

# **Title 15 Minimum Standards For Local Detention Facilities**

**Proposed Revisions in Strike Out and Underline**



**This page intentionally left blank.**

Minimum Standards for Adult Facilities  
 Title 15. Crime Prevention and Corrections  
 Division 1, Chapter 1, Subchapter 4

Table of Contents

§ 1006. Definitions. ....	5
§ 1010. Applicability of Standards.....	12
§ 1024. Court Holding and Temporary Holding Facility Training. ....	14
§ 1027. Number of Personnel.....	15
§ 1027.5 Safety Checks.....	<del>16</del> <a href="#">15</a>
§ 1029. Policy and Procedures Manual. ....	16
§ 1030. Suicide Prevention Program. ....	17
§ 1046. Death in Custody. ....	17
§ 1050. Classification Plan.....	18
§ 1051. Communicable Diseases. ....	18
§ 1052. Mentally Disordered Inmates. ....	19
§ 1053. Administrative Segregation. ....	19
§ 1054. Administrative Removal-Type IV Facility. ....	19
§ 1055. Use of Safety Cell. ....	<del>20</del> <a href="#">19</a>
§ 1056. Use of Sobering Cell. ....	20
§ 1057. Developmentally Disabled Inmates.....	<del>21</del> <a href="#">20</a>
§ 1058. Use of Restraint Devices. ....	22
§ 1058.5. Restraints and Pregnant Inmates. ....	22
§ 1061. Inmate Education Plan.....	23
§ 1063. Correspondence. ....	23
§ 1070. Individual/Family Service Programs.....	24
§ 1081. Plan for Inmate Discipline. ....	24
§ 1082. Forms of Discipline. ....	<del>27</del> <a href="#">26</a>
§ 1083. Limitations on Disciplinary Actions.....	<del>27</del> <a href="#">26</a>
§ 1122.5. Pregnant Minors.....	<del>28</del> <a href="#">27</a>
§ 1125. Psychotropic Medications for Minors in Jail.....	<del>28</del> <a href="#">27</a>
§ 1204. Health Care Staff Procedure.....	<del>29</del> <a href="#">28</a>
§ 1205. Health Care Records. ....	<del>29</del> <a href="#">28</a>
§ 1206. Health Care Procedures Manual.....	<del>31</del> <a href="#">30</a>

§ 1206.5. Management of Communicable Diseases in a Custody Setting. ....	<del>32</del> 34
§ 1207. Medical Receiving Screening.....	<del>32</del> 34
§ 1208.5. Health Care Maintenance. ....	<del>33</del> 32
§ 1209. Mental Health Services and Transfer to Treatment Facility. ....	<del>33</del> 32
§ 1210. Individualized Treatment Plans.....	<del>34</del> 33
§ 1217. Psychotropic Medications. ....	<del>34</del> 33
§ <del>1219. Suicide Prevention Program. ....</del>	<del>35</del> 34
§ 1241. Minimum Diet. ....	<del>35</del> 34
§ 1243. Food Service Plan.....	<del>36</del> 35
§ 1247. Disciplinary Separation Diet.....	<del>37</del> 36
§ 1270. Standard Bedding and Linen Issue.....	<del>38</del> 36
§ 1271. Bedding and Linen Exchange. ....	<del>38</del> 37

## § 1006. Definitions.

The following definitions shall apply:

“Administering Medication,” as it relates to managing legally obtained drugs, means the act by which a single dose of medication is given to a patient. The single dose of medication may be taken either from stock (undispensed), or dispensed supplies.

“Administrative segregation” means the physical separation of different types of inmates from each other as specified in Penal Code Sections 4001 and 4002, and Section 1053 of these regulations. Administrative segregation is accomplished to provide that level of control and security necessary for good management and the protection of staff and inmates.

“Alternate means of compliance” means a process for meeting or exceeding standards in an innovative way, after a pilot project evaluation, approved by the Board pursuant to an application.

“Average daily population” means the number of inmates housed in a facility in a day. Average daily population (ADP) is the ~~average number of inmates housed~~ daily population divided by the number of days in the period of measurement~~during the last fiscal year.~~

“Board” means the Board of State and Community Corrections, whose board acts by and through its executive director, deputy directors, and field representatives.

“Clinical evaluation” means an assessment of a person's physical and/or mental health condition conducted by licensed health personnel operating within recognized scope of practice specific to their profession and authorized by a supervising physician or psychiatrist.

“Concept drawings” means, with respect to a design-build project, any drawings or architectural renderings that may be prepared, in addition to performance criteria, in such detail as the agency determines necessary to sufficiently describe the agency's needs.

“Contact” means any physical or sustained sight or sound contact between juveniles in detention and incarcerated adults. Sight contact is clear visual contact between adult inmates and juveniles within close proximity to each other. Sound contact is direct oral communication between adult inmates and juvenile offenders.

“Court Holding facility” means a local detention facility constructed within a court building after January 1, 1978, used for the confinement of persons solely for the purpose of a court appearance for a period not to exceed 12 hours.

“Custodial personnel” means those officers with the rank of deputy, correctional officer, patrol persons, or other equivalent sworn or civilian rank whose duties include the supervision of inmates.

“Delivering Medication,” as it relates to managing legally obtained drugs, means the act of providing one or more doses of a prescribed and dispensed medication to a patient.

“Design-bid-build” means a construction procurement process independent of the design process and in which the construction of a project is procured based on completed construction documents.

“Design-build” means a construction procurement process in which both the design and construction of a project are procured from a single entity.

“Developmentally disabled” means those persons who have a disability which originates before an individual attains age 18, continues, or can be expected to continue indefinitely, and constitutes a substantial disability for that individual. This term includes mental retardation, cerebral palsy, epilepsy, and autism, as well as disabling conditions found to be closely related to mental retardation or to require treatment similar to that required for mentally retarded individuals.

“Direct visual observation” means direct personal view of the inmate in the context of his/her surroundings without the aid of audio/video equipment. Audio/video monitoring may supplement but not substitute for direct visual observation.

“Disciplinary ~~isolation~~ separation” means that punishment status assigned an inmate as the result of violating facility rules and which consists of confinement in a cell or housing unit. ~~separate from regular jail inmates.~~

“Dispensing,” as it relates to managing legally obtained drugs, means the interpretation of the prescription order, the preparation, repackaging, and labeling of the drug based upon a prescription from a physician, dentist, or other prescriber authorized by law.

“Disposal,” as it relates to managing legally obtained drugs, means the destruction of medication or its return to the manufacturer or supplier.

“Emergency” means any significant disruption of normal facility procedure, policies, or activities caused by a riot, fire, earthquake, attack, strike, or other emergent condition.

“Emergency medical situations” means those situations where immediate services are required for the alleviation of severe pain, or immediate diagnosis and treatment of unforeseeable medical conditions are required, if such conditions would lead to serious disability or death if not immediately diagnosed and treated.

“Exercise” means physical exertion of large muscle groups.

“Facility/system administrator” means the sheriff, chief of police, chief probation officer, or other official charged by law with the administration of a local detention facility/system.

“Facility manager” means the jail commander, camp superintendent, or other comparable employee who has been delegated the responsibility for operating a local detention facility by a facility administrator.

“Facility watch commander” means the individual designated by the facility manager to make operational decisions during his/her work hours.~~tour of duty.~~

“Health authority” means that individual or agency that is designated with responsibility for health care policy pursuant to a written agreement, contract or job description. The health authority may be a physician, an individual or a health agency. In those instances where medical and mental health services are provided by separate entities, decisions regarding mental health services shall be made in cooperation with the mental health director. When this authority is other than a physician, final clinical decisions rest with a single designated responsible physician.

“Health care” means medical, mental health and dental services.

“Jail,” as used in Article 8, means a Type II or III facility as defined in the “Minimum Standards for Local Detention Facilities.”

“Labeling,” as it relates to managing legally obtained drugs, means the act of preparing and affixing an appropriate label to a medication container.

“Law enforcement facility” means a building that contains a Type I Jail, Temporary Holding Facility, or Lockup. It does not include a Type II or III jail, which has the purpose of detaining adults, charged with criminal law violations while awaiting trial or sentenced adult criminal offenders.

“Legend drugs” are any drugs defined as “dangerous drugs” under Chapter 9, Division 2, Section 4211 of the California Business and Professions Code. These drugs bear the legend, “Caution Federal Law Prohibits Dispensing Without a Prescription.” The Food and Drug Administration (FDA) has determined because of toxicity or other potentially harmful effects, that these drugs are not safe for use except under the supervision of a health care practitioner licensed by law to prescribe legend drugs.

“Living areas” means those areas of a facility utilized for the day-to-day housing and activities of inmates. These areas do not include special use cells such as sobering, safety, and holding or staging cells normally located in receiving areas.

“Local detention facility” means any city, county, city and county, or regional jail, camp, court holding facility, or other correctional facility, whether publicly or privately operated, used for confinement of adults or of both adults and minors, but does not include that portion of a facility for confinement of both adults and minors which is devoted only to the confinement of minors.

“Local detention system” means all of the local detention facilities that are under the jurisdiction of a city, county or combination thereof whether publicly or privately operated. Nothing in the standards are to be construed as creating enabling language to broaden or restrict privatization of local detention facilities beyond that which is contained in statute.

