.6 WASTE MANAGEMENT

The food services manager shall develop and maintain a waste management plan to that ensures the garbage is removed daily. This plan also should include methods to minimize the waste of edible food and to dispose of non-edible or waste food material without utilizing a landfill.

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Prescribed Therapeutic Diets

909.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure that inmates who require prescribed therapeutic diets as a result of a diagnosed medical condition are provided with nutritionally balanced therapeutic meals that are medically approved and meet nutritional and safety standards.

909.2 POLICY

The Responsible Physician, in consultation with the food services manager, shall:

- (a) Develop written procedures that identify individuals who are authorized to prescribe a therapeutic diet.
- (b) The therapeutic diets utilized by a facility shall be planned, prepared and served with consultation from a registered dietitian.
- (c) The Corrections Chief shall comply with any therapeutic diet prescribed for an inmate.
- (d) The Corrections Chief and the Responsible Physician shall ensure that the therapeutic diet manual, which includes sample menus of therapeutic diets, shall be available in both the health services and food services work areas for reference and information. A registered dietitian shall review, and the Responsible Physician shall approve, the therapeutic diet manual on an annual basis.

As a best practice, all therapeutic diet prescriptions should be reviewed and rewritten, if appropriate, on a quarterly basis. This is to reduce the risk of an inmate developing an adverse medical condition or nutritional effect as the result of a diet that is inconsistent with the inmate's current medical needs. A diet request form should be made available to inmates.

Pregnant or lactating women shall be provided a balanced, nutritious diet approved for pregnant women by a physician.

909.3 STAFF COMMUNICATION/COORDINATION

It is the responsibility of the health authority to compile a daily list of all inmates who are prescribed therapeutic diets. The list should contain the following information:

- (a) Inmate's name
- (b) Inmate's identification number
- (c) Housing location or dining location where the meals will be delivered
- (d) Inmate's therapeutic diet type
- (e) Special remarks or instructions

Any time inmates are assigned to a different housing area, correctional staff must notify the food services personnel immediately.

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Prescribed Therapeutic Diets

909.4 PREPARATION AND DELIVERY OF MEALS

The food services manager or the authorized designee is responsible for reviewing the therapeutic diet lists prepared by the Responsible Physician, counting the number and type of therapeutic meals to be served and preparing the food according to the therapeutic menu designed by the registered dietitian.

Therapeutic diets may include snacks and oral supplements. Snacks and supplements should be distributed with regularly scheduled meal service or may be distributed with inmate medications. Individual labels or written documents containing the following information should be prepared by the kitchen, clearly identifying each meal and any included snacks:

- (a) Inmate's name
- (b) Inmate's identification number
- (c) Housing location or dining location where the meals will be delivered
- (d) Inmate's therapeutic diet type
- (e) A list of items provided for the meal

The custody staff responsible for meal distribution shall ensure that any inmate who has been prescribed a therapeutic meal by the Responsible Physician or the authorized designee receives the prescribed therapeutic meal. Inmates who receive a therapeutic meal should sign for receipt of the meal. Therapeutic meal receipts should be retained in the inmate's medical record for an amount of time necessary to resolve any dispute about the receipt or composition of a prescribed meal.

Unless a therapeutic diet was prescribed with a specific end date, only the Responsible Physician or the authorized designee may order that a therapeutic diet be discontinued.

Inmates who are receiving therapeutic diets must receive clearance from the Responsible Physician before he/she may receive a religious or disciplinary diet.

If prescribed by the Responsible Physician, supplemental food shall be served to inmates more frequently than the regularly scheduled meals. An inmate who misses a regularly scheduled meal shall receive his/her prescribed meal.

909.5 THERAPEUTIC AND RELIGIOUS MEAL RECORDS

Inmates receiving prescribed therapeutic diet meals and/or authorized religious diet meals must sign a document indicating:

- (a) Inmate's name
- (b) Inmate's identification number
- (c) Dates and times of service
- (d) Housing location or dining location where the meals will be delivered
- (e) Inmate's therapeutic diet type

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- (f) A list of items provided for the meal

All information regarding a therapeutic diet is part of an inmate's medical record and is therefore subject to state and federal privacy laws concerning medical records.

All meal records shall be retained in accordance with established retention schedules and applicable statutory regulations (WAC 44-14-03005).

Disciplinary Detention Diet

910.1 PURPOSE AND SCOPE

This policy establishes the requirement for providing inmates disciplinary detention diets when they are ordered for disciplinary reasons. The disciplinary detention diet will only be utilized after all of the provisions of the Disciplinary Segregation section of the Inmate Segregation Policy are implemented.

910.2 POLICY

The food services manager shall prepare the disciplinary detention diet after receiving directions from the Corrections Chief. Records of providing this diet shall be maintained by the food services manager.

The disciplinary detention diet shall be served twice during each 24-hour period and shall consist of one-half of a vegetable/meatloaf (see recipe below) per meal (or a minimum of 19 oz. of cooked loaf). The loaf shall be accompanied by two slices of whole wheat bread and at least one quart of water if the inmate does not have access to a water supply. The use of the disciplinary detention diet is an exception to the "three meals per day" policy described in the Inmate Segregation Policy.

910.3 PROCEDURES

The disciplinary detention diet shall consist of the following:

- (a) 2 ½ oz. nonfat dry milk
- (b) 4 ½ oz. raw grated potato
- (c) 3 oz. raw carrots, chopped or grated fine
- (d) 1 ½ oz. tomato juice or puree
- (e) 4 ½ oz. raw cabbage, chopped fine
- (f) 7 oz. lean ground beef, turkey or rehydrated, canned or frozen Textured Vegetable Protein (TVP)
- (g) 2 ½ fl. oz. oil
- (h) 1 ½ oz. whole wheat flour
- (i) ¼ tsp. salt
- (j) 4 tsp. raw onion, chopped
- (k) 1 egg
- (l) 6 oz. dry red beans, pre-cooked before baking (or 16 oz. canned or cooked red kidney beans)
- (m) 4 tsp. chili powder

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Disciplinary Detention Diet

These ingredients should be shaped into a loaf and baked at 350-375 degrees for 50-70 minutes.

Chapter 10 - Inmate Programs

Inmate Programs and Services

1000.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the programs and services that are available to inmates. The programs and services exist to motivate offenders toward positive behavior while they are in custody. The policy identifies the role and responsibilities of the Inmate Program Deputy, who manages a range of programs and services.

1000.2 POLICY

The Skagit County Sheriff's Office will make available to inmates a variety of programs and services subject to resources and security concerns. Programs and services offered for the benefit of inmates may include social services, faith-based services, recreational activities, library access, educational/vocational training, alcohol and drug abuse recovery programs and leisure time activities.

