#### **EXHIBIT C**

# FRESNO COUNTY SHERIFF'S OFFICE JAIL DIVISION POLICIES AND PROCEDURES

TITLE: GUARDING INMATES AT OFF-SITE MEDICAL FACILITIES NO: D-238

FILE: GUARDING HOSPITALIZED INMATES

EFFECTIVE DATE: 12-25-94 REVISED: 01-01-00, 02-01-02, 03-01-04, 07-01-12,

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AUTHORITY: Sheriff M. Mims APPROVED BY: Assistant Sheriff T. Gattie

REFERENCE: Penal Code Sections 3407, 4011, 4011.5, 4011.7, 4011.9 and 6030;

Turner v Safley, 482 U.S. 78 (1987); and Fresno County Sheriff's

Office Policies and Procedures Section 102

#### **PURPOSE:**

The purpose of this policy is to establish and maintain a consistent and legal method of guarding inmates who are transported and/or admitted to an off-site medical facility.

#### POLICY:

It is the policy of the Fresno County Sheriff's Office Jail Division that all inmates transported to an off-site medical facility shall have a Correctional Officer, Deputy or Reserve Deputy assigned to guard them.

It is the policy of the Fresno County Sheriff's Office Jail Division that whenever any inmate is hospitalized for more than forty-eight (48) consecutive hours, the Superior Court shall be notified that the inmate is being held at an off-site medical facility. The Medical Director of Jail Medical Services shall be responsible to file the appropriate forms with the Superior Court.

It is the policy of the Fresno County Sheriff's Office Jail Division that if an inmate who is charged with or convicted of a misdemeanor is transported and admitted to an off-site medical facility, the Jail Operations Bureau Commander (after consultation with the Medical Director of Jail Medical Services) may petition the Superior Court to have the guard removed, pursuant to Penal Code Section 4011.7.

It is the policy of the Fresno County Sheriff's Office Jail Division that the Superior Court may be petitioned in order to remove the guard from any felony inmate who is hospitalized, if it reasonably appears that the inmate is physically unable to effectuate an escape or if the inmate does not constitute a danger to life or property. The determination whether or not to petition to remove the guard from a felony inmate shall be made by the Jail Operations Bureau Commander after consultation with the Medical Director of Jail Medical Services. It is the policy of the Fresno County Sheriff's Office Jail Division that the number of officers

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guarding the inmate and any other appropriate security measures put into place shall be determined by the Watch Commander.

It is the policy of the Fresno County Sheriff's Office Jail Division to ensure that all officers assigned to guard inmates at off-site facilities have received training and orientation as required by the hospital, prior to their assignment to guard duty.

### I. OFFICER/GUARD RESPONSIBILITIES

- A. The primary responsibility of the officer on guard duty is to prevent the escape of the inmate. All persons under guard are to be considered high escape risks. Officers shall be responsible to:
  - Inspect the rooms when coming on duty. Check for windows that open, faulty locks on doors or windows, weapons, contraband, etc.
  - 2. Restrict their activities to the actual guarding of persons under guard. Officers shall not engage in any activity that may distract from the performance of their duties.
    - a. Remain alert to the activities of other persons in the room, as well as the person being guarded. They shall not turn their back to the prisoner or have their gun facing the prisoner.
    - b. Officers shall not walk away from the immediate presence of the custody patient, engage in any unnecessary visiting with friends, staff or patients, or participate in any activity that detracts their attention from the inmate.
    - c. No radios, portable TV's, card games, board games or electronic games of any type are allowed while guarding an inmate. This includes the use of electronic devices to surf the Internet, watch video recordings or television broadcasts, listen to music, or perform any other non-work-related function.
    - d. Cellular telephones may be utilized to conduct Sheriff's Office business. Personal calls shall be kept to a minimum, and at no time should the officer's attention be detracted from the inmate.
- B. Officers shall maintain visual contact with the prisoner at all times. The

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only exceptions are when the patient is:

- 1. Under general anesthesia
- 2. In surgery
- 3. In labor and in the delivery room
- 4. In the restroom
- 5. Or at any time the officer's presence is not practical due to room configurations, equipment congestion, isolation, or other reasons. In these cases, the officers may remain in the hall immediately outside the patient's room for as long as necessary. If this creates a problem with the medical staff, notify the Central Control Sergeant so they can decide what should be done.
- C. Officers shall not leave their prisoner alone. Officers should not expect to be relieved for a rest or meal break while assigned to guard duty. If absolutely necessary, Community Medical Center Security can briefly relieve officers while they use the restroom by contacting Security Services.
  - 1. Community Medical Center Security offers assistance throughout the hospitals, including the Law Enforcement Room in the Behavior Control Unit (LER/BCU) in Community Regional Medical Center (CRMC). Their dispatch number is 459-6575.
  - 2. Internal Services County) Security offers assistance in the parking lots and outer buildings, including the Crestwood Fresno Psychiatric Health Facility (formerly PHF). Their after-hours radio paging number is 452-7102.
- D. Officers shall not become overly familiar or friendly with inmates under guard.