“Local Health Officer” means that licensed physician who is appointed pursuant to Health and Safety Code Section 101000 to carry out duly authorized orders and statutes related to public health within their jurisdiction.

“Lockup” means a locked room or secure enclosure under the control of a peace officer or custodial officer that is primarily used for the temporary confinement of adults who have recently been arrested; sentenced prisoners who are inmate workers may reside in the facility to carry out appropriate work.

“May” is permissive; “shall” is mandatory.

["Medical detoxification" means a process that systematically and safely withdraws people from addicting drugs, usually under the care of a physician. Drinking alcohol or using prescribed and/or illicit drugs can cause physical and/or psychological dependence over time and stopping them can result in withdrawal symptoms in people with this dependence. The detoxification process is designed to treat the immediate bodily effects of stopping drug use that may be life-threatening.](#)

“Mental Health Director,” means that individual who is designated by contract, written agreement or job description, to have administrative responsibility for the facility or system mental health program.

“Non-secure custody” means that a minor's freedom of movement in a law enforcement facility is controlled by the staff of the facility; and

- (1) the minor is under constant direct visual observation by the staff;
- (2) the minor is not locked in a room or enclosure; and,
- (3) the minor is not physically secured to a cuffing rail or other stationary object.

“Non-sentenced inmate,” means an inmate with any pending local charges or one who is being held solely for charges pending in another jurisdiction.

“Over-the-counter (OTC) Drugs,” as it relates to managing legally obtained drugs, are medications which do not require a prescription (non-legend).

“People with disabilities” includes, but is not limited to, persons with a physical or mental impairment that substantially limits one or more of their major life activities or those persons with a record of such impairment or perceived impairment that does not include substance use disorders resulting from current illegal use of a controlled substance.



“Performance criteria” means, with respect to a design-build project, the information that fully describes the scope of the proposed project and includes, but is not limited to, the size, type, and design character of the buildings and site; the required form, fit, function, operational requirements and quality of design, materials, equipment and workmanship; and any other information deemed necessary to sufficiently describe the agency's needs; including documents prepared pursuant to paragraph (1) of subdivision (d) of Section 20133 of the Public Contract Code.

“Pilot Project” means an initial short-term method to test or apply an innovation or concept related to the operation, management or design of a local detention facility pursuant to application to, and approval by, the Board.

“Procurement,” as it relates to managing legally obtained drugs, means the system for ordering and obtaining medications for facility stock.

“Psychotropic medication” means any medication prescribed for the treatment of symptoms of psychoses and other mental and emotional disorders.

“Rated capacity” means the number of inmate occupants for which a facility's single and double occupancy cells or dormitories, except those dedicated for health care or disciplinary ~~isolation~~ [separation](#) housing, were planned and designed in conformity to the standards and requirements contained in Title 15 and in Title 24.

“Regional Center for Developmentally Disabled” means those private agencies throughout the state, funded through the Department of Developmental Services, which assure provision of services to persons with developmental disabilities. Such centers will be referred to as regional centers in these regulations.

“Remodel” means to alter the facility structure by adding, deleting, or moving any of the buildings' components thereby affecting any of the spaces specified in Title 24, Part 2, Section 1231.

“Repackaging,” as it relates to managing legally obtained drugs, means the transferring of medications from the original manufacturers' container to another properly labeled container.

“Repair” means to restore to original condition or replace with like-in-kind.

["Responsible health care staff" means an individual who is qualified by education, training and/or licensure/regulation and/or facility privileges \(when applicable\) who performs a professional service within his or her scope of practice and in accordance with assigned duties. This distinguishes the "responsible health care staff" from the many other "qualified health care staff" that are not specifically assigned to assure that certain care is rendered.](#)

“Safety checks” means direct, visual observation performed at random intervals within timeframes prescribed in these regulations to provide for the health and welfare of inmates.

“Secure custody” means that a minor being held in temporary custody in a law enforcement facility is locked in a room or enclosure and/or is physically secured to a cuffing rail or other stationary object.

“Security glazing” means a glass/polycarbonate composite glazing material designed for use in detention facility doors and windows and intended to withstand measurable, complex loads from deliberate and sustained attacks in a detention environment.

“Sentenced inmate,” means an inmate that is sentenced on all local charges.

“Shall” is mandatory; “may” is permissive.

“Sobering cell” as referenced in Section 1056, refers to an initial “sobering up” place for arrestees who are sufficiently intoxicated from any substance to require a protected environment. ~~to prevent injury by falling or victimization by other inmates.~~

“Storage,” as it relates to legally obtained drugs, means the controlled physical environment used for the safekeeping and accounting of medications.

“Supervision in a law enforcement facility” means that a minor is being directly observed by the responsible individual in the facility to the extent that immediate intervention or other required action is possible.

“Supervisory custodial personnel” means those staff members whose duties include direct supervision of custodial personnel.

["Telehealth" means a collection of means or methods for enhancing health care using telecommunications technologies. Telehealth encompasses a broad variety of technologies to deliver virtual health services.](#)

“Temporary custody” means that the minor is not at liberty to leave the law enforcement facility.

“Temporary Holding facility” means a local detention facility constructed after January 1, 1978, used for the confinement of persons for 24 hours or less pending release, transfer to another facility, or appearance in court.

“Type I facility” means a local detention facility used for the detention of persons for not more than 96 hours excluding holidays after booking. Such a Type I facility may also detain persons on court order either for their own safekeeping or sentenced to a city jail as an inmate worker, and may house inmate workers sentenced to the county jail provided such placement in the facility is made on a voluntary basis on the part of the inmate. As

used in this section, an inmate worker is defined as a person assigned to perform designated tasks outside of his/her cell or dormitory, pursuant to the written policy of the facility, for a minimum of four hours each day on a five day scheduled work week.

“Type II facility” means a local detention facility used for the detention of persons pending arraignment, during trial, and upon a sentence of commitment.

“Type III facility” means a local detention facility used only for the detention of convicted and sentenced persons.

“Type IV facility” means a local detention facility or portion thereof designated for the housing of inmates eligible under Penal Code Section 1208 for work/education furlough and/or other programs involving inmate access into the community.

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.

## § 1010. Applicability of Standards.

(a) All standards and requirements contained herein shall apply to Types I, II, III and IV facilities except as specifically noted in these regulations.

(b) Court holding facilities shall comply with the following regulations:

- (1) 1012, Emergency Suspensions of Standards or Requirements
- (2) 1018, Appeal
- (3) 1024, Court Holding and Temporary Holding Facility Training
- (4) 1027, Number of Personnel
- (5) 1027.5, Safety Checks
- ~~(5)(6)~~ 1028, Fire and Life Safety Staff
- ~~(6)(7)~~ 1029, Policy and Procedures Manual
- (8) 1030, Suicide Prevention Program
- ~~(7)(9)~~ 1032, Fire Suppression Preplanning
- ~~(8)(10)~~ 1044, Incident Reports
- ~~(9)(11)~~ 1046, Death in Custody
- ~~(10)(12)~~ 1050, Classification Plan
- ~~(11)(13)~~ 1051, Communicable Diseases
- ~~(12)(14)~~ 1052, Mentally Disordered Inmates
- ~~(13)(15)~~ 1053, Administrative Segregation
- ~~(14)(16)~~ 1057, Developmentally Disabled Inmates
- ~~(15)(17)~~ 1058, Use of Restraint Devices
- (18) 1058.5, Restraints and Pregnant Inmates
- ~~(16)(19)~~ 1068, Access to Courts and Counsel
- ~~(17)(20)~~ Title 24, Section 13-102(c)1, Letter of Intent
- ~~(18)(21)~~ Title 24, Section 13-102(c)3, Operational Program Statement
- ~~(19)(22)~~ Title 24, Section 13-102(c)5, Submittal of Plans and Specifications
- ~~(20)(23)~~ Title 24, Section 13-102(c)6C, Design Requirements
- ~~(21)(24)~~ Title 24, Part 2, Section 1231.2, Design Criteria for Required Spaces
- ~~(22)(25)~~ Title 24, Part 2, Section 1231.3, Design Criteria for Furnishings and Equipment
- ~~(23)(26)~~ 1200, Responsibility for Health Care Services
- ~~(24) 1219, Suicide Prevention Program~~
- ~~(25)(27)~~ 1220, First Aid Kit(s)
- ~~(26)(28)~~ 1246, Food Serving and Supervision
- ~~(27)(29)~~ 1280, Facility Sanitation, Safety, Maintenance

(c) In addition to the regulations cited above, court holding facilities that hold minors shall also comply with the following regulations:

- (1) 1047, Serious Illness of a Minor in an Adult Detention Facility
- (2) 1122.5, Pregnant Minors
- ~~(2)(3)~~ 1160, Purpose
- ~~(3)(4)~~ 1161, Conditions of Detention
- ~~(4)(5)~~ 1162, Supervision of Minors
- ~~(5)(6)~~ 1163, Classification

(d) Temporary holding facilities shall comply with the following regulations:

