

CORE JAIL STANDARDS

I. SAFETY

GOAL: *Provide a safe environment for the community, staff, volunteers, contractors and inmates.*

PERFORMANCE STANDARD: Protection from Injury and Illness

1A. The community, staff, volunteers, contractors and inmates are protected from injury and illness in the workplace.

EXPECTED PRACTICES

Sanitation Inspections

1-CORE-1A-01 (Mandatory) (Ref. 4-ALDF-1A-01)

The facility complies with all applicable laws and regulations of the governing jurisdiction. The following inspections are implemented:

- weekly sanitation inspections of all facility areas by a qualified departmental staff member
- comprehensive and thorough monthly inspections by a safety/sanitation specialist
- at least annual inspections by qualified persons

Comment: None.

Protocols: Written policy and procedure. Sanitation and safety inspection checklists. Laws and regulations.

Process Indicators: Completed inspection checklists and reports. Documentation of corrective action. Inspection reports.

Disposal of Material

1-CORE-1A-02 (Mandatory) (Ref. 4-ALDF-1A-02)

Disposal of liquid, solid, and hazardous material complies with applicable government regulations.

Comment: None.

Protocols: Written policy and procedure. Written plan. Internal health/sanitation inspection checklists that include solid waste issues.

Process Indicators: Plan that has been approved by regulatory agency. Trash disposal contract. Completed inspection reports/forms, including documentation than identified deficiencies were corrected. Observation.

Vermin and Pests

1-CORE-1A-03 (Mandatory) (Ref. 4-ALDF-1A-03)
Vermin and pests are controlled.

Comment: None.

Protocols: Written policy and procedure. Control plan.

Process Indicators: Pest control contracts. Maintenance agreements. Trash disposal contracts. Inspection reports, including documentation that identified deficiencies were corrected.

Housekeeping

1-CORE-1A-04 (Ref. 4-ALDF-1A-04)
The facility is clean, in good repair.

Comment: None.

Protocols: Written policy and procedure. Housekeeping plan. Maintenance plan. Inspection forms. Inmate handbook (describing inmate responsibilities).

Process Indicators: Inspection reports, completed forms, including documentation that identified deficiencies were corrected.

Water Supply

1-CORE-1A-05 (Mandatory) (Ref. 4-ALDF-1A-07)
The facility's potable water source and supply, whether owned and operated by a public water department or the facility, is certified at least annually by an independent, outside source to be in compliance with jurisdictional laws and regulations.

Comment: None.

Protocols: Written policy and procedure.

Process Indicators: Documentation of approval by outside source. Documentation of credentials of person/agency providing approval.

Single-Occupancy Cells (Size)

1-CORE-1A-06 (Existing, Renovation, Addition, New Construction)
(Ref. 4-ALDF-1A-09)

Single cells provide at least 35 square feet of unencumbered space. At least 70 square feet of total floor space is provided when the occupant is confined for more than ten hours per day.

Comment: “Unencumbered space” is usable space that is not encumbered by furnishings or fixtures. At least one dimension of the unencumbered space is no less than seven feet. In determining the unencumbered space, the total square footage is obtained and the square footage of the fixtures is subtracted. All fixtures must be in operational position for these calculations.

Protocols: Written policy and procedure. Facility plans/specifications.

Process Indicators: Measurement. Observation.

Multiple-Occupancy Rooms/Cells (Size)

**1-CORE-1A-07 (Existing, Revocation, Addition, New Construction)
Ref. 4-ALDF-1A-10)**

Multiple-occupancy rooms/cells house between two and sixty-four occupants and provide 25 square feet of unencumbered space per occupant. When confinement exceeds ten hours per day, at least 35 square feet of unencumbered space is provided for each occupant.

Comment: “Unencumbered space” is usable space that is not encumbered by furnishings or fixtures. At least one dimension of the unencumbered space is no less than seven feet. In determining the unencumbered space, the total square footage is obtained and the square footage of the fixtures is subtracted. All fixtures must be in operational position for these calculations.

Protocols: Written policy and procedure. Facility plans/specifications.

Process Indicators: Measurement. Observation.

Dayrooms (Size)

**1-CORE-1A-08 (Existing, Renovation, Addition, New Construction)
(Ref. 4-ALDF-1A-12)**

Dayrooms with space for varied inmate activities are situated immediately adjacent to inmate sleeping areas. Dayrooms provide a minimum of 35 square feet of space per inmate (exclusive of lavatories, showers, and toilets) for the maximum number of inmates who use the dayroom at one time. No dayroom encompasses less than 100 square feet of space, exclusive of lavatories, showers, and toilets.

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications.

Process Indicators: Measurement. Observation. Interviews (staff, inmates). Housing and classification records/logs.

Environmental Conditions/Lighting

1-CORE-1A-09 (Ref. 4-ALDF-1A-14, 1A-15)

All inmate rooms/cells provide the occupants with access to natural light. Lighting throughout the facility is sufficient for the tasks performed.

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications.

Process Indicators: Documentation from a qualified source. Measurement. Observation. Maintenance and repair records. Inmate and staff interviews.

Ventilation

1-CORE-1A-10 (Ref. 4-ALDF-1A-19, 1A-20)

A ventilation system supplies at least 15 cubic feet per minute of circulated air per occupant, with a minimum of five cubic feet per minute of outside air. Toilet rooms and cells with toilets have no less than four air changes per hour unless state or local codes require a different number of air changes. Air quantities are documented by a qualified independent source and are checked not less than once per accreditation cycle. Temperatures are mechanically raised or lowered to acceptable comfort levels

Comment: Accreditation cycle is defined as within the past three years.

Protocols: Written policy and procedure. Facility plans/specifications.