1000.3 INMATE PROGRAMS COORDINATOR RESPONSIBILITIES

The Inmate Program Deputy is selected by the Corrections Chief and is responsible for managing the inmate programs and services, including the following:

- (a) Research, plan, budget, schedule and coordinate security requirements for all inmate programs and services.
- (b) Develop or procure programs and services as authorized by the Corrections Chief.
- (c) Act as a liaison with other service providers in the community that may offer social or educational programs, (e.g., school districts, department of social services, health educators and substance abuse counselors).
- (d) Develop, maintain and make available to inmates the schedule of programs and services.
- (e) Develop policies and procedures and establish rules for the participation of inmates in the programs and services.
- (f) Develop and maintain records on the number and type of programs and services offered, as well as inmate attendance at each offering.
- (g) Establish controls to verify that the content and delivery of programs and services are appropriate for the circumstances.
- (h) Accumulate data and prepare monthly and annual reports as directed by the Corrections Chief.

1000.4 SECURITY

All programs and services offered to benefit inmates shall adhere to the security and classification requirements of this facility. To the extent practicable, the Inmate Program Deputy will develop

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individualized programs and services for inmates who are housed in high-security or administrative segregation.

1000.5 DISCLAIMER

Inmate programs are provided at the sole discretion of the Skagit County Sheriff's Office in keeping with security interests, available resources and best practices.

Nothing in this policy is intended to confer a legal right for inmates to participate in any program offered other than what is required by law or that which is medically required.

Inmate Welfare

1001.1 PURPOSE AND SCOPE

The Office is required to meet federal and state constitutional requirements relating to inmate and public welfare. Proceeds, based on county costs for security measures and management expenses, from the commissary, vending machines, telephones and other inmate-related commerce activities, to be placed in the Jail's operations fund and may be transferred to an expense account use to provide necessities for inmates.

1001.2 EXPENSE ACCOUNT FOR INMATE NECESSITIES

The Inmate Program Deputy in cooperation with the Accountant the expense account for inmate necessities, including programs, services and activities benefiting the general inmate population and enhancing inmate activities and programs. This includes capital construction and improvement projects in support of such programs, services and activities.

1001.3 FUNDING SOURCES

When authorized, revenues and funding from the following sources shall be deposited into jail fund and expended on authorized uses:

- (a) Proceeds from commissary operations
- (b)
- (c) Proceeds from the operation of inmate telephones
- (d)
- (e) Donations, When specifically directed by the donor
- (f)

Inmate Accounts

1002.1 PURPOSE AND SCOPE

This policy establishes guidelines and procedures for managing, handling and accounting of all money belonging to inmates that is held for their personal use while they are incarcerated in this facility.

1002.2 INMATE ACCOUNTS

The Office will establish a process of for receiving funds from authorized sources for use of individual inmates. A separate account will be established for each inmate when he/she is booked into this facility and the inmate will have electronic access to the account.

The Office may require that each person who is booked into the jail pay a booking fee (RCW 70.48.390). The fee is payable immediately from any money then possessed by the person being booked, or any money deposited to the person's account.. In the event that the person booked is not charged or is acquitted, or if all of the charges are dismissed, the booking fee collected shall be refunded to that person.

Funds will be made available to inmates for thier use in accordance with the rules and regulations established by the Corrections Chief. An inmate may use money in his/her inmate account to purchases items from the inmate commissary, to pay for telephone calls, or to bail out of correctional facility. Inmates may receive and release money while in custody.

Inmates will not be allowed to accumulate large sums of money in their account other than for the purpose of bail.

Any subsequent deposits to the inmate's fund shall be documented.

1002.3 FUNDING SOURCES

Only funds from approved sources may be deposited and credited to an inmate's account. Funds deposited into an inmate's account will first be used to settle the inmate's negative balance, should one exist.

1002.3.1 DEPOSITS DURING BOOKING

When an inmate is admitted to the correctional facility, a written, itemized inventory of any money in the inmates's possession shall be completed and the inmate shall sign a document acknowledging the nature and amount of the funds. With the exception of amounts for legally prescribed fees (e.g., booking fees, pay to stay), cash and checks forwarding funds form an inmate's account at another jail or prison will be deposited into the inmate's account. Other checks from approved sources and money orders may be deposited in the inmate's account with the inmate's written approveal. Checks and money orders that are not deposited into an inmate's account will be placed in the inmate's property. An inmate shll be issued a receipt for all funds deposited or held at the time of booking.

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1002.3.2 DEPOSITS THROUGH THE MAIL

Money orders and checks issued by federal, state, county or city government agencies that are received through the mail are acceptable for deposit into inmate accounts. The Jail will not accept checks from non-government sources for deposits. Such checks will be returned to the sender or inventoried and placed in the inmate's property.

The jail may accept money order for deposit to an inmate's account.

The use of the mail or other delivery service to deliver cash for deposit to an inmate's account is not recommended. Such deliveries of cash may not be accepted, and the county assumes no liability for the loss of cash delivered to the Jail for an inmate's use until the cash, if accepted, is inventoried and deposited to an inmate's account.

1002.3.3 VISITOR DEPOSITS

An automated Kiosk, similar to an automated teller machine (ATM), will be available in the facility's lobby for visitors to deposit funds into an inmate's account.

1002.4 AUTHORIZATION FOR SELF-BAIL

Inmates wishing to use their personal funds as bail must sign an Authorization for Self-Bail transaction document. This transaction document must be received by the cashier before the inmate's account can be debited and a receipt issued.

1002.5 RELEASE OF FUNDS TO OTHER PERSONS

Inmates wishing to release all or part of their personal funds to a person who is not in custody must sign a cash withdrawal transaction document. The person to whom the funds are to be released must contact the cashier, who will prepare a cash withdrawal transaction document for the amount to be withdrawn, and will indicate to whom the money is to be released. That person must furnish a valid driver's license or state-issued identification card to the cashier. The cashier will then forward the cash withdrawal transaction document to the proper housing area for the inmate's signature and approval.

1002.6 RELEASE FROM CUSTODY

The cashier will receive a daily roster of inmates scheduled for release. Each inmate's account will be accessed and a report showing all activity on the account will be completed and filed after it has been adjusted to show a zero balance.

Staff members who are responsible for the release of inmates will notify the cashier of all impending releases, including those not on the scheduled release roster, by providing the list with the names and booking numbers to the cashier.

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The cashier will release the money to the inmate after the inmate endorses the account report.

1002.7 SECURE BANKING OF INMATE FUNDS

All monies collected by custody personnel shall be secured daily in an officially designated and secure place, and verified by a supervisor.

1002.8 AUTOMATED KIOSKS

Automated kiosks for the deposit of monies into the inmate trust fund or to transfer inmate monies for the purchase of commissary or other authorized items will use programs that follow standard accounting practices and provide a means for inmates and staff to track transactions such as deposits, withdrawals, and expenditures.

Counseling Services

1003.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process for providing counseling and crisis intervention services to inmates.

1003.2 POLICY

This office will provide counseling and crisis intervention services to any inmate who either requests services or is determined by a health provider to be in need of counseling or crisis intervention services. These services may be provided by:

- (a) Medical/mental health staff assigned to the facility.
- (b) Faith-based counseling by the chaplain or religious volunteers (see the Religious Programs Policy).
- (c) Deputies assigned to the facility who have specific training and expertise in this area.