- (1) 1012, Emergency Suspensions of Standards or Requirements
- (2) 1018, Appeal
- (3) 1024, Court Holding and Temporary Holding Facility Training
- (4) 1027, Number of Personnel
- [\(5\) 1027.5, Safety Checks](#)
- ~~(5)~~[\(6\)](#) 1028, Fire and Life Safety Staff
- ~~(6)~~[\(7\)](#) 1029, Policy and Procedures Manual
- [\(8\) 1030, Suicide Prevention Program](#)
- ~~(7)~~[\(9\)](#) 1032, Fire Suppression Preplanning
- ~~(8)~~[\(10\)](#) 1044, Incident Reports
- ~~(9)~~[\(11\)](#) 1046, Death in Custody
- ~~(10)~~[\(12\)](#) 1050, Classification Plan
- ~~(11)~~[\(13\)](#) 1051, Communicable Diseases
- ~~(12)~~[\(14\)](#) 1052, Mentally Disordered Inmates
- ~~(13)~~[\(15\)](#) 1053, Administrative Segregation
- ~~(14)~~[\(16\)](#) 1057, Developmentally Disabled Inmates
- ~~(15)~~[\(17\)](#) 1058, Use of Restraint Devices
- [\(18\) 1058.5, Restraints and Pregnant Inmates](#)
- ~~(16)~~[\(19\)](#) 1067, Access to Telephone
- ~~(17)~~[\(20\)](#) 1068, Access to Courts and Counsel
- ~~(18)~~[\(21\)](#) Title 24, Section 13-102(c)1, Letter of Intent
- ~~(19)~~[\(22\)](#) Title 24, Section 13-102(c)3, Operational Program Statement
- ~~(20)~~[\(23\)](#) Title 24, Section 13-102(c)5, Submittal of Plans and Specifications
- ~~(21)~~[\(24\)](#) Title 24, Section 13-102(c)6C, Design Requirements
- ~~(22)~~[\(25\)](#) Title 24, Part 2, Section 1231.2, Design Criteria for Required Spaces
- ~~(23)~~[\(26\)](#) Title 24, Part 2 Section 1231.3, Design Criteria for Furnishings and Equipment
- ~~(24)~~[\(27\)](#) 1200, Responsibility for Health Care Services
- ~~(25)~~[\(28\)](#) 1207, Medical Receiving Screening
- ~~(26)~~[\(29\)](#) 1209, Transfer to Treatment Facility
- ~~(27)~~[\(30\)](#) 1212, Vermin Control
- ~~(28)~~[\(31\)](#) 1213, Detoxification Treatment
- ~~(29)~~ ~~1219, Suicide Prevention Program~~
- ~~(30)~~[\(32\)](#) 1220, First Aid Kit(s)
- ~~(31)~~[\(33\)](#) 1240, Frequency of Serving
- ~~(32)~~[\(34\)](#) 1241, Minimum Diet
- ~~(33)~~[\(35\)](#) 1243, Food Service Plan
- ~~(34)~~[\(36\)](#) 1246, Food Serving and Supervision
- ~~(35)~~[\(37\)](#) 1280, Facility Sanitation, Safety, Maintenance

(e) The following sections are applicable to temporary holding facilities where such procedural or physical plant items are utilized.

- (1) 1055, Use of Safety Cell

- (2) 1056, Use of Sobering Cell
- (3) 1058, Use of Restraint Devices
- (4) 1058.5, Restraints and Pregnant Inmates
- ~~(4)~~(5) 1080, Rules and Disciplinary Penalties
- ~~(5)~~(6) 1081, Plan for Inmate Discipline
- ~~(6)~~(7) 1082, Forms of Discipline
- ~~(7)~~(8) 1083, Limitations on Disciplinary Actions
- ~~(8)~~(9) 1084, Disciplinary Records
- ~~(9)~~(10) Title 24, Part 2, Section 1231.2.1 Area for Reception and Booking
- ~~(10)~~(11) Title 24, Part 2, Section 1231.2.4 Sobering Cell
- ~~(11)~~(12) Title 24, Part 2, Section 1231.2.5 Safety Cell
- ~~(12)~~(13) Title 24, Part 2, Section 1231.3.4 Design Criteria for Showers
- ~~(13)~~(14) Title 24, Part 2, Section 1231.3.5 Design Criteria for Beds/Bunks
- ~~(14)~~(15) Title 24, Part 2, Section 1231.3.8 Design Criteria for Cell Padding
- ~~(15)~~(16) 1270, Standard Bedding and Linen Issue
- ~~(16)~~(17) 1272, Mattresses

(f) Law enforcement facilities, including lockups, that hold minors in temporary custody shall, in addition to the previously cited applicable regulations, comply with the following regulations:

- (1) 1046, Death in Custody
- (2) 1047, Serious Illness of a Minor in an Adult Detention Facility
- (3) 1140, Purpose
- (4) 1141, Minors Arrested for Law Violations
- (5) 1142, Written Policies and Procedures
- (6) 1143, Care of Minors in Temporary Custody
- (7) 1144, Contact Between Minors and Adult Prisoners
- (8) 1145, Decision on Secure Detention
- (9) 1146, Conditions of Secure Detention
- (10) 1147, Supervision of Minors Held Inside a Locked Enclosure
- (11) 1148, Supervision of Minors in Secure Detention Outside a Locked Enclosure
- (12) 1149, Criteria for Non-secure Custody
- (13) 1150, Supervision of Minors in Non-secure Custody
- (14) 1151, Intoxicated and Substance Abusing Minors in a Lockup

Note: Authority cited: Section 6030, Penal Code. Reference: Section 6030, Penal Code.

#### **§ 1024. Court Holding and Temporary Holding Facility Training.**

Custodial personnel who ~~are responsible for supervising~~ supervise inmates in, and supervisors of, a Court Holding or Temporary Holding facility shall complete 8 hours of specialized training. Such training shall include, but not be limited to:

- (a) applicable minimum jail standards;
- (b) jail operations liability;
- (c) inmate segregation;

- (d) emergency procedures and planning, [fire and life safety](#); and,
- (e) suicide prevention.

Such training shall be completed as soon as practical, but in any event not more than six months after the date of assigned responsibility, or the effective date of this regulation. Successful completion of Core training or supplemental Core training, pursuant to Section 1020, Corrections Officer Core Course, may be substituted for the initial eight hours of training.

Eight hours of refresher training shall be completed once every two years. Successful completion of the requirements in Section 1025, Continuing Professional Training may be substituted for the eight hour refresher.

Each agency shall determine if additional training is needed based upon, but not limited to, the complexity of the facility, the number of inmates, the employees' level of experience and training, and other relevant factors.

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.

### **§ 1027. Number of Personnel.**

A sufficient number of personnel shall be employed in each local detention facility to ~~conduct at least hourly safety checks of inmates through direct visual observation of all inmates and to~~ ensure the implementation and operation of the programs and activities required by these regulations. ~~There shall be a written plan that includes the documentation of routine safety checks.~~

Whenever there is an inmate in custody, there shall be at least one employee on duty at all times in a local detention facility or in the building which houses a local detention facility who shall be immediately available and accessible to inmates in the event of an emergency. Such an employee shall not have any other duties which would conflict with the supervision and care of inmates in the event of an emergency. Whenever one or more female inmates are in custody, there shall be at least one female employee who shall ~~in like manner~~ be immediately available and accessible to such females.

Additionally, in Type IV programs the administrator shall ensure a sufficient number of personnel to provide case review, program support, and field supervision.

In order to determine if there is a sufficient number of personnel for a specific facility, the facility administrator shall prepare and retain a staffing plan indicating the personnel assigned in the facility and their duties. Such a staffing plan shall be reviewed by the ~~Corrections Standards Authority~~ [Board](#) staff at the time of their biennial inspection. The results of such a review and recommendations shall be reported to the local jurisdiction having fiscal responsibility for the facility.

Note: Authority cited: Section 6030, Penal Code. Reference: Sections 6030, 6031 and 6031.1, Penal Code.



## § 1027.5 Safety Checks.

Safety checks shall be conducted at least hourly through direct visual observation of all inmates. There shall be no more than a 60 minute lapse between safety checks. There shall be a written plan that includes the documentation of routine safety checks.

Note: Authority cited: Section 6030, Penal Code. Reference: Section 6030, Penal Code.

## **§ 1029. Policy and Procedures Manual.**

Facility administrator(s) shall develop and publish a manual of policy and procedures for the facility. The policy and procedures manual shall address all applicable Title 15 and Title 24 regulations and shall be comprehensively reviewed and updated at least every two years. Such a manual shall be made available to all employees.

- (a) The manual for Temporary Holding, Type I, II, and III facilities shall provide for, but not be limited to, the following:
- (1) Table of organization, including channels of communications.
  - (2) Inspections and operations reviews by the facility administrator/manager.
  - (3) Policy on the use of force.
  - (4) Policy on the use of restraint equipment, including the restraint of pregnant inmates as referenced in Penal Code Section ~~6030(f)~~3407.
  - (5) Procedure and criteria for screening newly received inmates for release per Penal Code sections 849(b)(2) and 853.6, and any other such processes as the facility administrator is empowered to use.
  - (6) Security and control including physical counts of inmates, searches of the facility and inmates, contraband control, and key control. Each facility administrator shall, at least annually, review, evaluate, and make a record of security measures. The review and evaluation shall include internal and external security measures of the facility.
  - (7) Emergency procedures include:
    - (A) fire suppression preplan as required by section 1032 of these regulations;
    - (B) escape, disturbances, and the taking of hostages;
    - (C) ~~mass arrests;~~ ~~civil disturbance;~~
    - (D) natural disasters;
    - (E) periodic testing of emergency equipment; and,
    - (F) storage, issue, and use of weapons, ammunition, chemical agents, and related security devices.
  - (8) Suicide Prevention.
  - (9) Segregation of Inmates.