Process Indicators: Measurement. Observation. Inmate and staff interviews. Facility logs and records. Maintenance and repair records. Report from independent source.

Smoking

1-CORE-1A-11 (Ref. 4-ALDF-1A-21)

Non-smoking inmates are not exposed to second-hand smoke.

Comment: Research confirms the adverse health effects of environmental tobacco smoke (second hand smoke).

Protocols: Written policy and procedure. Inmate handbook, rules.

Process Indicators: Observation. Staff and inmate interviews. Facility logs and records.

PERFORMANCE STANDARD: Vehicle Safety

1B. Vehicles are maintained and operated in a manner that prevents harm to the community, staff, contractors, volunteers, and inmates.

EXPECTED PRACTICES

Vehicles/Inmate Transport

1-CORE-1B-01 (Ref. 4-ALDF-1B-03, 1B-04, 1B-06)

Transportation of inmates outside the facility, and security of facility vehicles are governed by policy and procedure. Staff involved with transportation of inmates are informed of all policy and procedures. Annual safety inspections are conducted on all vehicles used by the facility. Repairs are completed immediately. Vehicles are not used until repairs are complete.

Comment: None.

Protocols: Written policy/procedure. Vehicle log format. Maintenance record format. Staff training curriculum.

Process Indicators: Inspection reports. Completed vehicle logs. Maintenance records and receipts. Reports of vehicle problems/requests for repair or maintenance. Credentials of inspector. Documentation of completed repairs. Documentation of staff training and qualifications. Transport logs. Staff and inmate interviews.

PERFORMANCE STANDARD Emergency Preparedness/Response

1C. The number and severity of emergencies are minimized. When emergencies occur, the response minimizes the severity.

Definition: An emergency is any event that results in the suspension or disruption of normal facility operations.

EXPECTED PRACTICES

Emergency Plan

1-CORE-1C-01 (Mandatory) (Ref. 4-ALDF-1C-01, 1C-05, 1C-06)

There is a plan that guides the facility response to emergencies. All facility personnel are trained annually in the implementation of the emergency plan. The emergency plan should include procedures to be followed in situations that threaten facility security. Such situations may include but are not limited to: riots/disturbances, hunger strikes, escapes, taking of hostages, and staff work stoppage.

Comment: None.

Protocols: Written policy and procedure. Emergency plans. Training curriculum. Distribution list for plan.

Process Indicators: Training records. Facility logs. Staff interviews and training records. Distribution records. Documentation of annual review. Documentation of staff receipt of, and training on, the plan.

Evacuation Plan

1-CORE-1C-02 (Mandatory) (Ref. 4-ALDF-1C-02)

An evacuation plan is used in the event of fire or major emergency. The plan is approved by an independent outside inspector trained in the application of national fire safety codes and is reviewed annually, updated if necessary, and reissued to the local fire jurisdiction.

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications. Evacuation plan.

Process Indicators: Documentation of approval of plan. Documentation of annual review. Observation. Documentation of drills. Staff and inmate interviews.

Immediate Release of Inmates

1-CORE-1C-03 (Mandatory) (Ref. 4-ALDF-1C-03, 1C-04)

There is a means for the immediate release of inmates from locked areas in case of emergency and there are provisions for a backup system. The facility has exits that are properly positioned, are clear from obstruction, and are distinctly and permanently marked to ensure the timely evacuation of inmates and staff in the event of fire or other emergency. All housing areas and places of assembly for fifty or more persons have two exits.

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications. Emergency release plan.

Process Indicators: Observation. Staff interviews. Facility records/logs.

Fire Safety

Code Conformance

1-CORE-1C-04 (Mandatory) (Ref. 4-ALDF-1C-07)

The facility conforms to applicable federal, state, and/or local fire safety codes.

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications. Fire regulations and codes. Internal inspection forms. Detention and alarm system testing schedule.

Process Indicators: Documentation of compliance. Reports/inspections from external agencies. Internal inspection results and reports. Documentation of fire alarm and detection system maintenance and testing. Observation.

Fire Prevention Regulations

1-CORE-1C-05 (Mandatory) (Ref. 4-ALDF-1C-08, 1C-09)

The facility's fire prevention regulations and practices ensure the safety of staff, contractors, inmates, and visitors. There is a comprehensive and thorough monthly inspection of the facility by a qualified fire and safety officer for compliance with safety and fire prevention standards. There is an annual inspection by local or state fire officials or other qualified persons.

Comment: None.

Protocols: Written policy and procedure. Fire prevention regulations. Internal inspection forms. Facility plans/specifications. Training curricula. Equipment testing schedule.

Process Indicators: Maintenance and testing records. Observation. Facility logs. Staff training records. Reports describing fire events that occurred. Staff interviews. Documentation of qualifications of fire and safety officer. Inspection reports and documentation of action taken to address identified deficiencies. Local and/or state inspection reports.

Facility Furnishings

1-CORE-1C-06 (Mandatory) (Ref. 4-ALDF-1C-10)

Facility furnishings meet fire safety performance requirements.

Comment: Facility furnishings include draperies, curtains, furniture, mattresses and bedding, upholstered or cushioned furniture, wastebaskets, decorations, and similar materials that can burn. Furnishings, mattresses, cushions, or other items of foamed plastics or foamed rubber (for example, polyurethane, polystyrene) can pose a severe hazard due to high smoke production, rapid burning once ignited, and high heat release. Such materials should be subjected to careful fire safety evaluation before purchase or use. All polyurethane should be removed from living areas unless its use is approved in writing by the fire authority having jurisdiction. The fire authority should consider the flammability and toxicity characteristics of the products being evaluated. "Furnishings" applies to all living quarters. This expected practice requires that specifications be known, if available, at the time of selection. There are no expected practices mandating

knowledge of fire performance characteristics of furnishings in the facility prior to implementation of the policy relating to this expected practice.