The Corrections Chief shall coordinate with the Responsible Physician to develop and confidentially maintain records of counseling and crisis intervention services provided to inmates and to ensure that those records are retained in accordance with established records retention schedules (WAC 44-14-03005).

The Corrections Chief shall ensure that request forms are available and provided to inmates who request counseling services. All inmate requests for counseling shall be forwarded to the Shift Supervisor. If an inmate displays behavior indicating a need for counseling or crisis intervention services, the facility employee shall notify the Shift Supervisor. The Shift Supervisor shall assess the need and area of counseling and make a reasonable effort to provide the inmate with the requested counseling as soon as practicable with consideration given to facility security, scheduling and available resources. Inmates who are victims of a sexual abuse or harassment incident will be informed of the availability and continuity of counseling (28 CFR 115.82; 28 CFR 115.83).

1003.3 NON-CRISIS COUNSELING

The Office shall, when reasonably practicable, make counseling services available to assist inmates who are being released into the community.

Inmate Exercise and Recreation

1004.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines and procedures ensuring that the Skagit County Sheriff's Office facility will have sufficiently scheduled exercise and recreation periods and sufficient space for these activities, as required by law.

1004.1.1 DEFINITIONS

Definitions related to this policy include:

Exercise - The physical exertion of large muscle groups.

Recreation - Activities that may include table games, watching television or socializing with other individuals.

1004.2 POLICY

It is the policy of this office to provide inmates with access to exercise opportunities and to recreation activities in accordance with state laws or requirements. The Corrections Chief or the authorized designee shall be responsible for ensuring there is sufficient secure space allocated for physical exercise and recreation, and that a schedule is developed to ensure accessibility for all inmates.

1004.3 ACCESS TO EXERCISE

Inmates shall have access to exercise opportunities, including at least one hour daily of physical exercise outside the cell, and the opportunity to exercise outdoors when weather permits.

The day Shift Supervisor shall use the approved daily log sheet to document when inmates of like classification status are scheduled to exercise each day and shall record the exercise of an inmate, or that the inmate has declined outside exercise.

Daily log sheets should be collected monthly and forwarded to the Corrections Chief. Log sheets shall be maintained in accordance with established records retention schedules WAC 44-14-03005).

1004.4 ACCESS TO RECREATION

Each inmate shall have access to recreational (leisure-time) activities outside the cell at least once a day. The length of time will be determined by the inmate's classification status, security concerns and operational schedules that preclude recreation during a period of time (e.g., meal times, searches, lockdown or court). The staff should ensure that the maximum time possible is provided to the inmates for this purpose.

Televisions, newspapers, table games and other items may also be made available to enhance recreation time. Consideration will be given to the passive or active recreational needs of older inmates and inmates with disabilities.

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1004.4.1 USE OF THE INMATE WELFARE FUND

Monies derived from the Inmate Welfare Fund may be used to purchase and maintain recreational furnishings and supplies.

1004.5 SECURITY AND SUPERVISION

The staff supervising the inmates during recreation time shall document when each inmate has the opportunity to exercise or recreate, and when each inmate actually participates.

Staff shall be responsible for inspecting recreational furnishings to ensure it appears safe for use. Broken furnishing or furnishing that is in an unsafe condition shall not be used. Inmates will not be permitted to use furnishings without supervision. All furnishing shall be accounted for before inmates are returned to their housing unit.

The supervising staff may terminate the recreation period and escort back to the housing unit any inmate who continues to act in an aggressive or disorderly manner after being ordered to stop by the staff. Whenever an recreation period is involuntarily terminated, the staff will document the incident and rationale for terminating the exercise period. The Shift Supervisor will determine whether disciplinary action is warranted.

1004.6 EXERCISE SPACE

Sufficient outdoor and covered/enclosed exercise areas, as specified by federal, state and/or local laws or requirements, should be provided to ensure one hour of exercise for each general population inmate per day. Use of outdoor exercise is preferred but weather conditions may require the use of covered/enclosed space. Day room space is not considered exercise space.

1004.7 INABILITY TO MEET REQUIREMENTS

In the event that the inmate population exceeds the ability of the facility to meet the exercise and recreation requirements, the facility should notify the governing body about the deficiency in space for exercise, that it may violate the law and/or the requirements, and request funds to remedy the situation. The facility should document all action taken to try to remedy the situation, including funding requests, population reduction requests and all responses to those requests.

Commissary Services

1006.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a commissary program that will give inmates the opportunity to purchase personal items that are not provided by the facility.

1006.2 POLICY

It is the policy of this office to provide space for an inmate commissary, or to provide for a commissary service, so that inmates who are not on disciplinary restriction and who have funds posted to their inmate accounts may purchase approved items that are not furnished by the facility.

To the extent reasonably practicable, the prices for items offered to the inmates in the commissary shall correspond to local retail store prices.

Any commissary inventory or sales issues related to religious diets shall be addressed in the Religious Programs Policy in this manual.

1006.3 COMMISSARY MANAGER RESPONSIBILITIES

The Corrections Chief shall be responsible for designating a qualified person to act as the Commissary Manager. High-security items shall be identified, stored and inventoried as such. The Commissary Manager shall be responsible for the accounting and general operation of the commissary, which shall include, but is not limited to:

- Maintaining current rules, regulations and policies of the commissary and ensuring compliance by commissary staff.
- Managing inventory and processing orders in a timely manner.
- Performing weekly audits of high-security items.
- Ensuring that sufficient space is provided either on or off facility property, for the storage and processing of commissary orders.
- Ensuring commissary facilities are sanitary and secure.
- Conducting a quarterly inventory of all supplies and immediately reporting any discrepancies to the Corrections Chief.
- Ensuring that all inmates who are approved to purchase commissary items are provided with a printed list of items that are available at local stores if the facility does not operate a commissary.

1006.4 COMMISSARY ACCOUNTING

The Shift Supervisor shall be responsible for ensuring that all inmates who have commissary privileges have the opportunity to order and receive commissary items in a timely manner.

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All inmates shall be afforded the opportunity to review an accounting of their money held in their account, to include deposits, debits and commissary goods purchased and received. Any discrepancy of the inmate's funds shall be immediately reported to the Commissary Manager. If the Commissary Manager and the involved inmate cannot settle the discrepancy, the Corrections Chief shall be notified and the Corrections Chief will resolve the discrepancy.

1006.5 INMATE WELFARE PACKS

The Corrections Chief or the authorized designee shall monitor the provision of welfare packs to indigent inmates. Welfare packs shall include, but not be limited to:

- (a) Two postage-paid envelopes and paper letters each week to permit correspondence with family members and friends.
- (b) Personal hygiene items, including toothbrush, toothpaste, soap and other supplies deemed to be appropriate for indigent inmates.

The Sheriff may expend money from the Inmate Welfare Fund to provide indigent inmates with essential clothing and limited transportation expenses upon release.