The policies and procedures required in subsections (6) and (7) may be placed in a separate manual to ensure confidentiality.

- (b) The manual for court holding facilities shall include all of the procedures listed in subsection (a), except number (5).



- (c) The manual for Type IV facilities shall include, in addition to the procedures required in subsection (a), except number (5), procedures for:
- (1) accounting of inmate funds;
  - (2) community contacts;
  - (3) field supervision;
  - (4) temporary release; and
  - (5) obtaining health care.

Note: Authority cited: Section 6030, Penal Code. Reference: Section 6030, Penal Code.

**§ 1030. ~~Type IV Facility Policy and Procedures Manual.~~ Suicide Prevention Program.**

The facility shall have a comprehensive written suicide prevention program developed by the facility administrator, in conjunction with the health authority and mental health director, to identify, monitor, and provide treatment to those inmates who present a suicide risk. The program shall include the following:

- (a) Suicide prevention training for all staff that have direct contact with inmates.
- (b) Intake screening for suicide risk immediately upon intake and prior to housing assignment.
- (c) Provisions facilitating communication among arresting/transporting officers, facility staff, medical and mental health personnel in relation to suicide risk.
- (d) Housing recommendations for inmates at risk of suicide.
- (e) Supervision depending on level of suicide risk.
- (f) Suicide attempt and suicide intervention policies and procedures.
- (g) Provisions for reporting suicides and suicides attempts.
- (h) Multi-disciplinary administrative review of suicides and attempted suicides as defined by the facility administrator.

Note: Authority cited: Section 6030, Penal Code. Reference: Section 6030, Penal Code.

**§ 1046. Death in Custody.**

(a) Death in Custody Reviews for Adults and Minors.

The facility administrator, in cooperation with the health administrator, shall develop written policy and procedures to ~~assure~~ ensure that there is an initial review of every in-custody death within 30 days. The review team shall include the facility administrator and/or the facility manager, the health administrator, the responsible physician and other health care and supervision staff who are relevant to the incident.

Deaths shall be reviewed to determine the appropriateness of clinical care; whether changes to policies, procedures, or practices are warranted; and to identify issues that require further study.

(b) Death of a Minor

In any case in which a minor dies while detained in a jail, lockup, or court holding facility:

- (1) The administrator of the facility shall provide to the ~~Corrections Standards Authority~~ Board a copy of the report submitted to the Attorney General under Government Code Section 12525. A copy of the report shall be submitted within 10 calendar days after the death.
- (2) Upon receipt of a report of death of a minor from the administrator, the Board may within 30 calendar days inspect and evaluate the jail, lockup, or court holding facility pursuant to the provisions of this subchapter. Any inquiry made by the Board shall be limited to the standards and requirements set forth in these regulations.

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.

### **§ 1050. Classification Plan.**

(a) Each administrator of a temporary holding, Type I, II, or III facility shall develop and implement a written classification plan designed to properly assign inmates to housing units and activities according to the categories of sex, age, criminal sophistication, seriousness of crime charged, physical or mental health needs, assaultive/non-assaultive behavior and other criteria which will provide for the safety of the inmates and staff. Such housing unit assignment shall be accomplished to the extent possible within the limits of the available number of distinct housing units or cells in a facility. The written classification plan shall be based on objective criteria and include receiving screening performed at the time of intake by trained personnel, and a record of each inmate's classification level, housing restrictions, and housing assignments.

Each administrator of a Type II or III facility shall establish and implement a classification system which will include the use of classification officers or a classification committee in order to properly assign inmates to housing, work, rehabilitation programs, and leisure activities. Such a plan shall include the use of as much information as is available about the inmate and from the inmate and shall provide for a channel of appeal by the inmate to the facility administrator or designee. An inmate who has been sentenced to more than 60 days may request a review of his classification plan no more often than 30 days from his last review.

(b) Each administrator of a court holding facility shall establish and implement a written plan designed to provide for the safety of staff and inmates held at the facility. The plan shall include receiving and transmitting of information regarding inmates who represent unusual risk or hazard while confined at the facility, and the segregation of such inmates to the extent possible within the limits of the court holding facility.

Note: Authority cited: Section 6030, Penal Code. Reference: Section 6030, Penal Code.

### **§ 1051. Communicable Diseases.**

The facility administrator, in cooperation with the responsible physician, shall develop written policies and procedures specifying those symptoms that require segregation of

an inmate until a medical evaluation is completed. At the time of intake into the facility, an inquiry shall be made of the person being booked as to whether or not he/she has or has had any communicable diseases, such as tuberculosis or has observable symptoms of tuberculosis or any other communicable diseases, ~~including but not limited to, tuberculosis, other airborne diseases,~~ or other special medical problem identified by the health authority. The response shall be noted on the booking form and/or screening device.

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.

### **§ 1052. Mentally Disordered Inmates.**

The facility administrator, in cooperation with the responsible physician, shall develop written policies and procedures to identify and evaluate all mentally disordered inmates, and may include telehealth. If an evaluation from medical or mental health staff is not readily available, an inmate shall be considered mentally disordered for the purpose of this section if he or she appears to be a danger to himself/herself or others or if he/she appears gravely disabled. An evaluation from medical or mental health staff shall be secured within 24 hours of identification or at the next daily sick call, whichever is earliest. Segregation may be used if necessary to protect the safety of the inmate or others.

Note: Authority cited: Section 6030, Penal Code. Reference: Section 6030, Penal Code.

### **§ 1053. Administrative Segregation.**

Except in Type IV facilities, each facility administrator shall develop written policies and procedures which provide for the administrative segregation of inmates who are determined to be prone to: promote activity or behavior that is criminal in nature or disruptive to facility operations; demonstrate influence over other inmates, including influence to promote or direct action or behavior that is criminal in nature or disruptive to the safety and security of other inmates or facility staff, as well as to the safe operation of the facility; escape; assault , attempted assault, or participation in a conspiracy to assault or harm ~~staff or other inmates or facility staff;~~ ~~disrupt the operations of the jail;~~ or likely to need protection from other inmates, if such administrative segregation is determined to be necessary in order to obtain the objective of protecting the welfare of inmates and staff. Administrative segregation shall consist of separate and secure housing but shall not involve any other deprivation of privileges than is necessary to obtain the objective of protecting the inmates and staff.

Note: Authority cited: Section 6030, Penal Code. Reference: Section 6030, Penal Code.

### **§ 1054. Administrative Removal-Type IV Facility.**

In Type IV facilities, the facility administrator shall develop written policies and procedures which provide for the administrative removal of an inmate for the safety and well being of the inmate, the staff, the program, the facility, and/or the general public. Such removal shall be subject to review by the facility administrator [or designee](#) on the next business day.

Note: Authority cited: Section 6030, Penal Code. Reference: Section 6030, Penal Code.

### **§ 1055. Use of Safety Cell.**

The safety cell described in Title 24, Part 2, Section 1231.2.5, shall be used to hold only those inmates who display behavior which results in the destruction of property or reveals an intent to cause physical harm to self or others. The facility administrator, in cooperation with the responsible physician, shall develop written policies and procedures governing safety cell use and may delegate authority to place an inmate in a safety cell to a physician.

In no case shall the safety cell be used for punishment or as a substitute for treatment.

An inmate shall be placed in a safety cell only with the approval of the facility manager [or designee](#), ~~the facility watch commander~~, or ~~the designated physician~~ [responsible health care staff](#); continued retention shall be reviewed a minimum of every ~~eight~~[four](#) hours. A medical assessment shall be completed within a maximum of 12 hours of placement in the safety cell or at the next daily sick call, whichever is earliest. The inmate shall be medically cleared for continued retention every 24 hours thereafter. [The facility manager, designee or responsible health care staff shall obtain](#) ~~A mental~~ [a mental health opinion/consultation with responsible health care staff](#) on placement and retention, [which](#) shall be secured within ~~24~~[12](#) hours of placement. Direct visual observation shall be conducted at least twice every thirty minutes. Such observation shall be documented.

Procedures shall be established to assure administration of necessary nutrition and fluids. Inmates shall be allowed to retain sufficient clothing, or be provided with a suitably designed "safety garment," to provide for their personal privacy unless specific identifiable risks to the inmate's safety or to the security of the facility are documented.

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.

### **§ 1056. Use of Sobering Cell.**

The sobering cell described in Title 24, Part 2, Section 1231.2.4, shall be used for the holding of inmates who are a threat to their own safety or the safety of others due to their state of intoxication and pursuant to written policies and procedures developed by the facility administrator. Such inmates shall be removed from the sobering cell as they are able to continue in the processing. In no case shall an inmate remain in a sobering cell over six hours without an evaluation by a medical staff person or an evaluation by

custody staff, pursuant to written medical procedures in accordance with section 1213 of these regulations, to determine whether the prisoner has an urgent medical problem. [At 12 hours from the time of placement, all inmates will receive an evaluation by responsible health care staff.](#) Intermittent direct visual observation of inmates held in the sobering cell shall be conducted no less than every half hour. Such observation shall be documented.