Protocols: Written policy and procedure. Facility plans/specifications.

Process Indicators: Specifications for all furnishings. Records of approval by external authority.

Flammable, Toxic, and Caustic Materials

1-CORE-1C-07 (Mandatory) 4-ALDF-1C-11

Flammable, toxic, and caustic materials are controlled and used safely.

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications. Staff training curriculum. Inmate training curriculum. Inmate handbook/rules. Internal inspection forms.

Process Indicators: Staff training records. Inmate training records. Internal inspection results. Documentation of incidents that involved flammable, toxic or caustic materials.

Emergency Power and Communication

Essential Lighting and Life-Sustaining Functions

1-CORE-1C-08 (Ref. 4-ALDF-1C-12)

Essential lighting and life-sustaining functions are maintained inside the facility or by the community in an emergency.

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications.

Process Indicators: Observation. Facility records and logs.

Equipment is in Working Order

1-CORE-1C-09 (Ref. 4-ALDF-1C-14)

All equipment is in working order. Safety and security equipment is repaired or replaced immediately. Use of padlocks for security locks on cell or inmate housing doors is prohibited.

Comment: None.

Protocols: Written policy and procedure. Job descriptions. Emergency repair plan.

Process Indicators: Facility records/logs. Personnel records.

II. SECURITY

GOAL: *Protect the community, staff, contractors, volunteers, and inmates from harm.*

PERFORMANCE STANDARD: Protection from Harm

2A. The community, staff, contractors, volunteers, and inmates are protected from harm. Events that pose risk of harm are prevented. The number and severity of events are minimized.

EXPECTED PRACTICES

Control

1-CORE-2A-01 (Ref. 4-ALDF-2A-01)

The facility's security, life safety, and communications systems are monitored continuously from a secure location.

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications. Staff schedules.

Process Indicators: Facility records and logs. Observation. Maintenance records.

Correctional Officers' Posts

1-CORE-2A-02 (Ref. 4-ALDF-2A-03, 2A-04)

Correctional officers' posts are located adjacent to inmate living areas to permit officers to see or hear and respond promptly to emergency situations. There are written orders for every correctional officer's post.

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications. Post orders.

Acknowledgment form.

Process Indicators: Observation. Staff and inmate interviews. Documentation of staff receipt of post orders. Documentation of annual review and updating.

Personal Contact Between Staff and Inmates

1-CORE-2A-03 (Ref. 4-ALDF-2A-05, 2A-06)

Personal contact and interaction between staff and inmates is required. The facility administrator or designee visits the facility's living and activity areas at least weekly.

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications. Schedule.

Process Indicators: Observation. Facility logs. Staff and inmate interviews.

Secure Perimeter

1-CORE-2A-04 (Ref. 4-ALDF-2A-07)

The facility perimeter ensures inmates are secured and that access by the general public is denied without proper authorization.

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications.

Process Indicators: Observation. Facility records and logs.

Female Inmate and Female Staff

1-CORE-2A-05 (Ref. 4-ALDF-2A-08)

When a female inmate is housed in a facility, at least one female staff member is on duty at all times.

Comment: None.

Protocols: Written policy and procedure. Staffing plans.

Process Indicators: Records of staff deployment. Facility logs.

No Inmate Control Over Others

1-CORE-2A-06 (Ref. 4-ALDF-2A-09)

No inmate or group of inmates is given control, or allowed to exert authority, over other inmates.

Comment: None.

Protocols: Written policy and procedure.

Process Indicators: Observation. Staff and inmate interviews.

Inmate Movement under Staff Control

1-CORE-2A-07 (Ref. 4-ALDF-2A-10)

All inmate movement from one area to another is controlled by staff.

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications. Staffing plans.

Process Indicators: Observation.

Staff Log

1-CORE-2A-08 (Ref. 4-ALDF-2A-11)

Correctional staff maintains a permanent log and prepare shift reports that record routine information, emergency situations, and unusual incidents.

Comment: Permanent logs may be recorded electronically.

Protocols: Written policy and procedure. Record keeping forms and formats.

Process Indicators: Completed logs and other records. Documentation of emergency situations and unusual incidents.

Staffing

Sufficient Staff

1-CORE-2A-09 (Ref. 4-ALDF-2A-14)

Sufficient staff, including a designated supervisor, are provided at all times to perform functions relating to the security, custody, and supervision of inmates and as needed to operate the facility in conformance with the standards.

Comment: None.

Protocols: Written policy and procedure. Staffing analysis process and plan. Staff deployment plans and schedules.

Process Indicators: Documentation of annual review of staffing analysis and plan. Records of actual staff deployment. Facility logs.

Inmate Counts

Inmate Population Management System

1-CORE-2A-10 (Ref. 4-ALDF-2A-16)

There is an inmate population management process that includes records on the admission, processing, and release of inmates.

Comment: None.

Protocols: Written policy and procedure. Accounting system. Forms. Report formats.

Process Indicators: Completed forms. Reports. Staff interviews.

Counts

1-CORE-2A-11 (Ref. 4-ALDF-2A-17)

The facility has a system for physically counting inmates. At least one formal count is conducted for each shift, with no less than three counts daily.

Comment: Electronic means should not be substituted for direct staff observation.

Protocols: Written policy and procedure. Accounting system. Forms. Identification forms/formats.

Process Indicators: Completed forms. Facility records and logs. Documentation of inmate accounting activities. Staff interviews.

Facility Design

**1-CORE-2A-12 (Renovation, Addition, New Construction only).
(Ref. 4-ALDF-2A-18)**

Physical plant design facilitates continuous personal contact and interaction between staff and inmates in housing units. All living areas are constructed to facilitate continuous staff observation, excluding electronic surveillance, of cell or detention room fronts and areas such as dayrooms and recreation spaces.