1006.6 ANNUAL AUDIT OF THE COMMISSARY

The Commissary Manager shall ensure that an annual audit of the commissary operation is conducted by a certified auditor who is recognized by the Office as an authorized financial auditor. The written report prepared by the auditor shall be reviewed for accuracy by the Commissary Manager and provided to the Corrections Chief.

All excess funds derived from the operation of the commissary shall be deposited into the Inmate Welfare Fund or otherwise used for the benefit of the inmates. They also may be deposited and used in accordance with expenditures authorized by the board of supervisors. An itemized report of expenditures shall be submitted annually to the board of supervisors.

Inmate Mail Policy

1008.1 PURPOSE AND SCOPE

The purpose of this policy is to protect the First Amendment right for inmates to correspond with their families and people in the community in a way that is consistent with the safe and orderly operation of the facility.

The policy also acknowledges case law that allows government to restrict some First Amendment rights of inmates by identifying parameters for inspecting, suspending or restricting certain types of mail.

1008.2 POLICY

It is the policy of this office that inmates, at their own cost, may send or receive mail with no restrictions on quantity provided it does not jeopardize the safety of staff, visitors or other inmates or pose an unreasonable disruption to the orderly operation of the facility. The volume of mail to or from an inmate shall not be restricted. However, inmates are only allowed to store a limited number of letters, as determined by the Corrections Chief or authorized designee, in their cell. Excess mail will be stored with the inmate's personal property and returned at his/her release.

All inmates will be provided information on mail policies and procedures during their orientation or by accessing the inmate handbook.

1008.2.1 INDIGENT INMATES

Upon request, indigent inmates will be permitted at least two postage-paid letters each week. Unless otherwise provided by the courts, the jail will not provide additional free postage for indigent inmates for mail which is not considered legal mail. There shall be no limit on the number of postage-paid letters for indigent inmates under the following section.

1008.3 CONFIDENTIAL CORRESPONDENCE / LEGAL MAIL

Any mail between any inmate and their attorney shall be considered confidential legal mail.

Inmates approved by the court to represent themselves pro se against pending criminal charges in a particular case are considered "pro se defendants." Inmates representing themselves during the pleading stage of a habeas or civil rights action or in an appeal of a sentence being served are considered "pro se litigants."

For pro se defendants, outgoing and incoming mail addressed is considered confidential legal mail when addressed to or from the following:

- (a) The inmate's attorney, including stand-by counsel,
- (b) A court-appointed licensed investigator,
- (c) A court-appointed expert witness,

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(d) The Prosecuting Attorney

(e) A local, state or federal court or

(f) An attorney corresponding with a pro se defendant concerning legal advice, including established legal rights organizations (e.g., American Civil Liberties Union, Disability Rights Washington, legal service corporations, public defender associations)

It shall be the responsibility of the pro se defendant to identify the stand-by counsel, court-appointed license investigator, court-appointed expert or any other category under this rule in order for the jail and to identify the legal proceeding to appropriately apply this policy.

For pro se litigants, outgoing or incoming mail addressed is considered confidential legal mail when addressed to or from the following:

(a) An opposing counsel or party in a court case of record in any local, state, federal or tribal court,

(b) Any local, state, federal or tribal court,

(c) An attorney corresponding with a pro se defendant concerning legal advice, including established legal rights organizations (e.g., American Civil Liberties Union, Disability Rights Washington, legal service corporations, public defender associations),

(d) The Washington State Bar Association, the Washington Attorney General's Office, the governor, members of the state legislature, law enforcement officers in their official capacity, embassies and consulates.

It shall be the responsibility of the pro se litigant to identify the opposing counsel or party in any court case of record, or any other category under this rule in order for the jail and to identify the legal proceeding to appropriately apply this policy.

All outgoing mail under this policy shall be sealed, addressed and clearly marked as "Legal Mail" before delivery to jail personnel.

Incoming mail readily identifiable as being from a court will be handled as legal mail, regardless of whether it has been marked legal mail.

Incoming legal mail shall be opened in the presence of the inmate.

An indigent inmate seeking to send mail rejected for non-compliance with this policy shall make a written request to a Jail supervisor.

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1008.4 SUSPENSION/RESTRICTION OF MAIL PRIVILEGES

Mail privileges may be suspended or restricted upon approval of the Corrections Chief or authorized designee whenever staff becomes aware of mail sent by an inmate that involves:

- (a) Threats , or mail of violence against any member of the government, judiciary, legal representatives, victims or witnesses.
- (b) Incoming or outgoing mail representing a threat to the security of the facility, staff or the public.
- (c) Contact with persons subject to a no contact or similar order.

The County Prosecutor should be consulted in cases where criminal charges are considered against an inmate or there is an apparent liability risk to the Office that relates to suspension or restriction of mail privileges.

Mail privileges may be suspended or restricted upon approval of the Corrections Chief whenever staff becomes aware of mail sent by an inmate that:

- (a) Involves threats of violence against any member of the government, judiciary, legal representatives, victims or witnesses.
- (b) Presents a threat to the security of the facility, staff or the public.
- (c) Appears to attempt contact with persons subject to a no contact or similar order.

Mail may be held or returned when the mail:

- a. Threatens illegal activity, including but not limited to, threats of physical harm, blackmail or extortion.
- b. Threatens the safety and security of the institution, including but not limited to, mail concerning sending contraband escape plans, security devices, or mail that is in a code, a foreign language that cannot be interpreted, does not contain a return address, contains gang symbols, plans for activities in violation of institutional rules or contains information which, if communicated, would create a risk of violence and/or physical harm.
- c. Is identified as legal mail, but is general correspondence.
- d. Is deemed to be a threat to legitimate penological objectives, including but not limited to, sexually explicit materials.
- e. Contains inmate to inmate correspondence that has not been approved by the Corrections Chief or designee.
- f. Is addressed to or intended for an individual with whom contact is restricted in compliance with a judgment and sentence, a no contact order, or facility policy.
- g. Is addressed to a minor whose parents or guardian have objected in writing to such correspondence.
- h. Is addressed to an individual or their guardian who previously has been sent obscene or threatening mail by the inmate has complained or has asked that such mail not be received.
- i. Solicits money or goods from a person or organization other than the immediate family of the inmate without the permission of the Corrections Chief or designee.
- j. Does not contain a return address that includes the inmate's full committed name, inmate number, housing assignment, and the full name of the correctional facility.

Where criminal charges are considered against an inmate because of the inmate's use of the mail the matter may be referred to the Sheriff's Office for investigation.

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1008.5 PROCESSING AND INSPECTION OF MAIL BY STAFF

Staff should process incoming and outgoing mail as expeditiously as reasonably possible. All incoming and outgoing mail should be held for no more than 24 hours, all packages should be held for no more than 48 hours. Mail processing may be suspended on weekends, holidays or during any emergency situation resulting in the suspension of normal facility activities. An emergency situation may include, but is not limited to, a riot, escape, fire, natural disaster, employee action or other serious incident.