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.

### **§ 1057. Developmentally Disabled Inmates.**

The facility administrator, in cooperation with the responsible physician, shall develop written policies and procedures for the identification and evaluation, [appropriate classification and housing, protection, and nondiscrimination](#) of all developmentally disabled inmates.

The health authority or designee shall contact the regional center on any inmate suspected or confirmed to be developmentally disabled for the purposes of diagnosis and/or treatment within 24 hours of such determination, excluding holidays and weekends.

Note: Authority cited: Section 6030, Penal Code. Reference: Section 6030, Penal Code.

## § 1058. Use of Restraint Devices.

The facility administrator, in cooperation with the responsible physician, shall develop written policies and procedures for the use of restraint devices and may delegate authority to place an inmate in restraints to a ~~physician~~ responsible health care staff. In addition to the areas specifically outlined in this regulation, at a minimum, the policy shall address the following areas: acceptable restraint devices; signs or symptoms which should result in immediate medical/mental health referral; availability of cardiopulmonary resuscitation equipment; protective housing of restrained persons; provision for hydration and sanitation needs; and exercising of extremities.

In no case shall restraints be used for punishment or as a substitute for treatment.

Restraint devices shall only be used on inmates who display behavior which results in the destruction of property or reveal an intent to cause physical harm to self or others. Restraint devices include any devices which immobilize an inmate's extremities and/or prevent the inmate from being ambulatory. Physical restraints should be utilized only when it appears less restrictive alternatives would be ineffective in controlling the disordered behavior.

Inmates shall be placed in restraints only with the approval of the facility manager, the facility watch commander, ~~or the designated physician~~ responsible health care staff; continued retention shall be reviewed a minimum of every ~~two hours~~. A medical opinion on placement and retention shall be secured ~~as soon as possible within one hour, but no later than four hours~~ from the time of placement. A medical assessment shall be completed within four hours of placement. ~~The inmate shall be medically cleared for continued retention at least every six hours thereafter. A mental health consultation shall be secured as soon as possible, but in no case longer than eight hours from the time of placement, to assess the need for mental health treatment.~~ If the facility manager, or designee, in consultation with responsible health care staff determines that an inmate cannot be safely removed from restraints after eight hours, the inmate shall be taken to a medical facility for further evaluation.

Direct visual observation shall be conducted at least twice every thirty minutes to ensure that the restraints are properly employed, and to ensure the safety and well-being of the inmate. Such observation shall be documented. While in restraint devices all inmates shall be housed alone or in a specified housing area for restrained inmates which makes provisions to protect the inmate from abuse. ~~In no case shall restraints be used for discipline, or as a substitute for treatment.~~

The provisions of this section do not apply to the use of handcuffs, shackles or other restraint devices when used to restrain inmates for security reasons.

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.

## § 1058.5. Restraints and Pregnant Inmates.

The facility administrator, in cooperation with the responsible physician, shall develop written policies and procedures for the use of restraint devices on pregnant inmates. In accordance with Penal Code 3407 the policy shall include reference to the following:

- 1) An inmate known to be pregnant or in recovery after delivery shall not be restrained by the use of leg irons, waist chains, or handcuffs behind the body.
- 2) A pregnant inmate in labor, during delivery, or in recovery after delivery, shall not be restrained by the wrists, ankles, or both, unless deemed necessary for the safety and security of the inmate, the staff, or the public.
- 3) 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.
- 4) Upon confirmation of an inmate's pregnancy, she shall be advised, orally or in writing, of the standards and policies governing pregnant inmates.

NOTE: Authority cited: Section 6030, Penal Code. Reference: Sections 3407 and 6030, Penal Code

### **§ 1061. Inmate Education Plan.**

The facility administrator of any Type II or III facility shall plan and shall request of appropriate public officials an inmate education program. When such services are not made available by the appropriate public officials, then the facility administrator shall develop and implement an education program with available resources. Such a plan shall provide for the voluntary academic and/or vocational education of ~~both sentenced and non-sentenced~~ housed inmates. Reasonable criteria for program eligibility shall be established and an inmate may be excluded or removed ~~from any class~~ based on sound security practices or failure to abide by facility rules and regulations.

Note: Authority cited: Section 6030, Penal Code. Reference: Section 6030, Penal Code.

### **§ 1063. Correspondence.**

The facility administrator shall develop written policies and procedures for inmate correspondence which provide that:

- (a) there is no limitation on the volume of mail that an inmate may send or receive;
- (b) inmate correspondence may be read when there is a valid security reason and the facility manager or his/her designee approves;
- (c) jail staff shall not review inmate correspondence to or from state and federal courts, any member of the State Bar or holder of public office, and the State Board of State and Community Corrections; however, jail authorities may open and inspect such mail only to search for contraband, cash, checks, or money orders and in the presence of the inmate;
- (d) inmates may correspond, confidentially, with the facility manager or the facility administrator; and,



(e) those inmates who are without funds shall be permitted at least two postage paid envelopes and two sheets of paper~~letters~~ each week to permit correspondence with family members and friends but without limitation on the number of postage paid envelopes and sheets of paper~~letters~~ to his or her attorney and to the courts.

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.

### § 1070. Individual/Family Service Programs.

The facility administrator of a Type II, III, or IV facility shall develop written policies and procedures which facilitate cooperation with appropriate public or private agencies for individual and/or family social service programs for inmates. Such a program shall utilize the services and resources available in the community and may be in the form of a resource guide and/or actual service delivery. The range and source of such services shall be at the discretion of the facility administrator and may include:

- (a) ~~individual, group and/or family counseling~~risk and needs assessments;
- (b) ~~drug and alcohol abuse counseling;~~best practices in:
  - (1) ~~community volunteers~~individual, group and/or family counseling;
  - (2) drug and alcohol abuse counseling;
  - (3) cognitive behavioral interventions;
  - (4) vocational testing and counseling;
  - (5) employment counseling;
- (c) ~~vocational testing and counseling~~referral to community resources and programs;
- (d) ~~employment counseling~~reentry planning and service development;
- (~~d~~)(e) legal assistance;
- (~~e~~)(f) referral to community resources and programsregional center services for the developmentally disabled; and;
- (~~f~~)(g) prerelease and release assistance;community volunteers.
- (~~g~~) legal assistance; and,
- (~~h~~) regional center services for the developmentally disabled.

Note: Authority cited: Section 6030, Penal Code. Reference: Section 6030, Penal Code.

### § 1081. Plan for Inmate Discipline.

Each facility administrator shall develop written policies and procedures for inmate discipline. The plan shall include, but not be limited to, the following elements:

- (a) Temporary Loss of Privileges: For minor acts of non-conformance or minor violations of facility rules, staff may impose a temporary loss of privileges, such as access to television, telephones, commissary, or lockdown for less than 24 hours, provided there is written documentation and supervisory approval.



(b) Punitive Actions: Major violations of facility rules or repetitive minor acts of non-conformance or repetitive minor violations of facility rules shall be reported in writing by the staff member observing the act and submitted to the disciplinary officer. The consequences of such violations may include, but are not limited to:

1. Loss of good time/work time.
2. Placement in disciplinary separation.
3. Disciplinary separation diet.
4. Loss of privileges mandated by regulations.

A staff member with investigative and punitive authority shall be designated as a disciplinary officer to impose such consequences. Staff shall not participate in disciplinary review if they are involved in the charges.

Such charges pending against an inmate shall be acted on with the following provisions and within specified timeframes:

1. A copy of the report, and/or a separate written notice of the violation(s), shall be provided to the inmate.
2. Unless declined by the inmate, a hearing shall be provided no sooner than 24 hours after the report has been submitted to the disciplinary officer and the inmate has been informed of the charges in writing. The hearing may be postponed or continued for a reasonable time through a written waiver by the inmate, or for good cause.
3. The inmate shall be permitted to appear on his/her own behalf at the time of hearing and present witnesses and documentary evidence. The inmate shall have access to staff or inmate assistance when the inmate is illiterate or the issues are complex.
4. A charge(s) shall be acted on no later than 72 hours after an inmate has been informed of the charge(s) in writing.
5. Subsequent to final disposition of disciplinary charges by the disciplinary officer, the charges and the action taken shall be reviewed by the facility manager or designee.
6. The inmate shall be advised in a written statement by the fact-finders about the evidence relied on and the reasons for the disciplinary action. A copy of the record shall be kept pursuant to Penal Code Section 4019.5.
7. There shall be a policy of review and appeal to a supervisor on all disciplinary action.

(c) Nothing in this section precludes a facility administrator from administratively segregating any inmate from the general population or program for reasons of personal, mental, or physical health, or under any circumstance in which the safety of the inmates, staff, program, or community is endangered, pending disciplinary action or a review as required by Section 1053 of these regulations.

(d) Nothing in this section precludes the imposition of conditions or restrictions that reasonably relate to a legitimate, non-punitive administrative purpose.