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications.

Process Indicators: Observation. Staff and inmate interviews.

Reception

Legal Commitment and Medical Review

1-CORE-2A-13 (Ref. 4-ALDF-2A-19)

Prior to accepting custody of an inmate, staff determine that the inmate is legally committed to the facility, and that the inmate is not in need of immediate medical attention.

Comment: None.

Protocols: Written policy and procedure. Admission forms.

Process Indicators: Completed admissions forms. Facility logs. Observation.

Admissions

1-CORE-2A-14 (Ref. 4-ALDF-2A-20, 2A-21, 2A-23)

Admission processes for a newly-admitted inmate include, but are not limited to:

- **search of the inmate and personal property**
- **inventorying and providing secure storage of personal property**
- **providing an itemized receipt of personal property**
- **recording of basic personal data**
- **performing a criminal history check**
- **photographing and fingerprinting, as required**
- **medical, dental, and mental health screening**
- **suicide screening**
- **separating from the general population**

Comment: None.

Protocols: Written policy and procedure. Intake and admission forms. Screening forms. Staff training curriculum. Inventory form. Receipt form.

Process Indicators: Observations. Staff and inmate interview. Intake records/files. Intake and admission records. Completed inventory forms and receipts.

Orientation

1-CORE-2A-15 (Ref. 4-ALDF-2A-27)

Prior to being placed in the general population, each inmate is provided with an orientation that includes facility rules and regulations, including access to medical care. Facility rules and regulations are available during their confinement. The written materials are translated into those languages spoken by a significant number of inmates.

Comment: None.

Protocols: Written policy and procedure. Orientation information and process. Inmate handbook.

Process Indicators: Observation. Intake records. Inmate interviews.

Classification and Separation

Objective Classification System

1-CORE-2A-16 (Ref. 4-ALDF-2A-30, 2A-31)

An objective classification system is used to separate inmates into groups to reduce the probability of assault and disruptive behavior. All inmates are classified using an objective classification process that at a minimum:

- **Identifies the appropriate level of custody for each inmate**
- **Identifies appropriate housing assignment**
- **Identifies the inmate's interest and eligibility to participate in available programs**

There is a process for review and appeal of classification decisions.

Comment: None.

Protocols: Written policy and procedure. Classification forms and formats. Methodology for validating process. Process for periodic review and appeal. Inmate handbook. Inmate orientation materials.

Process Indicators: Classification records. Documentation of verification of the process. Documentation of periodic review and appeal. Inmate interviews.

Separation in Classification

1-CORE-2A-17 (Ref. 4-ALDF-2A-32, 2A-33)

Inmate management and housing assignment considers age, gender, legal status, custody needs, special problems and needs, and behavior. Male and female inmates are housed in separate rooms/cells. Inmates are separated according to existing laws and regulations and/or consistent with the facility's classification plan.

Comment: None.

Protocols: Written policy and procedure. Housing assignment process and forms. Facility plans/specifications. Applicable statutes and regulations. Classification plan.

Process Indicators: Inmate housing records. Observation. Staff and inmate interviews. Inmate classification records. Observation.

Single-Occupancy Cells

1-CORE-2A-18 (Ref. 4-ALDF-2A-34)

Inmates not suitable for housing in multiple occupancy cells are housed in single occupancy cells.

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications.

Process Indicators: Observation. Interviews (staff, inmates.) Housing and classification records/logs.

Youthful Offenders

Prohibition on Youthful Offenders

1-CORE-2A-19 (Ref. 4-ALDF-2A-37)

Confinement of juveniles under the age of eighteen is prohibited unless a court finds that it is in the best interest of justice and public safety that a juvenile awaiting trial or other legal process be treated as an adult for the purposes of prosecution, or unless convicted as an adult and required by statute to be confined in an adult facility.

Comment: None.

Protocols: Written policy and procedure.

Process Indicators: Observation. Interviews (staff, inmates). Admission and housing.

Plan for Youthful Offenders

1-CORE-2A-20 (Ref. 4-ALDF-2A-38, 2A-39, 2A-40, 2A-43)

If juveniles are committed to the facility, a plan is in place to provide for the following:

- **supervision and programming needs of the juveniles to ensure their safety and security and education**
- **classification and housing plans**
- **appropriately trained staff**

Comment: American Correctional Association policy prohibits confinement of youthful offenders in an adult facility; however, where the laws of the jurisdiction require such confinement, the provisions of the standard must be met.

Protocols: Written policy and procedure. Youthful offender classification plan. Facility plans/ specifications. Staff training curriculum. Job description. Staffing plan.

Process Indicators: Facility logs and records. Inmate records. Staff interviews.

Documentation of decisions and actions with individual youthful offenders. Classification records. Staff credentials. Staff training records. Staff deployment records.

Special Management Inmates

Segregation for Protection

1-CORE-2A-21 (Ref. 4-ALDF-2A-44)

The facility administrator or designee can order immediate segregation when it is necessary to protect an inmate or others. The action is reviewed within 72 hours by the appropriate authority.

Comment: None.

Protocols: Written policy and procedure.

Process Indicators: Documentation of review within 72 hours. Facility records. Inmate records.

Health Care

1-CORE-2A-22 (Mandatory) (Ref. 4-ALDF-2A-45)

When an inmate is transferred to segregation, health care personnel are informed immediately and provide assessment and review as indicated by the protocols established by the health authority.

Comment: Health care provider's visits are intended to be screening rounds and are not meant to be clinical encounters. The visit ensures that inmates have access to the health care system. The health care provider determines the appropriate setting for further medical attention or examination and may request an inmate's removal from a cell or housing area to a clinical environment.