### II. <u>DAILY OCCURRENCE LOG</u>

- A. The Central Control Sergeant will create a Hospital Log Book specific for each inmate, which will accompany the inmate to the medical facility. *Inmate Daily Occurrence Log* sheets shall be used to record the dates and times of the following activities:
  - 1. If the inmate is to be denied television privileges.

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- 2. If the inmate is authorized to receive visitation, and the name of the Watch Commander who approved the visits.
- 3. Any inmate movement (e.g., to X-ray, surgery, etc.).
- 4. Any unusual occurrences.
- 5. Any other information that needs to be conveyed to relief officers.
- B. If additional *Inmate Daily Occurrence Log* sheets are needed, contact the Central Control Sergeant or Transportation.
- C. When the inmate is released or returned to custody, the Log Book shall be returned to the Jail along with the inmate's medical paperwork.
  - 1. The *Inmate Daily Occurrence Log* sheets shall be taken to Jail Records to be scanned into the inmate's records.
  - 2. Return the Hospital Log Book to the Central Control Sergeant.
  - 3. Notify Population Management if there were any behavioral problems the inmate may have exhibited while under guard (e.g., violent outbursts, etc.).

### III. USE OF RESTRAINTS

- A. With limited exceptions, handcuffs and shackles shall be applied to all inmates transported to off-site medical facilities. Waist chains are available in the Booking and 1st Floor Security Stations and should be applied whenever possible. High-security inmates shall be transported with handcuffs, shackles, and waist chains during ALL movement,
- B. Handcuffs shall be applied behind the back of the inmate with the palms of the hands facing away from each other, unless any of the following exceptions apply:
  - 1. Restraints shall not be placed on an inmate during labor, including during transport to the hospital, during delivery, and while in recovery after giving birth. Handcuffs may only be utilized when circumstances exist that require the immediate application of mechanical restraints to avoid the imminent threat of death, escape, or great bodily injury, and only for the period during which such threat exists. No shackles or waist chains shall be applied

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to pregnant inmates. In every instance, special effort shall be made to avoid harm to the unborn child. If handcuffs are applied, the inmate's hands shall be cuffed in <u>front</u> of her body. Restraints shall be removed when a professional who is currently responsible for the medical care of a pregnant inmate during a medical emergency, labor, delivery, or recovery after delivery determines that the removal of restraints is medically necessary.

NOTE: The straps utilized by ambulance personnel are for the safety of the patient during transportation and are not subject to restriction for the purpose of this policy.

- Very obese individuals and inmates with a cast, bandage, or obvious serious injury to their extremities shall have their hands cuffed in front of their bodies (if the use of handcuffs is possible). If handcuffs cannot be utilized, shackles shall be applied.
- 3. Inmates on crutches shall be handcuffed to one crutch. If feasible or deemed necessary, transfer (and handcuff) the inmate to a wheelchair as soon as possible.
- 4. Inmates confined to wheelchairs shall be handcuffed to the wheelchair.
- C. <u>All</u> persons under guard at the hospital shall be leg shackled to the bed. Exceptions shall only be made for females during labor, delivery and recovery, or when it is physically or medically impossible or impractical. (Recovery is the length of time the inmate stays in the hospital after giving birth.)
- D. Removal of any restraints for examination and/or treatment is based upon the discretion of the officer. The nurses and doctors cannot order that an inmate's restraints be removed. If guarding more than one inmate, allow only one inmate to be out of bed at a time.
- E. Persons under guard shall not be allowed out of their room except upon the request of the hospital staff for a medical reason. In such cases, the inmate shall be shackled and accompanied by the officer.
- F. Patients under guard shall be leg shackled when they go to the restroom.
  - 1. When the inmate is in the restroom, the officer shall stand in the Page 5 of 11

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hall to ensure the inmate does not try to escape out a back door.