~~Each facility administrator shall develop written policies and procedures for inmate discipline which shall include, but not be limited to, the following elements:~~

- ~~(a) Designation of one or more subordinates who will act on all formal charges of violation of facility rules by inmates, and who shall have investigative and punitive powers. Staff so designated shall not participate in disciplinary review if they are involved in the charges.~~
- ~~(b) Minor acts of non-conformance or minor violations of institution rules may be handled informally by any staff member by counseling or advising the inmate of expected conduct, assignment to an extra work detail, or removal from a work assignment without loss of work time credit. In addition, temporary loss of privileges such as, but not limited to, access to television, telephones, or commissary, or lockdown for less than 24 hours, may be considered minor discipline if such acts are accompanied by written documentation, and a policy of review and appeal to a supervisor.~~
- ~~(c) Major violations or repetitive minor acts of non-conformance or repetitive minor violations of institutional rules shall be reported in writing by the staff member observing the act and submitted to the disciplinary officer. The inmate shall be informed of the charge(s) in writing. The consequences of a major violation may include, but are not limited to, loss of good time/work time, placement in disciplinary isolation, disciplinary isolation diet, or loss of privileges mandated by regulations. In addition:
  - ~~(1) Charges pending against an inmate shall be acted on no sooner than 24 hours after the report has been submitted to the disciplinary officer and the inmate has been informed of the charges in writing. A violation(s) shall be acted on no later than 72 hours after an inmate has been informed of the charge(s) in writing. The inmate may waive the 24-hour limitation. The hearing may be postponed or continued for a reasonable time through a written waiver by the inmate or for good cause.~~
  - ~~(2) The inmate shall be permitted to appear on his/her own behalf at the time of hearing.~~
  - ~~(3) Subsequent to final disposition of disciplinary charges by the disciplinary officer, the charges and the action taken shall be reviewed by the facility manager or designee.~~
  - ~~(4) The inmate shall be advised of the action taken by the disciplinary officer by a copy of the record required to be kept by Penal Code Section 4019.5.~~~~
- ~~(d) Nothing in this section precludes a facility administrator from administratively segregating any inmate from the general population or program for reasons of personal, mental, or physical health, or under any circumstance in which the safety~~

~~of the inmates, staff, program, or community is endangered, pending disciplinary action or a review as required by Section 1054 of these regulations.~~

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Sections [4019.5](#) and 6030, Penal Code.

### **§ 1082. Forms of Discipline.**

The degree of punitive actions taken by the disciplinary officer shall be directly related to the severity of the rule infraction. Acceptable forms of discipline shall consist of, but not be limited to, the following:

- (a) Loss of privileges.
- (b) Extra work detail.
- (c) Short term lockdown for less than 24 hours.
- (d) Removal from work details.
- (e) Forfeiture of “good time” credits earned under Penal Code Section 4019.
- (f) Forfeiture of “work time” credits earned under Penal Code Section 4019.
- (g) Disciplinary ~~isolation~~[separation](#).
- (h) Disciplinary ~~isolation~~[separation](#) diet.

Note: Authority cited: Section 6030, Penal Code. Reference: Section 6030, Penal Code.

### **§ 1083. Limitations on Disciplinary Actions.**

The Penal Code and the State Constitution expressly prohibit all cruel and unusual punishment. Additionally, there shall be the following limitations:

- (a) If an inmate is on disciplinary ~~isolation~~[separation](#) status for 30 consecutive days there shall be a review by the facility manager before the disciplinary ~~isolation~~[separation](#) status is continued. This review shall include a consultation with health care staff. Such reviews shall continue at least every fifteen days thereafter until the disciplinary status has ended. This review shall be documented.
- (b) The disciplinary ~~isolation~~[separation](#) cells or cell shall have the minimum furnishings and space specified in Title 24, Part 2, 1231.2.6 and 2.7. Occupants shall be issued clothing and bedding as specified in Articles 13 and 14 of these regulations and shall not be deprived of them through any portion of the day except that those inmates who engage in the destruction of bedding or clothing may be deprived of such articles. The decision to deprive inmates of such articles of clothing and bedding shall be reviewed by the facility manager or designee during each 24 hour period.
- (c) Penal Code Section 4019.5 expressly prohibits the delegation of authority to any inmate or group of inmates to exercise the right of punishment over any other inmate or group of inmates.
- (d) In no case shall a safety cell, as specified in Title 24, Part 2, 1231.2.5, or any restraint device be used for disciplinary purposes.
- (e) No inmate may be deprived of the implements necessary to maintain an acceptable level of personal hygiene as specified in Section 1265 of these regulations.

- (f) Food shall not be withheld as a disciplinary measure.
- (g) The disciplinary ~~isolation~~-separation diet described in section 1247 of these regulations shall only be utilized for major violations of institutional rules.
  - (1) In addition to the provisions of Section 1247, the facility manager shall approve the initial placement on the disciplinary ~~isolation~~-separation diet and ensure that medical staff is notified.
  - (2) In consultation with medical care staff, the facility manager shall approve any continuation on that diet every 72 hours after the initial placement.
- (h) Correspondence privileges shall not be withheld except in cases where the inmate has violated correspondence regulations, in which case correspondence may be suspended for no longer than 72 hours, without the review and approval of the facility manager.
- (i) In no case shall access to courts and legal counsel be suspended as a disciplinary measure.

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.

### **§ 1122.5. Pregnant Minors**

- (a) The health administrator, in cooperation with the facility administrator, shall develop written policies and procedures pertaining to pregnant minors that address the requirements in Title 15, Section 1417.
- (b) The facility administrator, in cooperation with the responsible physician, shall develop written policies and procedures for the use of restraint devices on pregnant minors. The policy shall address requirements of Penal Code 3407. Policy shall include reference to the following:
  - 1) A minor known to be pregnant or in recovery after delivery shall not be restrained by the use of leg irons, waist chains, or handcuffs behind the body.
  - 2) A pregnant minor in labor, during delivery, or in recovery after delivery, shall not be restrained by the wrists, ankles, or both, unless deemed necessary for the safety and security of the minor, the staff, or the public.
  - 3) Restraints shall be removed when a professional who is currently responsible for the medical care of a pregnant minor during a medical emergency, labor, delivery, or recovery after delivery determines that the removal of restraints is medically necessary.
  - 4) Upon confirmation of a minor's pregnancy, she shall be advised, orally or in writing, of the standards and policies governing pregnant minors.

NOTE: Authority cited: Section 6030, Penal Code. Reference: Sections 3407 and 6030, Penal Code

### **§ 1125. Psychotropic Medications for Minors in Jail.**

The health administrator/responsible physician, in cooperation with the mental health director and the facility administrator, shall develop written policies and procedures governing the use of voluntary and involuntary psychotropic medications for minors.

- (a) These policies and procedures shall include, but not be limited to:
- (1) protocols for physicians' written and verbal orders for psychotropic medications in dosages appropriate to the minor's need;
  - (2) limitation to the length of time required for a physician's signature on verbal orders;
  - (3) the length of time voluntary and involuntary medications may be ordered and administered before re-evaluation by a physician;
  - (4) provision that minors who are on psychotropic medications prescribed in the community are continued on their medications pending re-evaluation and further determination by a physician;
  - (5) provision that the necessity for continuation on psychotropic medications is addressed in pre-release planning and prior to transfer to another facility or program; and,
  - (6) provision for regular clinical/administrative review of utilization patterns for all psychotropic medications, including every emergency situation.
- (b) Psychotropic medications shall not be administered to a minor absent an emergency unless informed consent has been given by the parent/guardian or the court.
- (1) Minors shall be informed of the expected benefits, potential side effects and alternatives to psychotropic medications.
  - (2) Absent an emergency, minors may refuse treatment.
- (c) Minors found by a physician to be a danger to themselves or others by reason of a mental disorder may be involuntarily given psychotropic medication immediately necessary for the preservation of life or the prevention of serious bodily harm, and when there is insufficient time to obtain consent from the parent, guardian, or court before the threatened harm would occur. It is not necessary for harm to take place ~~or become unavoidable~~ prior to initiating treatment.
- (d) Administration of psychotropic medication is not allowed for disciplinary reasons.

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.

#### **§ 1204. Health Care Staff Procedure.**

~~Medical~~ Health care performed by personnel other than a physician shall be performed pursuant to written protocol or order of the responsible ~~physician~~ health care staff.

Note: Authority cited: Section 6030, Penal Code. Reference: Section 6030, Penal Code.

#### **§ 1205. ~~Medical/Mental~~ Health Care Records.**

- (a) The health authority shall maintain individual, complete and dated health records in compliance with state statute to include, but not be limited to:
- (1) receiving screening form/history;

- (2) ~~medical/mental~~ health evaluation reports;
- (3) complaints of illness or injury;
- (4) names of personnel who treat, prescribe, and/or administer/deliver prescription medication;
- (5) location where treated; and,
- (6) medication records in conformance with section 1216.

(b) The physician/patient confidentiality privilege applies to the ~~medical/mental~~ health care record. Access to the ~~medical/mental~~ health record shall be controlled by the health authority or designee.