Assigned deputies should open and inspect all incoming general mail and may read the same as frequently as deemed necessary to maintain security or monitor a particular problem.

Except for confidential correspondence, outgoing mail may be unsealed and may be read and inspected by staff when:

- (a) There is reason to believe the mail would:
 - 1. Interfere with the orderly operation of the facility.
 - 2. Be threatening to the recipient.
 - 3. Facilitate criminal activity.
- (b) The inmate is on a restricted mail list.
- (c) The mail is between inmates.
- (d) The envelope has an incomplete return address.

When mail is found to be inappropriate in accordance with the provisions of this policy or when an inmate is sent material that is not prohibited by law but is considered contraband by the facility, the material may be returned to the sender or held in the inmate's property to be given to the inmate upon release.

Inmates are not allowed to correspond with other inmates in this correctional facility, as well as other jails or correctional institutions.

Inmates shall be notified in writing whenever their mail is held or returned to the sender. Mail logs and records, justification of censoring or rejection of mail, and copies of hold or return notices shall be maintained in the inmate's file in accordance with established records retention schedules (WAC 44-14-03005).

Cash, checks and mail orders contained in incoming inmate mail shall be removed and credited to the inmate's account.

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1008.6 BOOKS, MAGAZINES, NEWSPAPERS AND PERIODICALS

Unless otherwise in conflict with this policy and prohibited by the Corrections Chief, inmates are permitted to purchase, receive and read any book, newspaper, periodical or writing accepted for distribution by the United States Postal Service.

Publications, magazines or newspapers shall be accepted only if they are mailed directly from the publisher to a named inmate. A local daily newspaper in general circulation, including a non-English publication, and magazine subscriptions provided by the publisher shall be made available to interested inmates.

1008.7 REJECTION OF MAGAZINES AND PERIODICALS

The Office may reject magazines, periodicals and other materials that may inhibit the reasonable safety, security and discipline in the daily operation of this facility. Generally, books, newspapers and magazines are accepted only if they are sent directly by the publisher. Materials that may be rejected may include, but are not limited to the following:

- Materials that advocate violence or a security breach.
- Literature that could incite racial unrest.
- Sexually explicit material, including pornographic magazines, nude pictures, pictures or descriptions of sexually explicit activities.
- Obscene publications or writings and mail containing information concerning where, how or from whom such matter may be obtained; any matter of a character tending to incite murder, arson, riot, violent racism or any other form of violence; any matter of a character tending to incite crimes against children; any matter concerning unlawful gambling or an unlawful lottery; the manufacture or use of weapons, narcotics or explosives or any other unlawful activity.
- Material that could create a hostile or offensive work environment.
- Any material with content that could reasonably demonstrate a legitimate government interest in rejecting the material.

Staff shall notify the Shift Supervisor whenever a decision is made to reject books, magazines or periodicals. The Corrections Chief or the authorized designee will be responsible for making the final decision as to the specific magazines, periodicals and other materials that will be prohibited within this facility.

Religious texts not supplied by facility-authorized entities may be accepted by the chaplain or other religious volunteer who has received training on facility rules involving contraband, and who has been approved by a supervisor to review such documents for distribution.

1008.8 FORWARDING OF MAIL

Any non-legal mail received for a former inmate should be returned to the sender with a notation of the last known address, if any, for the inmate. Legal mail shall be forwarded to the former inmate's

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new address if it is reasonably known to the facility. Otherwise, legal mail should be returned to sender.

Inmate Telephone Access

1009.1 PURPOSE AND SCOPE

This policy establishes guidelines for permitting inmates to access and use telephones.

1009.2 POLICY

The Skagit Correctional Facility will provide access to telephones for use by inmates consistent with federal and state law. The Corrections Chief or the authorized designee shall develop written procedures establishing the guidelines for access and usage. All inmates will be provided a copy of the telephone usage rules as part of their inmate orientation during the booking process.

1009.3 PROCEDURE

Inmates housed in general population will be permitted reasonable access to public telephones at scheduled times in the dayrooms for collect calls unless such access may cause an unsafe situation for the facility, staff or other inmates. The Corrections Chief shall ensure notice is given to inmates and persons receiving calls that non-attorney calls may be monitored and recorded.

Inmates are not permitted to receive telephone calls. Messages will only be delivered in the event of a verified emergency.

In the event of a facility emergency, or as directed by the supervisor, the Corrections Chief or the authorized designee, all telephones will be turned off.

For security reasons, inmates who are awaiting transport to another facility or release to another agency are not permitted to use the telephones.

Telecommunications Device for the Deaf (TDD) or equally effective telecommunications devices will be made available to inmates who are deaf, hard of hearing or have speech impairments to allow these inmates to have equivalent telephone access as those inmates without these disabilities.

The minimum time allowed per call should be 10 minutes, except where there are substantial reasons to justify such limitations.

Reasons for denial of telephone access shall be documented and a copy placed into the inmate's file. The rules governing the use of the telephone will, in addition to being provided to inmates during orientation, be posted near the telephones.

The staff should monitor the use of public telephones to ensure inmates have reasonable and equitable access and that the rules of use are observed. Any inmate refusing to cooperate with the telephone rules may have his/her call terminated, telephone privileges suspended and/or incur disciplinary action.

Requirements relating to the use of telephones during booking and reception are contained in the Inmate Reception Policy.

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1009.4 USE OF TELEPHONES IN HIGH-SECURITY OR ADMINISTRATIVE SEGREGATION HOUSING

Inmates who are housed in high-security or administrative segregation may use the public telephones in the dayroom during the time allocated for that classification of inmate to utilize that space. If portable telephones are available in the facility, inmates who are housed in high-security or administrative segregation units may have reasonable access to the portable telephones.

1009.5 COURT-ORDERED TELEPHONE CALLS

If a court order specifying free telephone calls is received by the facility, or a supervisor determines there is a legitimate need for a free telephone call for a specific inmate, the supervisor may direct that an inmate use a facility telephone at no charge. Calls placed from a facility telephone should be dialed by a staff member. The staff shall be responsible for ensuring that the inmate is not calling a number that has been restricted by a court order or by request of the recipient. Such a call shall be recorded to the same extent authorized for calls that are not court-ordered.

1009.6 ATTORNEY-CLIENT TELEPHONE CONSULTATION

At all times through the period of custody, whether the inmate has been charged, tried, convicted or is serving an executed sentence, reasonable and non-recorded telephone access to an attorney shall be provided to the inmate at no charge to either the attorney or to the inmate, in accordance with the Inmate Access to Courts and Counsel Policy.

Foreign nationals shall be provided access to the diplomatic representative of their country of citizenship. Staff shall assist them upon request.

1009.7 CONFERENCE CALL REGARDING CHILD PLACEMENT

Inmates who are parents shall be allowed to participate in a case conference convened pursuant to RCW 13.34.067 by either conference call or video conference.