Protocols: Written policy and procedure.

Process Indicators: Health records. Segregation logs. Duty assignment roster for health care providers. Observation. Interviews.

Conditions of Segregation

1-CORE-2A-23 (Ref. 4-ALDF-2A-51)

Segregation housing units provide living conditions that approximate those of the general inmate population. All exceptions are clearly documented. Segregation cells/rooms permit the inmates assigned to them to converse with and be observed by staff members.

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications.

Process Indicators: Observation. Measurement. Inmate interviews.

Observation of Special Management Inmates

1-CORE-2A-24 (Ref. 4-ALDF-2A-52)

All special management inmates are personally observed by a correctional officer at least every 30 minutes on an irregular schedule. Inmates who are violent or mentally disordered or who demonstrate unusual or bizarre behavior are assessed by medical personnel, who determine the level of supervision needed.

Comment: None.

Protocols: Written policy and procedure. Staffing plan. Log format.

Process Indicators: Facility records and logs. Documentation of cell checks.

PERFORMANCE STANDARD: Use of Physical Force

2B. Physical force is used only in instances of self-protection, protection of the inmate or others, prevention of property damage, or prevention of escape.

EXPECTED PRACTICES

Use of Force

Restrictions on Use of Force

1-CORE-2B-01 (Mandatory) (Ref. 4-ALDF-2B-01)

The use of physical force is restricted to instances of justifiable self-defense, protection of others, protection of property, and prevention of escapes, and then only as a last resort and in accordance with appropriate statutory authority. In no event is physical force used as punishment.

Comment: None.

Protocols: Written policy and procedure. Staff training curriculum.

Process Indicators: Facility records and logs. Incident reports. Training records.

Restraints

Restraint Devices

1-CORE-2B-02 (Ref. 4-ALDF-2B-02)

Restraint devices are never applied as punishment. There are defined circumstances under which supervisory approval is needed prior to application.

Comment: Restraint devices should be used only to prevent self-injury, injury to others, or property damage. Restraints are not applied for more time than is necessary.

Protocols: Written policy and procedure.

Process Indicators: Documentation of supervisory approval. Staff interviews.

Four/Five Point Restraints

1-CORE-2B-03 (Mandatory) (Ref. 4-ALDF-2B-03)

Four/five point restraints are used only in extreme instances and only when other types of restraints have proven ineffective. Advance approval is secured from the facility administrator/designee before an inmate is placed in a four/five point restraint. Subsequently, the health authority or designee is notified to assess the inmate's medical and mental health condition, and to advise whether, on the basis of serious danger to self or others, the inmate should be in a medical/mental health unit for emergency involuntary treatment with sedation and/or other medical management, as appropriate. If the inmate is not transferred to a medical/mental health unit and is restrained in a four/five point position, the following minimum procedures are followed:

- **continuous direct visual observation by staff prior to an assessment by the health authority or designee**
- **subsequent visual observation is made at least every 15 minutes**
- **restraint procedures are in accordance with guidelines approved by the designated health authority**
- **documentation of all decisions and actions**

Comment: A four/five point restraint secures an inmate's arms and legs (four point) and head (five point.) Restraint guidelines include consideration of an individual's physical condition, such as body weight.

Protocols: Written policy and procedure. Forms.

Process Indicators: Observation. Facility records and logs. Inmate and staff interviews. Documentation of approval(s) and observation.

Weapons

Procedures for Weapons

1-CORE-2B-04 (Ref. 4-ALDF-2B-04, 2B-05)

Procedures govern the availability, control, inventory, storage, and use of firearms, less lethal devices, and related security devices, and specify the level of authority required for their access and use. Chemical agents and electrical disablers are used only with the authorization of the facility

administrator or designee. Access to storage areas is restricted to authorized persons and the storage space is located in an area separate and apart from inmate housing or activity areas.

Comment: None.

Protocols: Written policy and procedure. Authorization forms. Facility plans/specifications.

Process Indicators: Facility logs and records. Completed authorization forms. Staff interviews.

Written Reports

1-CORE-2B-05 (Ref. 4-ALDF-2B-07)

Written reports are submitted to the facility administrator or designee no later than the conclusion of the tour of duty when any of the following occur:

- **discharge of a firearm or other weapon**
- **use of less lethal devices to control inmates**
- **use of force to control inmates**
- **inmate(s) remaining in restraints at the end of the shift**
- **routine and emergency distribution of security equipment**

Comment: None.

Protocols: Written policy and procedure. Report format.

Process Indicators: Completed reports. Facility records and logs.

Use of Firearms

1-CORE-2B-06 (Mandatory) (Ref. 4-ALDF-2B-08)

The use of firearms complies with the following requirements:

- **weapons are subjected to stringent safety regulations and inspections.**
- **a secure weapons locker is located outside the secure perimeter of the facility**
- **except in emergency situations, firearms and authorized weapons are permitted only in designated areas to which inmates have no access**
- **employees supervising inmates outside the facility perimeter follow procedures for the security of weapons**
- **employees are instructed to use deadly force only after other actions have been tried and found ineffective, unless the employee believes that a person's life is immediately threatened**

- **employees on duty use only firearms or other security equipment that have been approved by the facility administrator**
- **appropriate equipment is provided to facilitate safe unloading and loading of firearms**

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications. Staff training curriculum.

Process Indicators: Training records. Observation. Staff and inmate interviews.

PERFORMANCE STANDARD: Contraband

2C. Contraband is minimized. It is detected when present in the facility.

EXPECTED PRACTICES

Searches

Procedures for Searches

1-CORE-2C-01 (Ref. 4-ALDF-2C-01)

Procedures guide searches of facilities and inmates to control contraband

Comment: None.

Protocols: Written policy and procedure. Search procedures.