The health authority shall ensure the confidentiality of each inmate's ~~medical/mental~~ health care record file (paper or electronic) and such files shall be maintained separately from and in no way be part of the inmate's other jail records. Within the provisions of HIPAA 45 C.F.R., Section 164.512(k)(5)(i), ~~t~~The responsible physician or designee shall communicate information obtained in the course of ~~medical/mental~~ health screening and care to jail authorities when necessary for the protection of the welfare of the inmate or others, management of the jail, or maintenance of jail security and order.

(c) Written authorization by the inmate is necessary for transfer of ~~medical/mental~~ health care record information unless otherwise provided by law or administrative regulations having the force and effect of law.

(d) Inmates shall not be used for ~~medical/mental~~ health care recordkeeping.

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.



## § 1206. Health Care Procedures Manual.

The health authority shall, in cooperation with the facility administrator, set forth in writing, policies and procedures in conformance with applicable state and federal law, which are reviewed and updated at least every two years and include but are not limited to:

- (a) summoning and application of proper medical aid;
- (b) contact and consultation with ~~private~~ [other treating health care professionals](#) ~~physicians~~;
- (c) emergency and non-emergency medical and dental services, including transportation;
- (d) provision for medically required dental and medical prostheses and eyeglasses;
- (e) notification of next of kin or legal guardian in case of serious illness which may result in death;
- (f) provision for screening and care of pregnant and lactating women, including prenatal and postpartum information and health care, including but not limited to access to necessary vitamins as recommended by a doctor, information pertaining to childbirth education and infant care, ~~and other services mandated by statute~~;
- (g) screening, referral and care of mentally disordered and developmentally disabled inmates;
- (h) implementation of special medical programs;
- (i) management of inmates suspected of or confirmed to have communicable diseases;
- (j) the procurement, storage, repackaging, labeling, dispensing, administration/delivery to inmates, and disposal of pharmaceuticals;
- (k) use of non-physician personnel in providing medical care;
- (l) provision of medical diets;
- (m) patient confidentiality and its exceptions;
- (n) the transfer of pertinent individualized health care information, or individual documentation that no health care information is available, to the health authority of another correctional system, medical facility, or mental health facility at the time each inmate is transferred and prior notification pursuant to Health and Safety Code Sections 121361 and 121362 for inmates with known or suspected active tuberculosis disease. Procedures for notification to the transferring health care staff shall allow sufficient time to prepare the summary. The summary information shall identify the sending facility and be in a consistent format that includes the need for follow-up care, diagnostic tests performed, medications prescribed, pending appointments, significant health problems, and other information that is necessary to provide for continuity of health care. Necessary inmate medication and health care information shall be provided to the transporting staff, together with precautions necessary to protect staff and inmate passengers from disease transmission during transport.
- (o) forensic medical services, including drawing of blood alcohol samples, body cavity searches, and other functions for the purpose of prosecution shall not be performed by medical personnel responsible for providing ongoing care to the inmates.
- (p) [provisions for application and removal of restraints on pregnant inmates consistent with Penal Code Section 3407.](#)
- (q) [other Services mandated by statute.](#)

### **§ 1206.5. Management of Communicable Diseases in a Custody Setting.**

(a) The responsible physician, in conjunction with the facility administrator and the county health officer, shall develop a written plan to address the identification, treatment, control and follow-up management of tuberculosis and other communicable diseases ~~including, but not limited to, tuberculosis and other airborne diseases~~. The plan shall cover the intake screening procedures, identification of relevant symptoms, referral for a medical evaluation, treatment responsibilities during incarceration and coordination with public health officials for follow-up treatment in the community. The plan shall reflect the current local incidence of communicable diseases which threaten the health of inmates and staff.

(b) Consistent with the above plan, the health authority shall, in cooperation with the facility administrator and the county health officer, set forth in writing, policies and procedures in conformance with applicable state and federal law, which include, but are not limited to:

- (1) the types of communicable diseases to be reported;
- (2) the persons who shall receive the medical reports;
- (3) sharing of medical information with inmates and custody staff;
- (4) medical procedures required to identify the presence of disease(s) and lessen the risk of exposure to others;
- (5) medical confidentiality requirements;
- (6) housing considerations based upon behavior, medical needs, and safety of the affected inmates;
- (7) provisions for inmate consent that address the limits of confidentiality; and,
- (8) reporting and appropriate action upon the possible exposure of custody staff to a communicable disease.

### **§ 1207. Medical Receiving Screening.**

With the exception of inmates transferred directly within a custody system with documented receiving screening, a screening shall be completed on all inmates at the time of intake. This screening shall be completed in accordance with written procedures and shall include but not be limited to medical and mental health problems, developmental disabilities, and tuberculosis and other communicable diseases ~~including, but not limited to, tuberculosis and other airborne diseases~~. The screening shall be performed by licensed health personnel or trained facility staff, with documentation of staff training regarding site specific forms with appropriate disposition based on responses to questions and observations made at the time of screening. The training depends on the role staff are expected to play in the receiving screening process.



The facility administrator and responsible physician shall develop a written plan for complying with Penal Code Section 2656 (orthopedic or prosthetic appliance used by inmates).

There shall be a written plan to provide care for any inmate who appears at this screening to be in need of or who requests medical, mental health, or developmental disability treatment.

Written procedures and screening protocol shall be established by the responsible physician in cooperation with the facility administrator.

Note: Authority cited: Section 6030, Penal Code. Reference: Sections 2656 and 6030, Penal Code.

### **§ 1208.5. Health Care Maintenance.**

For inmates undergoing prolonged incarceration, an age appropriate and risk factor based health maintenance visit shall take place within the inmate's second anniversary of incarceration. The specific components of the health maintenance examinations shall be determined by the responsible physician based on the age, gender, and health of the inmate. Thereafter, the health maintenance examinations shall be repeated at reasonable intervals as determined by the responsible physician.

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.

### **§ 1209. Mental Health Services and Transfer to Treatment Facility.**

(a) The health authority, in cooperation with the mental health director and facility administrator, shall establish policies and procedures to provide mental health services. These services shall include but not be limited to:

1. Identification and referral of inmates with~~screening for~~ mental health ~~problems~~needs;
2. Mental health treatment programs provided by qualified staff, including the use of telehealth;
- ~~2.3. crisis~~ Crisis intervention ~~services and management of acute psychiatric episodes~~;
4. Basic mental health services provided to inmates as clinically indicated;
- ~~3. stabilization and treatment of mental disorders; and,~~
5. mMedication support services;
- ~~4.6.~~ The provision of health services sufficiently coordinated such that care is appropriately integrated, medical and mental health needs are met, and the impact of any of these conditions on each other is adequately addressed.

(b) Unless the county has elected to implement the provisions of Penal Code Section 1369.1, a mentally disordered inmate who appears to be a danger to himself or others, or to be gravely disabled, shall be transferred for further evaluation to a designated Lanterman Petris Short treatment facility designated by the county and approved by the State Department of Mental Health for diagnosis and treatment of such apparent mental

disorder pursuant to Penal Code section 4011.6 or 4011.8 unless the jail contains a designated [Lanterman Petris Short](#) treatment facility. Prior to the transfer, the inmate may be evaluated by licensed health personnel to determine if treatment can be initiated at the correctional facility. Licensed health personnel may perform an onsite assessment to determine if the inmate meets the criteria for admission to an inpatient facility, or if treatment can be initiated in the correctional facility.

(c) If the county elects to implement the provisions of Penal Code Section 1369.1, the health authority, in cooperation with the facility administrator, shall establish policies and procedures for involuntary administration of medications. The procedures shall include, but not be limited to:

1. Designation of licensed personnel, including psychiatrist and nursing staff, authorized to order and administer involuntary medication;
2. Designation of an appropriate setting where the involuntary administration of medication will occur;
3. Designation of restraint procedures and/or devices that may be used to maintain the safety of the inmate and facility staff;
4. Development of a written plan to monitor the inmate's medical condition following the initial involuntary administration of a medication, until the inmate is cleared as a result of an evaluation by, or consultation with, a psychiatrist;
5. Development of a written plan to provide a minimum level of ongoing monitoring of the inmate following return to facility housing. This monitoring may be performed by custody staff trained to recognize signs of possible medical problems and alert medical staff when indicated; and
6. Documentation of the administration of involuntary medication in the inmate's medical record.

Note: Authority cited: Section 6030, Penal Code. Reference: Section 6030, Penal Code.

### **§ 1210. Individualized Treatment Plans.**

(a) For each inmate treated by a mental health service in a jail, the ~~treatment staff~~[responsible health care](#) shall develop a written treatment plan. The custody staff shall be informed of the treatment plan when necessary, to ensure coordination and cooperation in the ongoing care of the inmate. This treatment plan shall include referral to treatment after release from the facility when recommended by treatment staff.

(b) For each inmate treated for [health conditions for which additional treatment, special accommodations and/or a schedule of follow-up care is/are needed during the period of incarceration](#)~~a major medical problem in a jail, the treatment~~[responsible health care](#) staff shall develop a written treatment plan. The custody staff shall be informed of the treatment plan when necessary, to ensure coordination and cooperation in the ongoing care of the inmate. This treatment plan shall include referral to treatment after release from the facility when recommended by treatment staff.