- 2. Do not use the patient's restroom unless absolutely necessary. When possible, use the staff restrooms in the hallways and utilize Security Services to guard the inmate.
- G. All restraints shall be double-locked at all times.
- H. Officers shall not relax their guard. Although mechanical restraint devices greatly assist in controlling inmates, the devices should not be considered a guarantee against inmate assault, nor should they be considered a guarantee against inmate escape. The devices are no substitution for vigilance and attention to duty on the part of Sheriff's personnel. Just because an inmate would logically seem to be weakened or incapacitated by some medical condition, the inmate's violent mind-set may still be functioning fully, just seeking an opportunity to attack and/or escape.

### IV. TELEPHONE ACCESS

Hospitalized inmates are not permitted to make or receive personal telephone calls. Exceptions may be made with the approval of the Watch Commander for inmates who experience hospital stays in excess of thirty (30) days duration or for those having life-threatening or critical injuries or illnesses.

### V. <u>VISITING HOSPITALIZED INMATES</u>

- A. Hospitalized inmates will not be allowed to have personal visits, except as approved by a Watch Commander.
- B. Special visits may be arranged for those inmates who experience hospital stays in excess of thirty (30) days duration or for those having life-threatening or critical injuries or illnesses. Visits are restricted to immediate family members.
- C. Pregnant inmates may request to have a support person present during child birth.
  - 1. The approval for the support person will rest with the Watch
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Commander and will be on a case-by-case review. Reason for denial must address the safety/security concerns for the inmate, infant, public and/or staff and be documented in an incident report.

2. After giving birth, the appointed guardian of the infant and/or family members may be permitted to visit the inmate in the hospital with the approval of the Watch Commander.

#### VI. VISITATION

- A. If the inmate is authorized to receive visitors, visiting will be in accordance with both the hospital's and the jail's visiting policies and will be monitored, controlled and logged by the assigned officer.
  - 1. Visitation must conform to the hospital's regular visiting hours.
  - 2. Only two visitors shall be allowed in at a time.
  - 3. Children under age 12 are not allowed to visit patients unless special arrangements are made with <u>hospital staff</u>.
- B. The guarding officer shall be responsible to obtain the visitor's name and verify the visitor's identification. The officer shall announce the arrival of the visitor and confirm that the inmate wishes to accept the visit.
  - 1. The officer shall log the full name of all persons who visit, along with the time and duration of the visit.
  - 2. It is not necessary to notify the Jail when the inmate receives a visit
- C. Violating any of the following rules shall be grounds for terminating the visit:
  - 1. The privacy curtains surrounding the hospital bed shall remain open.
  - 2. There shall not be an exchange of any items. Absolutely no food or clothing may be brought in for the inmate (e.g., no home-cooked meals, fast foods, canned sodas, etc.).
  - 3. There shall be no physical contact between the inmate and their

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visitor(s) at any time.

- 4. Visitors may not congregate in the hallway.
- 5. If the visitor displays behaviors that might be the result of drug or alcohol consumption.
- 6. If the visitor becomes disruptive or is agitating the inmate.
- D. During visits, the guarding officer shall place themselves inside of the room in a position to constantly observe the visitor(s) and the inmate. Officers will remain alert to the activities of other persons in the room, as well as the person being guarded.
- E. Officers retain the discretion to limit or deny visits to guarded patients, as space and activity in the room allows (e.g., an ICU room, a double room shared with a prisoner guarded by another agency, the presence of other visitors in the room, etc.). The decision rests with the officer and not with the nurse on duty. If a visit is denied, the basis for the decision shall be included in the Log Book and the Central Control Sergeant shall be informed.
- F. Visitors are not permitted to take photographs unless authorized by the Watch Commander.

#### VII. SERGEANT NOTIFICATION

The hospital facilities fall under the responsibility of the Central Control Sergeant. The Sergeant shall be notified when any of the following events occur:

- A. Whenever an officer is leaving the room for more than a few minutes (if two or more officers are working in the same room, one officer may leave briefly to go to the cafeteria).
- B. When taking a prisoner out of the room (e.g., going to X-Ray or an operating room), or any time the inmate is removed or transferred from their assigned location.
- C. Any time force is used to help restrain an inmate or another patient.
- D. If it is physically or medically impossible or impractical to shackle an inmate.
- E. If any problems occur with the medical staff.