Process Indicators: Observation. Facility records and logs. Inmate and staff interviews.

Arrestee Strip Search

1-CORE-2C-02 (Ref. 4-ALDF-2C-03)

A strip search of an arrestee at intake is only conducted when there is reasonable belief or suspicion that he/she may be in possession of an item of contraband. The least invasive form of search is conducted.

Comment: For arrestees, generally the least-invasive form of search should be conducted.

Protocols: Written policy and procedure. Search procedures.

Process Indicators: Observation. Facility records and logs. Inmate and staff interviews.

Inmate Strip Search

1-CORE-2C-03 (Ref. 4-ALDF-2C-04)

A strip search of a general population inmate is only conducted when there is reasonable belief that the inmate may be in possession of an item of

contraband or when the inmate leaves the confines of the facility to go on an outside appointment or work detail and upon return from such outside appointment or work detail. The least invasive form of search is conducted.

Comment: Reasonable belief may be based on: reliable information that the inmate possesses contraband; discovery of contraband in the inmate's living space; a serious incident in which the inmate was involved or where the inmate was present; refusal to be searched; contact with the public or exposure to public areas; exposure to contact visits; or return to custody from community status.

Protocols: Written policy and procedure. Search procedures.

Process Indicators: Observation. Facility records and logs. Inmate and staff interviews.

Body Cavity Search

1-CORE-2C-04 (Ref. 4-ALDF-2C-05)

Manual or instrument inspection of body cavities is conducted only when there is reasonable belief that the inmate is concealing contraband and when authorized by the facility administrator or designee. Health care personnel conduct the inspection in private.

Comment: None.

Protocols: Written policy and procedure. Search procedures.

Process Indicators: Observation. Facility records and logs. Inmate and staff interviews. Credentials of personnel who conduct searches.

PERFORMANCE STANDARD: Access to Keys, Tools, Utensils

2D. Improper access to and use of keys, tools and utensils are minimized.

EXPECTED PRACTICES

Key, Tool, and Utensil Control

1-CORE-2D-01 (Mandatory) (Ref. 4-ALDF-2D-01, 2D-02, 2D-03)

Keys, tools, culinary equipment, and medical/dental instruments and supplies (syringes, needles and other sharps) are inventoried and use is controlled.

Comment: None.

Protocols: Written policy and procedure. Key control plan. Inventory forms. Format for reports.

Process Indicators: Facility logs. Documentation of key control activities. Inventory logs and forms. Observation. Interviews.

III. ORDER

GOAL: Maintain an orderly environment with clear expectations of behavior and systems of accountability.

PERFORMANCE STANDARD: Inmate Discipline

3A. Inmates comply with rules and regulations.

EXPECTED PRACTICES

Rules and Discipline

1-CORE-3A-01 (Ref. 4-ALDF-3A-01, 3A-02, 2A-50)

Disciplinary procedures governing inmate rule violations address the following:

- **rules of inmate conduct that specify prohibited acts and appropriate sanctions for each prohibited act**
- **minor and major violations**
- **criminal offenses**
- **disciplinary reports**
- **pre-hearing actions/investigation**
- **pre-hearing detention**
- **placement of an inmate in disciplinary detention for a rule violation only after a hearing.**
- **maximum sanction for a rule violation is no more than sixty days**

Comment: The rules should prohibit only observed behavior that can be shown clearly to have a direct, adverse effect on an inmate or on facility order and security. Penalties should be proportionate to the importance of the rule and severity of the violation.

Protocols: Written policy and procedure. Rules. Inmate handbook. Report formats. Sanctioning schedule.

Process Indicators: Documentation of annual review. Inmate records. Disciplinary records. Inmate and staff interviews. Documentation that sanctioning schedule has been communicated to inmates. Documentation of facility administrator review and approval.

IV. CARE

GOAL: *Provide for the basic needs and personal care of inmates.*

PERFORMANCE STANDARD: Food Service

4A. Food service provides a nutritionally balanced diet. Food service operations are hygienic and sanitary.

EXPECTED PRACTICES

Food

Dietary Allowances

1-CORE-4A-01 (Mandatory) (Ref. 4-ALDF-4A-07)

The facility's dietary allowances are reviewed at least annually by a qualified nutritionist or dietician to ensure that they meet the nationally recommended dietary allowances for basic nutrition for appropriate age groups. Menu evaluations are conducted at least quarterly by food service supervisory staff to verify adherence to the established basic daily servings.

Comment: Copies of menu evaluations should be forwarded to the health authority.

Protocols: Written policy and procedure. Recommended dietary allowances.

Process Indicators: Annual reviews. Nutritionist or dietician qualifications.

Documentation of at least annual review and quarterly menu evaluations. Interviews with staff.

Therapeutic or Special Diets

1-CORE-4A-02 (Ref. 4-ALDF-4A-09, 4A-10)

Therapeutic and/or special diets are provided as prescribed by appropriate clinicians or when religious beliefs require adherence to religious dietary laws.

Comment: Therapeutic diets are prepared and served to inmates according to the orders of the treating clinician or as directed by the responsible health authority official.

Prescriptions for therapeutic diets should be specific and complete, furnished in writing to the food service manager, and rewritten quarterly. Therapeutic diets should be kept as simple as possible and should conform as closely as possible to the foods served other inmates. Pregnant women are only prescribed meals, if necessary.

Protocols: Written policy and procedures. Diet manual. Diet request form. Special diets.

Process Indicators: Health records. Diet records or forms. Observation. Interviews. Documentation of chaplain's approval. Diet manual.

Food Service Facilities

1-CORE-4A-03 (Mandatory) (Ref. 4-ALDF-4A-11)

There is documentation by an independent, outside source that food service facilities and equipment meet established government health and safety codes. Corrective action is taken on any deficiencies.