1009.8 TELEPHONE CONTRACTS AND CHARGES

The Corrections Chief or the authorized designee is responsible for ensuring that all contracts involving telephone services for inmates comply with all applicable state and federal regulations, that rates and surcharges are commensurate with those charged to the general public for similar services, and that the broadest range of calling options is provided, in accordance with sound correctional management practices.

Resources for Released Inmates

1011.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the process of providing community resource information to any inmate who is due for release after serving at least 30 days, in order to assist with the transition back into the community.

1011.2 POLICY

It is the policy of this office that all inmates who have served at least 30 days shall be provided with an information packet containing community resources prior to their release. The packet should contain, at a minimum, the contact information for the following organizations and resources:

- Community health centers
- Employment centers
- Registry office to obtain an identification card
- Substance abuse and mental health providers
- Housing agencies
- Education agencies

Subject to the approval of the Sheriff or the Corrections Chief, the staff or community providers may offer classes within the facility that are related to these community services.

Work Release Program

1012.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the guidelines and requirements for the Work Release Program. The Work Release Program allows inmates to maintain employment, support families and facilitate a successful return to the community. The Work Release Program is supervised by the Jail Alternatives Staff.

1012.2 POLICY

It is the policy of this office to operate a voluntary Work Release Program to provide inmates with opportunities to secure or maintain employment, support families, assist in the payment of fines and penalties to the court and promote a successful return to the community (RCW 70.48.210).

Release programs shall be conducted in accordance with state and local guidelines. In cases of pretrial release, the courts may have jurisdiction over release decisions.

1012.3 WORK RELEASE PROGRAM

Any inmate who has met the eligibility requirements and received approval may be granted permission to leave the facility to work at his/her place of employment in accordance with state and local guidelines, court orders and the provisions of this policy.

The Corrections Chief or the authorized designee has sole authority to approve participation in the program for each inmate, and is responsible for the overall conduct and administration of the Work Release Program.

The Work Release Program participants are limited to geographic restrictions of the facility and must remain within state boundary lines unless otherwise ordered by the sentencing court.

1012.3.1 ELIGIBILITY

In order to be eligible for the Work Release Program, an inmate must meet the following requirements:

- Sentenced directly to work release programs by the court
- Qualify under the current Jail Alternatives standards
- No outstanding warrants, wants or detainers

Inmates who do not adhere to the rules of the program will be subject to removal from the program and to disciplinary and criminal action in accordance with the rules of the facility and applicable laws.

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Work Release Program

1012.3.2 STAFF RESPONSIBILITY

The Work Release Program staff is responsible for contacting the employer prior to authorizing the work assignment. The staff should inform the employer and the inmate of the rules and expectations for program participants.

The program staff shall provide each employer with the facility's contact information, including the contact person and telephone number, and instruct the employer to notify the contact person immediately if an inmate does not report to work, leaves prior to the scheduled departure time, or if any concerns arise during the work shift. The facility should provide a contact person who is available 24 hours a day, seven days a week, as some inmates will work evening or overnight shifts.

1012.3.3 HOUSING

Inmates participating in the Work Release Program should be housed in an area other than general population housing to reduce the possibility of contraband entering the facility. Inmates in the program may either return to separate housing within the facility's secure perimeter or may be housed in a residential facility outside the secure perimeter. Factors to consider when determining appropriate housing for program participants include the following:

- Rated bed capacity of the facility
- Current occupancy
- Housing options and security capabilities outside the secure perimeter of the facility
- Number of inmates approved to participate in the program

1012.3.4 DAILY WORK ITINERARIES

Inmates must have an approved daily work itinerary prior to leaving the facility. The itinerary should include the following:

- Scheduled start and stop times for work
- Anticipated amount of travel time between the facility and the employer each way
- Mode of transportation each way (e.g., bus, car, walk)
- Location of the workplace
- Contact name, address, and telephone number of the employer
- Contact name, telephone number, and driver's information of the transport person if the inmate does not have a valid license
- Contact name and telephone number of the on-duty program staff member

Any change to the itinerary (e.g., overtime, location of the work place, transportation) must be approved in advance by the Corrections Chief or the authorized designee.

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Work Release Program

1012.3.5 FINANCIAL MANAGEMENT

All inmates who participate in the Work Release Program shall ensure that the appropriate funds are deposited into their inmate account. Funds from the inmate account will be subtracted for room and board, program drug testing, booking fees and other appropriate expenses. Fines to the court, victim restitution, allowances to help pay family financial obligations and funds for a savings account may also be taken from the account with the permission of the inmate, court order or state law (RCW 72.11.020).

1012.3.6 EMPLOYER VERIFICATION

The Work Release Program staff shall make scheduled telephone calls and random site visits to the inmate's employer to ensure compliance with the rules of the program.

1012.3.7 PROGRAM CONFLICTS

The Work Release Program staff shall make every attempt to ensure the inmate's work schedule does not conflict with his/her required participation in treatment programs at the facility.

1012.3.8 DRUG TESTING

Random and scheduled drug testing shall be conducted on all inmates participating in the Work Release Program. Any positive results may cause the inmate's disqualification from the program, as well as disciplinary sanctions or criminal charges, if warranted.

1012.4 RECORDS

The following records shall be maintained by the Corrections Chief or the authorized designee on all inmates participating in the Work Release Program and retained in accordance with the office established records retention schedule (WAC 44-14-03005):

- (a) All payments and accounting associated with the Work Release Program
- (b) All contacts between the staff and employers prior to releasing inmates to work and confirming all employment information
- (c) All daily logs of time worked and payments received

Inmate Work Program

1013.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the guidelines and requirements for the Inmate Work Program. The Inmate Work Program allows inmates to improve and/or develop useful job skills, work habits and experiences that will facilitate a successful return to the community.

1013.2 POLICY

The Skagit County Sheriff's Office may operate an Inmate Work Program within the secure perimeter of the facility, in accordance with all applicable federal, state or local work safety laws, rules and regulations, and to the extent that the operation of inmate work programs do not pose a risk to the safety of the staff, other inmates or the public. This policy establishes the requirements, selection process, supervision and training of inmates prior to and after entering the facility's Inmate Work Program.

1013.3 LEGAL REQUIREMENTS

1013.3.1 SENTENCED INMATE WORK REQUIREMENTS

All sentenced inmates who are physically and mentally able shall work if they are not assigned to other programs. Inmates may not be required to perform work which exceeds their physical limitations. Inmates may be excused from work in order to maintain their participation in an educational, vocational or drug abuse treatment program. The Office will abide by all laws, ordinances and regulations when using inmates to work in the facility.

1013.3.2 PRETRIAL AND UNSENTENCED INMATE WORK REQUIREMENTS

Pretrial and unsentenced inmates may volunteer to participate in the Inmate Work Program but shall not be required to participate in work beyond maintaining the immediate living area.