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- F. If the inmate's television privileges are revoked (e.g., if the inmate's behavior is deemed inappropriate).
- G. If the inmate has been granted permission to use the telephone, and it becomes necessary to revoke the privilege (e.g., if the inmate's behavior is not deemed appropriate, or there is reason to believe the inmate is planning an escape attempt).
- H. If the inmate has been granted permission to have visitors, and it becomes necessary to revoke the privilege (e.g., if there are any problems or unusual occurrences with visitors).
- I. If the inmate attempts or affects an escape.
- J. When the inmate is ready to be released back to the jail (after the doctor has signed their release and their medication is ready).

#### VIII. DOCUMENTATION

Inmates housed at off-site medical facilities remain under the custody, care and control of the Fresno County Sheriff's Office Jail Division. The fact that an inmate is housed at an off-site facility does not negate the necessity for a report to be written. Any security incident or unusual occurrence which would normally necessitate a report, shall continue to be required.

### IX. GUARD-TO-INMATE RATIO PER ROOM

The following ratios shall be considered guidelines and do not preclude a Watch Commander, based upon other information they may have, from adjusting the ratios up or down (e.g., certain inmates may require a higher level of security while others who are non-ambulatory and/or comatose, may allow a reduction in the ratio):

| Number of Inmates | Number of Officers<br>on Watch I | Number of Officers<br>on Watch II | Number of Officers<br>on Watch III |
|-------------------|----------------------------------|-----------------------------------|------------------------------------|
| 1                 | 1                                | 1                                 | 1                                  |
| 2                 | 1                                | 2                                 | 2                                  |
| 3                 | 2                                | 2                                 | 2                                  |
| 4                 | 2                                | 3                                 | 3                                  |

If two officers are on duty, one will sit outside in the hall (except on Watch I). <u>PSYCHIATRIC HEALTH FACILITIES</u>

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Special rules and regulations apply when guarding inmates housed at psychiatric facilities. Refer to policy and procedure section D-239/Guarding Inmates at Off-Site Mental Health Facilities (FILE: GUARDING PSYCH INMATES).

### XI. ESCAPE ATTEMPTS

When guarding inmates at an off-site medical facility, the primary responsibility of the officer is to prevent the escape of the inmate under their custody. Officers must remain alert and take preventative steps to avert any escape attempts. Should an inmate attempt an escape, the response of the officer will vary greatly dependent upon the circumstances.

- A. If possible, capture and restrain the inmate. This course of action may not always be prudent or advisable (e.g., if guarding more than one inmate; if a vehicle pursuit is necessary; if a "break-out" involving weapons and outside help is involved, etc.). Use officer discretion and prudence as required.
- B. Depending on the circumstances, immediately advise both the Central Control Sergeant and Community Medical Center Security. Again, officer discretion is required (e.g., if the immediate recapture of the inmate can be facilitated and would be impeded by the time necessary to contact others, notification to the Sergeant will come secondary, but as soon as feasibly possible).
- C. Under no circumstances is an officer to assume the role of a patrol officer or detective (e.g., do not try to entrap the inmate at their home, conduct an investigation, etc.). The Watch Commander will be responsible to notify the Patrol Watch Commander to deploy resources and conduct an investigation, as appropriate.
- D. Refer also to Policies and Procedures Section B-120 Escape/ Intrusion (FILE: <u>ESCAPE</u>).

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Hospital safety codes are used to alert all employees when emergency situations occur. The hospital policies concerning each code needs to be reviewed by persons assigned to guard duty.

- A. Code Red a fire has been reported and the fire plan has been activated. Be ready to move the inmate should it become necessary for an evacuation.
- B. Code Yellow A bomb threat has been reported and a bomb search has been initiated in all departments. Search the room for any suspicious packages or devices and inform Security of any findings when they come by during the search.
- C. Code Pink or Code Purple an infant (pink) or child (purple) abduction has taken place or is in progress. Do not leave the inmate, but watch the hallway for anyone carrying a baby or small child. Notify medical staff and be able to provide a description.
- D. Code Blue a patient is experiencing a medical emergency. If the inmate is the patient, be ready to remove any restraint device that might interfere with medical treatment. After the emergency is over, check the room for any items that may have been left by medical staff that could pose a threat.
- E. Code Silver used to alert staff to an armed person and/or hostage situation. Be on high alert the person may be in the building to cause harm to the prisoner, or aid in their escape.
- F. Code Green used to notify staff that a high-risk patient has gone missing.
- G. Doctor Stat indicates that a doctor's services are required immediately. If the inmate is the patient, follow the procedures as indicated for a Code Blue.