Comment: None.

Protocols: Written policy and procedure. Health and safety codes.

Process Indicators: Documentation of compliance with codes. Inspection reports, completed forms, including documentation that identified deficiencies were corrected.

Health Protection for Food Service

1-CORE-4A-04 (Mandatory) (Ref. 4-ALDF-4A-13)

There is adequate health protection for all inmates and staff in the facility and for inmates and other persons working in food service. All persons involved in the preparation of the food receive a pre-assignment medical examination to ensure freedom from diarrhea, skin infections, and other illnesses transmissible by food or utensils.

Comment: None.

Protocols: Written policy and procedure. Laws, statutes, and regulations.

Process Indicators: Inspection reports, completed forms, including documentation that identified deficiencies were corrected. Documentation of medical examinations and reexaminations. Inmate and staff interviews. Observation. Documentation of daily monitoring for health and cleanliness.

Food Service Inspection

1-CORE-4A-05 (Mandatory) (Ref. 4-ALDF-4A-15)

If food services are provided by the facility, there are weekly inspections of all food services areas, including dining and food preparation areas and equipment. Water temperature is checked and recorded daily.

Comment: None.

Protocols: Written policy and procedure. Inspection forms and formats.

Process Indicators: Observation. Measurement. Inspection reports, completed forms, including documentation that identified deficiencies were corrected.

Food Service Management

1-CORE-4A-06 (Ref. 4-ALDF-4A-17, 4A-18)

Three meals, including at least two hot meals, are prepared, delivered, and served under staff supervision at regular times during each twenty-four hour period, with no more than fourteen hours between the evening meal and breakfast. Variations may be allowed based on weekend and holiday food service demands, provided basic nutritional goals are met.

Comment: None.

Protocols: Written policy and procedure. Meal schedules.

Process Indicators: Observation. Inmate interviews. Records of meals served and times served. Facility records and logs.

PERFORMANCE STANDARD: Hygiene

4B. Inmates maintain acceptable personal hygiene practices.

EXPECTED PRACTICES

Bedding Issue

1-CORE-4B-01 (Ref. 4-ALDF-4B-02)

Inmates are issued suitable, clean bedding and linens. There is provision for linen exchange, including towels, at least weekly.

Comment: None.

Protocols: Written policy and procedure.

Process Indicators: Documentation of issue and exchange.

Clothing

1-CORE-4B-02 (Ref. 4-ALDF-4B-03)

Inmates are issued clothing that is properly fitted and suitable for the climate. There are provisions for inmates to exchange clothing at least twice weekly.

Comment: None.

Protocols: Written policy and procedure.

Process Indicators: Observation. Inmate interviews. Documentation of cleaning and storage. Documentation of clothing issue.

Personal Hygiene

1-CORE-4B-03 (Ref. 4-ALDF-4B-06)

Articles and services necessary for maintaining proper personal hygiene are available to all inmates including items specifically needed for females.

Comment: None.

Protocols: Written policy and procedure.

Process Indicators: Documentation that items are provided. Observation. Inmate interviews.

Plumbing Fixtures

1-CORE-4B-04 (Ref. 4-ALDF-4B-08, 4B-09, 4C-10)

Inmates, including those in medical housing units or infirmaries, have access to showers, toilets, and washbasins with temperature controlled hot and cold running water twenty-four hours per day. Inmates are able to use toilet facilities without staff assistance when they are confined in their cells/sleeping areas. Water for showers is thermostatically controlled to temperatures ranging from 100 degrees to 120 degrees Fahrenheit.

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications. Applicable building codes and regulations. Documentation of periodic measurement of water temperature. Inmate grievances. Inmate interviews.

Process Indicators: Observation. Inmate housing records. Measurement. Inspection/Maintenance records or reports. Ratio documentation. Observation.

PERFORMANCE STANDARD: Continuum of Health Care Services

4C. Inmates maintain good health. Inmates have unimpeded access to a continuum of health care services so that their health care needs, including prevention and health education, are met in a timely and efficient manner.

EXPECTED PRACTICES

Access to Care/ Clinical Services

1-CORE-4C-01 (Mandatory) (Ref. 4-ALDF-4C-01, 4C-02, 4C-03)

At the time of admission/intake all inmates are informed about procedures to access health services, including any copay requirements, as well as procedures for submitting grievances. Medical care is not denied based on an inmate's ability to pay. There is a process for all inmates to initiate

requests for health services on a daily basis. These requests are triaged by qualified health professionals or processed by health-trained persons to ensure that needs are addressed in a timely manner in accordance with the severity of the illness. When the necessary medical, dental, or mental health care is not available at the facility, inmates are referred to and given timely access to the needed clinical services in another appropriate setting.

Comment: No member of the correctional staff should approve or disapprove inmate requests for health care services. When the facility frequently has non-English speaking inmates, procedures should be explained and written in their language.

Protocols: Written policy and procedures. Inmate handbook. Grievance procedure.

Process Indicators: Documentation that inmates are informed about health care and grievance system. Inmate grievances. Interviews. Financial records. Sick call request form. A health record. Clinical provider schedules. Observation. Interviews.

Continuity of Care/Referrals

1-CORE-4C-02 (Ref. 4-ALDF-4C-04, 4C-05)

When health care is transferred to providers in the community, appropriate information is shared with the new providers in accordance with consent requirements. Prior to release, inmates with serious health conditions are referred to available community services

Comment: When health care is transferred to providers in the community, appropriate information should be shared with the new providers in accordance with consent requirements. Health care staff should collaborate with security personnel in determining conditions of transportation and necessary security precautions when an inmate needs to be transported to another facility or provider.

Protocols: Written policy and procedure. Referral transfer/consult form.