Note: Authority cited: Section 6030, Penal Code. Reference: Section 6030, Penal Code.

### **§ 1217. Psychotropic Medications.**

The responsible physician, in cooperation with the facility administrator, shall develop written policies and procedures governing the use of psychotropic medications. An inmate found by a physician to be a danger to him/herself or others by reason of mental disorders may be involuntarily given psychotropic medication appropriate to the illness on an emergency basis. Psychotropic medication is any medication prescribed for the treatment of symptoms of psychoses and other mental and emotional disorders. An emergency is a situation in which action to impose treatment over the inmate's objection is immediately necessary for the preservation of life or the prevention of serious bodily harm to the inmate or others, and it is impracticable to first gain consent. It is not necessary for harm to take place ~~or become unavoidable~~ prior to treatment.

If psychotropic medication is administered during an emergency, such medication shall be only that which is required to treat the emergency condition. The medication shall be prescribed by a physician following a clinical evaluation. The responsible physician shall develop a protocol for the supervision and monitoring of inmates involuntarily receiving psychotropic medication.

Psychotropic medication shall not be administered to an inmate absent an emergency unless the inmate has given his or her informed consent in accordance with Welfare and Institutions Code Section 5326.2, or has been found to lack the capacity to give informed consent consistent with the county's hearing procedures under the Lanterman-Petris-Short Act for handling capacity determinations and subsequent reviews.

There shall be a policy which limits the length of time both voluntary and involuntary psychotropic medications may be administered and a plan of monitoring and re-evaluating all inmates receiving psychotropic medications, including a review of all emergency situations.

The administration of psychotropic medication is not allowed for disciplinary reasons.

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.

#### **~~§ 1219. Suicide Prevention Program.~~**

~~The facility administrator and the health authority shall develop a written plan for a suicide prevention program designed to identify, monitor, and provide treatment to those inmates who present a suicide risk.~~

~~Note: Authority cited: Section 6030, Penal Code. Reference: Section 6030, Penal Code.~~

#### **§ 1241. Minimum Diet.**

The minimum diet provided shall be based upon the nutritional and caloric requirements found in the 2011 Dietary Reference Intakes (DRI) of the Food and Nutrition Board, Institute of Medicine of the National Academies, the 2008 California ~~Daily~~ Food Guide, and the 2015-2020 ~~10~~ Dietary Guidelines for Americans. Facilities ~~electing to provide~~ [inge](#)

religious, vegetarian or medical diets, ~~and facilities that provide religious diets,~~ shall also conform to these nutrition standards. The nutritional requirements for the minimum diet are specified in the following subsections. A daily or weekly average of the food group's requirement is acceptable. A wide variety of food should be served.

(a) Protein Group. Includes beef, veal, lamb, pork, poultry, fish, eggs, cooked dry beans, peas, lentils, nuts, peanut butter and textured vegetable protein (TVP). One serving equals 14 grams or more of protein; the daily requirements shall be equal to three servings (a total of 42 grams per day or 294 grams per week). In addition, there shall be a requirement to serve a fourth serving from the legumes three days a week.

(b) Dairy Group. Includes milk (fluid, evaporated or dry; nonfat, 1% or 2% reduced fat, etc.); cheese (cottage, cheddar, etc.); yogurt; ice cream or ice milk; and pudding. A serving is equivalent to 8 oz. of fluid milk and provides at least 250 mg. of calcium. All milk shall be pasteurized and fortified with Vitamins A and D. The daily requirement is three servings. One serving can be from a fortified food containing at least 150 mg. of calcium. For persons 15-17 years of age, or pregnant and lactating women, the requirement is four servings of milk or milk products.

(c) Vegetable-Fruit Group. Includes fresh, frozen, dried and canned vegetables and fruits. One serving equals: 1/2 cup vegetable or fruit; 6 ounces of 100% juice; 1 medium apple, orange, banana, or potato; 1/2 grapefruit; or 1/4 cup dried fruit. The daily requirement of fruits and vegetables shall be five servings. At least one serving shall be from each of the following three categories:

(1) One serving of a fresh fruit or vegetable per day, or seven (7) servings per week.

(2) One serving of a Vitamin C source containing 30 mg. or more per day or seven (7) servings per week.

(3) One serving of a Vitamin A source, fruit or vegetable, containing 200 micrograms Retinol Equivalents (RE) or more per day, or seven servings per week.

(d) Grain Group. Includes bread, rolls, pancakes, sweet rolls, ready-to-eat cereals, cooked cereals, corn bread, pasta, rice, tortillas, etc. and any food item containing whole or enriched grains. At least three servings from this group must be made with ~~some~~ whole grains. The daily requirements shall be a minimum of six servings.

Providing only the minimum servings outlined in this regulation is not sufficient to meet the inmates' caloric requirements. Additional servings from the dairy, vegetable-fruit, and bread-cereal groups must be provided in amounts to meet caloric requirements. ~~In keeping with chronic disease prevention goals, total~~ Saturated dietary fat should not exceed ~~30-10~~ percent of total calories on a weekly basis. Fat shall be added only in minimum amounts necessary to make the diet palatable. Facility diets shall consider the recommendations and intentions of the 2015-2020 Dietary Guidelines of Americans of reducing overall sugar and sodium levels.

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.

## **§ 1243. Food Service Plan.**

Facilities shall have a written food service plan that shall comply with the applicable California Retail Food Code. In facilities with an average daily population of 100 or more, there shall be employed or available, a trained experienced food services manager to prepare and implement a food service plan. In facilities of less than an average daily population of 100 that do not employ or have a food services manager available, the facility administrator shall prepare a food service plan. The plan shall include, but not limited to, the following policies and procedures:

- (a) menu planning;
- (b) purchasing;
- (c) storage and inventory control;
- (d) food preparation;
- (e) food serving;
- (f) transporting food;
- (g) orientation and ongoing training;
- (h) personnel supervision;
- (i) budgets and food cost accounting;
- (j) documentation and record keeping;
- (k) emergency feeding plan;
- (l) waste management; ~~and~~
- (m) maintenance and repair; ~~and~~
- (n) three-day mainline sample tray.

Note: Authority cited: Section 6030, Penal Code. Reference: Section 6030, Penal Code.

#### **§ 1247. Disciplinary ~~Isolation~~-Separation Diet.**

(a) A disciplinary ~~isolation~~-separation diet which is nutritionally balanced may be served to an inmate. No inmate receiving a prescribed medical diet is to be placed on a disciplinary ~~isolation~~-separation diet without review by the responsible physician or pursuant to a written plan approved by the physician. Such a diet shall be served twice in each 24 hour period and shall consist of one-half of the loaf (or a minimum of 19 oz. cooked loaf) described below or other equally nutritious diet, along with two slices of whole wheat bread and at least one quart of drinking water if the cell does not have a water supply. The use of disciplinary ~~isolation~~-separation diet shall constitute an exception to the three-meal-a-day standard. Should a facility administrator wish to provide an alternate disciplinary diet, such a diet shall be submitted to the ~~Corrections Standards Authority~~Board for approval.

(b) The disciplinary diet loaf shall consist of the following:

- 2-1/2 oz. nonfat dry milk
- 4-1/2 oz. raw grated potato
- 3 oz. raw carrots, chopped or grated fine
- 1-1/2 oz. tomato juice or puree
- 4-1/2 oz. raw cabbage, chopped fine
- 7 oz. lean ground beef, turkey or rehydrated, canned, or frozen Textured Vegetable Protein (TVP)
- 2-1/2 fl. oz. oil

1-1/2 oz. whole wheat flour  
1/4 tsp. salt  
4 tsp. raw onion, chopped  
1 egg  
6 oz. dry red beans, pre-cooked before baking (or 16 oz. canned or cooked red kidney beans)  
4 tsp. chili powder

Shape into a loaf and bake at 350-375 degrees for 50-70 minutes.

Note: Authority cited: Section 6030, Penal Code. Reference: Section 6030, Penal Code.

### **§ 1270. Standard Bedding and Linen Issue.**

The standard issue of clean suitable bedding and linens, for each inmate entering a living area who is expected to remain overnight, shall include, but not be limited to:

- (a) one serviceable mattress which meets the requirements of Section 1272 of these regulations;
- (b) one mattress cover or one sheet;
- (c) one towel; and,
- (d) one blanket or more depending upon climatic conditions.

[Two blankets or sleep bag may be issued in place of one mattress cover or one sheet.](#)

Temporary Holding facilities which hold persons longer than 12 hours shall meet the requirements of (a), (b) and (d) above.

Note: Authority cited: Section 6030, Penal Code. Reference: Section 6030, Penal Code.

### **§ 1271. Bedding and Linen Exchange.**

There shall be written policies and procedures developed by the facility administrator for the scheduled exchange of laundered and/or sanitized bedding and linen issued to each inmate housed. Washable items such as sheets, mattress covers, and towels shall be exchanged for clean replacement at least once each week. If a top sheet is not issued, blankets or sleep bags shall be laundered or dry cleaned at least once a month or more often if necessary. If a top sheet is issued, blankets shall be laundered or dry cleaned at least every three months.

Note: Authority cited: Section 6030, Penal Code. Reference: Section 6030, Penal Code.