1013.4 INMATE WORKER SELECTION

The Classification Sergeant or Designee shall be responsible for the selection and assignment of inmates to the various work assignments. The Coordinator should solicit input from other custody staff in assisting with inmate selection and assignment. Staff shall take into consideration the following eligibility criteria:

- (a) Inmates who have posed a threat in the past or have been charged with escape should be carefully screened for inmate work projects.
- (b) The inmate's charges and classification are such that the inmate will not pose a security risk to other inmates, staff or the public.
- (c) The inmate's capacity to perform physical tasks will match the job requirements.
- (d) The inmate is able to learn the necessary work routines.
- (e) The special interests, abilities, craft or trade of the inmate will benefit the work assignment.

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Inmates must be able to pass a health-screening test in accordance with the policies contained in this manual, and must meet all statutory and regulatory requirements. Health-screening shall be done for inmates who work in the kitchen, around food products or who serve meals to the inmate population.

1013.5 WORK ON PUBLIC PROJECTS

Sentenced inmates may be assigned to public works projects with state, municipal and local government agencies, or to community service projects, with the approval of the Sheriff and in accordance with all applicable laws and regulations.

1013.6 PROHIBITION OF NON-PUBLIC WORK PROJECTS

Work projects on behalf of any private individual or to an individual's private property are strictly prohibited and may constitute a violation of the law.

1013.7 SUPERVISION OF INMATE WORKERS

Facility staff in charge of work programs or who provide supervision of inmates assigned to work crews should adhere to the following:

- (a) Inmate workers should be provided with safety equipment, clothing and footwear commensurate with the work performed. Safety equipment may include, but is not limited to, eye protection, gloves, hardhat or headwear and sunscreen for protection from sun exposure.
- (b) Work periods should not exceed 10 hours per day.
- (c) Inmate workers should be provided with work breaks to allow them to take care of personal needs.
- (d) Inmate workers shall have access to nutritious meals and a reasonable amount of time to consume those meals during their work period.
- (e) Inmates who work shifts during the early morning or late-night hours should be provided with a quiet space to allow for sleep during daytime hours.
- (f) The inmate workday approximates the workday in the community.
- (g) Inmate performance is regularly evaluated and recorded.
- (h) Inmates receive written recognition of the competencies they acquire.

Inmate workers shall be under the direct supervision of approved personnel at all times when they are on assignment through the Inmate Work Program.

Persons who are responsible for the supervision of inmates on work crews should receive training in basic areas of safety, security and reporting procedures.

Disciplinary action for inmate worker misconduct shall adhere to the Inmate Discipline Policy.

Inmate Work Program

1013.8 INMATE WORKER TRAINING

Inmates who are assigned to work in any area that may require the handling of any chemicals or the use of any equipment shall receive training from the respective Office supervisor prior to using the chemicals or equipment. Work-crew supervisors shall also train inmate workers on safety practices. Inmates should never be assigned to handle dangerous chemicals or equipment that normally require a level of expertise and competency beyond their demonstrated ability.

1013.9 INMATE WORKER INCENTIVES

The Corrections Chief is responsible for establishing a recognition program for inmates assigned to the Inmate Work Program. Recognition of inmates can include the following:

- (a) Granting "Good Time and Work" credits as allowed by state or local law.
- (b) Using credits for sentence reduction when allowed by statute.
- (c) Granting special housing, extra privileges, recreation and special rewards, as allowed by law, regulation and policy.
- (d) Awarding certificates of achievement for successful completion of vocational, educational and/or work programs.

Chapter 11 - Facility Design

Space and Environmental Requirements

1100.1 PURPOSE AND SCOPE

This policy describes the desired space and environmental requirements for the physical plant.

1100.2 POLICY

It is the policy of this office to comply with federal and state laws, codes and correctional standards in matters relating to the jail space and environmental requirements. Any designs for renovations, modifications, additions or new construction within the facility should be in compliance with federal and state laws, codes and jail standards.

Planned designs for renovations, modifications, additions or new construction within the facility should facilitate continuous personal contact and interaction between the correctional staff and inmates. This contact should be by direct physical observation of all cells, dayrooms and recreation areas. Electronic surveillance may be used to augment the observation of inmates but shall not be used as a substitute for personal contact and interaction.

All parts of the facility that are accessible to the public should be accessible to and usable by disabled persons.

1100.3 SPACE REQUIREMENTS

Except for emergency accommodations of a limited duration, all areas in the physical plant shall conform to building and design requirements contained in federal and state law, codes and minimum jail standards as required for their intended design and use. Areas that are repurposed for other than their original intended use shall likewise comply with all building design requirements for the new purpose.

1100.4 ALTERNATE RATED CAPACITY

If needed, the Corrections Chief may base the rated capacity on an alternate method of calculation as provided in the jail standards. This alternate method allows capacity to be based on overall living space available to inmates, adjusted for the time inmates actually have access to any specific areas. If this method is selected, the Corrections Chief, together with county officials, should develop a plan to bring the facility into agreement with the space-related standards within a five-year period.

1100.5 DETENTION HARDWARE

All locks, detention hardware, fixtures, furnishings and equipment shall have the proper security value for the areas in which they are used. The use of padlocks in place of security locks on cell or inmate housing unit doors is generally prohibited, as unauthorized locking mechanisms may pose a significant threat to the safety and security of the facility in the event of an emergency.

Space and Environmental Requirements

1100.6 ENVIRONMENTAL REQUIREMENTS

All occupied areas of the physical plant shall conform to the building and design requirements contained in federal and state law, codes and jail standards with respect to light, air and noise level.

1100.6.1 LIGHTING LEVELS

Lighting throughout the facility shall be sufficient for staff and inmates to perform necessary tasks. Night lighting levels should permit adequate illumination for supervision but should not unnecessarily interfere with the ability of inmates to sleep.

1100.6.2 NATURAL LIGHT

All inmate living areas should provide visual access to natural light, unless prohibited by security concerns.

1100.6.3 NOISE LEVEL

Noise levels at night should be sufficiently low to allow inmates to sleep. Nothing in this policy is intended to limit or impair in any way staff's ability to monitor the jail in a manner that is consistent with safety and security and good correctional practices. Noise measurements in each housing unit shall be documented by a qualified independent source no less than once per annual inspection cycle and a report provided to the Corrections Chief.

1100.6.4 VENTILATION

The ventilation system shall be sized and calibrated to supply fresh or circulated air in accordance with federal and state laws, codes and jail standards. Toilet rooms and cells with toilets shall be calibrated to have no less than four exchanges of air per hour, unless local codes require a different number of air exchanges.

Other than an emergency situation, inmates or correctional facility staff shall not adjust or restrict the ventilation systems without the express permission of the supervisor. Any adjustments made to the ventilation system shall only be allowed for the duration of the emergency or until qualified maintenance personnel can adjust or repair the ventilation system.

Air quantities shall be documented at least annually by a qualified independent contractor, and a report provided to the Corrections Chief.

1100.6.5 TEMPERATURE LEVELS

Temperature and humidity levels shall be mechanically maintained at a level established by facility maintenance personnel and deemed comfortable and cost efficient.

Temperature readings shall be documented for each area of the facility on a weekly basis on the appropriate log. Staff shall immediately contact facility maintenance in the event that temperatures or humidity levels become uncomfortable.

1100.6.6 CELL FURNISHINGS

Each inmate housed in this facility shall be provided with the following items:

- A sleeping surface and mattress at least 12 inches off the floor

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- A writing surface and seat
- An area for the storage of clothing and personal belongings

1100.7 DAYROOMS

Dayrooms shall be equipped with at least one shower for every 15 inmates or fraction thereof, and tables and sufficient seating for all inmates at capacity. Where inmates do not have continuous access to their cells, dayrooms shall also be equipped with one toilet, an immediate source of fresh potable water and lavatory with hot and cold water for every 12 inmates or fraction thereof.

1100.8 JANITOR CLOSETS

Janitor closets shall be located near or inside each housing unit. Each janitor closet should contain a sink and the necessary cleaning implements. Access to the janitor closets shall be controlled and supervised by the staff. Only inmates with a minimum security classification status shall be allowed access to the janitor closets, and then only under the supervision of staff.

1100.9 EMERGENCY POWER

The facility shall be equipped with a sufficient emergency power source to operate communications, security and alarm systems in control centers, and emergency lighting in corridors, stairwells, all inmate housing areas, security control points and audio-visual monitoring systems.

1100.10 NEW CONSTRUCTION AND RENOVATION

In the case of partial renovation of an existing facility, it is intended that these standards should apply only to the part of the facility being renovated. The remainder of the facility would be subject to the existing standards.

Smoking/Tobacco Use

1101.1 PURPOSE AND SCOPE

The U.S. Surgeon General has determined that the use of tobacco in any form can be hazardous to one's health. Tobacco products may also be offensive to other employees and to the public.

1101.2 POLICY

Smoking and the use of other tobacco products is not permitted inside office facilities, any office vehicle or any other county building. It shall be the responsibility of all employees to ensure that no person, including inmates, smokes or uses any tobacco product inside office facilities or vehicles (RCW 70.160.030).

No person shall smoke tobacco products within 25 feet of a main entrance, exit or operable window of any public building, including any office facility (RCW 70.160.075).

Employees are prohibited from smoking or using tobacco products while in public view.

Control Center

1102.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a 24-hour secure control center for monitoring and coordinating the facility's security, life safety and communications systems, including aspects of staffing, training and communications and monitoring capabilities.

1102.2 POLICY

It is the policy of this office to provide sufficient space for a 24-hour secure control center, which shall be staffed continuously for the purpose of monitoring and coordinating the facility's security, life safety and communications systems. It is the responsibility of the Corrections Chief or designee to ensure that current written orders for Central Control post is available and that a process is in place to verify that deputies assigned to those posts acknowledge in writing by signature and date that they have read and understand the orders. The Corrections Chief or the authorized designee shall review post orders annually and update them as needed.

1102.3 COMMUNICATIONS AND MONITORING CAPABILITIES

Central Control shall have multiple means of direct communication capabilities with all staff control stations in inmate housing areas, including telephone, intercom and radio.

The Central Control staff shall be responsible for monitoring fire, smoke and life safety alarms and shall have the means to summon assistance in the event of an emergency.

Each Central Control shall be located in close proximity to the inmate living areas to enable staff to monitor and respond quickly to any emergency.

1102.4 POST ORDERS

Comprehensive post orders for every deputy position shall be developed. Copies of the orders should be maintained at each post. Clear procedures should be incorporated into post orders for all regular daily activities including, but not limited to, safety checks, head counts, meals, sick call, recreation, clothing exchange, mail distribution and response to emergencies, such as fires, natural disasters and criminal acts.

1102.5 TRAINING

The Training Sergeant shall ensure that all staff members assigned to posts are properly trained to perform all duties and responsibilities described in the post orders. This is particularly true in fire, life safety and the emergency response procedures that have been implemented by the Corrections Chief. This may include the use of self-contained breathing apparatus (SCBA) if such equipment is available and/or required by the local fire authority. All training should be documented in each employee's training file and retained in accordance with established records retention schedules (WAC 44-14-03005).

Crowding

1103.1 PURPOSE AND SCOPE

One of the determining factors in maintaining a safe and secure jail is to limit the inmate population to the number of beds constructed in each inmate classification level. Occasionally, emergencies occur that will require the correctional facility to exceed its approved bed capacity. This policy establishes the rated bed capacity of the facility, addresses temporary population excess and provides a plan for gathering statistics and projecting long-term space needs via a jail needs assessment.

1103.2 POLICY

It is the policy of the Skagit County Sheriff's Office to manage the inmate population, to the extent as is reasonably possible to avoid exceeding the facility's approved bed capacity. The Sheriff is responsible for ensuring that the number of inmates does not exceed the approved bed capacity.

The facility has a sufficient number of housing units in an appropriate configuration so that inmates can be separated according to the facility's classification plan.

In the event of an unexpected emergency that causes the facility to be populated beyond the approved bed capacity, every reasonable effort should be made to reduce the inmate population to the approved bed capacity as soon as reasonably practicable. The Office will take affirmative action to address excess population, including the petition of the Governor for assistance, in accordance with RCW 9.94A.875. In the event that the inmate population remains over capacity or continues to increase, a crowding committee should be formed to examine any and all methods to ensure that the facility population is reduced and remains within the approved bed capacity.

1103.3 LAW AND JUSTICE COUNCIL

The county legislative authority is responsible for forming a law and justice council. When the number of inmates exceeds the rated bed capacity of the facility, the Sheriff should schedule a meeting with the committee for the purpose of identifying potential solutions to reduce the population to, or below, the rated bed capacity (RCW 72.09.300).

A complete report describing facility population, conditions and mitigation recommendations should be provided to all members of the committee, as well as being released to the public.

The committee membership should include, but not limited to, the following:

- (a) The county Sheriff
- (b) Representatives from municipal police offices within the county
- (c) Representatives of the city legislative authorities within the county
- (d) The county prosecutor and representatives of the municipal prosecutors within the county

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- (e) A representative of the county's superior, juvenile, district and municipal courts
- (f) The county jail administrator
- (g) The county clerk
- (h) The county risk manager
- (i) The secretary of corrections

Officials designated may appoint representatives.

1103.4 FACILITY NEEDS ASSESSMENT

In the event that the correctional facility maintains an average 80 percent occupancy rate consistently for one year, the Office should initiate a jail needs assessment. The assessment initiates a systematic process that is designed to identify a variety of operational issues and program needs, and may indicate when expansion or replacement of the facility is warranted.

1103.5 INMATE POPULATION REPORTS

The Corrections Chief or the authorized designee is responsible for ensuring that detailed daily logs of the facility's inmate population are completed and maintained by the staff. These logs shall reflect the monthly, average daily population of sentenced and non-sentenced inmates by categories of male, female and juvenile as of midnight of each day. The number of inmates occupying holding cells shall also be counted at midnight each day. An inmate population report summarizing this information shall be created daily and distributed to the Sheriff and the Corrections Chief (RCW 10.98.130).

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