Process Indicators: Completed referral, transfer, consult forms. Health records. Facility logs. Interviews. Transportation logs. Documentation of annual list review.

Emergency Plan

1-CORE-4C-03 (Mandatory) (Ref. 4-ALDF-4C-08)

Inmates have access to twenty-four-hour emergency medical, dental, and mental health services, including on-site first aid, basic life support, and transfer to community-based services.

Comment: In the event that primary health services are not available, and particularly in emergency situations, back-up facilities or providers should be predetermined. The plan may include the use of an alternative hospital emergency service or a physician on-call service.

Protocols: Written policy or procedure.

Process Indicators: Designated facility. Provider lists. Transportation logs. Interviews.

Infirmary Care

1-CORE-4C-04 (Ref. 4-ALDF-4C-09)

If infirmary care is provided onsite, it complies with applicable state regulations and local licensing requirements. Provisions include twenty-four-hour emergency on-call consultation with a physician, dentist, or mental health professional.

Comment: An infirmary is a specific area of a health care facility, separate from other housing areas, where inmates are housed and provided health care. Admission and discharge from this area is controlled by medical orders or protocols.

Protocols: Written policy or procedures. Nursing manual. Licensing requirements and regulations.

Process Indicators: Admission and inpatient records. Staffing schedules. Documentation of compliance with licensing requirements and regulations. Observations. Interviews.

Pregnancy Management

1-CORE-4C-05 (Mandatory) (Ref. 4-ALDF-4C-13)

Pregnant inmates have access to obstetrical services by a qualified provider, including prenatal, peripartum, and post partum care.

Comment: Management should include family planning services prior to release.

Protocols: Written policy and procedure. Inmate handbook. Contract or agreement.

Process Indicators: Health record entries. Laboratory records. Interviews.

Communicable Disease and Infection Control Program

1-CORE-4C-06 (Mandatory) (Ref. 4-ALDF-4C-14, 4C-15, 4C-16, 4C-17, 4C-18)

Communicable diseases, such as tuberculosis, human immunodeficiency virus (HIV) infection, viral hepatitis, Methicillin Resistant Staphylococcal Aureus (MRSA) infection, and influenza are managed in accordance with a written plan approved by the health authority in consultation with local public health officials. The plan includes provisions for the screening, surveillance, treatment, containment, and reporting of infectious diseases. Infection control measures include the availability of personal protective equipment for staff and hand hygiene promotion throughout the facility. Procedures for handling biohazardous waste and decontaminating medical and dental equipment must comply with applicable local, state, and federal regulations.

Comment: Because of their serious nature, methods of transmission, and public sensitivity, these diseases require special attention. Plans for the management of tuberculosis may be based on incidence and prevalence of the disease within the agency's population and the surrounding community.

Protocols: Written policy and procedure, codes, and regulations and treatment guidelines.
Process Indicators: Health records. Laboratory, x-ray reports, and logs. Chronic care forms and clinic visit logs. Minutes of communicable disease and infection control committee meetings. Interviews. Documentation of waste pick up, spore count logs, and/or cleaning logs.

Chronic Care

1-CORE-4C-07 (Mandatory) (Ref. 4-ALDF-4C-19)
Inmates with chronic medical conditions, such as diabetes, hypertension, and mental illness receive periodic care by a qualified health care provider in accordance with individual treatment plans that include monitoring of medications and laboratory testing.

Comment: Professionally recognized chronic care guidelines are available from disease-specific organizations and various medical and physicians' associations.

Protocols: Written policy and procedure. Chronic care protocols and forms.
Process Indicators: Health records. Chronic care logs. Specialist's schedules.

Dental Care

1-CORE-4C-08 (Ref. 4-ALDF-4C-20)
Routine and emergency dental care is provided to inmates under the direction and supervision of a licensed dentist. Oral health services include access to diagnostic x-rays, treatment of dental pain, development of individual treatment plans, extraction of non-restorable teeth, and referral to dental specialist, including oral surgery

Comment: As part of the initial health care screening, a dentist or health care personnel, properly trained and designated by the dentist should perform dental screening. The dental program also should provide inmates with instruction on the proper brushing of the teeth and other dental hygiene measures. The dental examination should include taking or reviewing the inmate's dental history and a full examination of hard and soft tissue of the oral cavity; diagnostic x-rays should be available, if deemed necessary. The examination results should be recorded on a uniform dental record using a numbered system such as the Federation Dental International System.

Protocols: Written policy and procedure. Dental screening by examination forms. Requests to see the dentist.

Process Indicators: Dental records. Admission logs. Referral and consultation records. Dental request forms. Dental interviews with staff.

Health Screens

1-CORE-4C-09 (Mandatory) (Ref. 4-ALDF-4C-22, 4C-29)

Intake physical and mental health screening commences upon the inmate's arrival at the facility unless there is documentation of a medical screening within the previous 90 days or the inmate is an intrasystem transfer.

Screening is conducted by health-trained staff or by qualified health care personnel in accordance with protocols established by the health authority.

The screening includes at the least the following:

- **current or past medical conditions, including mental health problems and communicable diseases**
- **current medications, including psychotropics**
- **history of hospitalization, including inpatient psychiatric care**
- **suicidal risk assessment, including suicidal ideation or history of suicidal behavior**
- **use of alcohol and other drugs including potential need for detoxification**
- **dental pain, swelling, or functional impairment**
- **possibility of pregnancy**
- **cognitive or physical impairment.**

Observation of the following:

- **behavior, including state of consciousness, mental status, appearance, conduct, tremor, or sweating**
- **body deformities and other physical abnormalities**
- **ease of movement**
- **condition of the skin, including trauma markings, bruises, lesions, jaundice, rashes, infestations, recent tattoos, and needle marks or other indications of injection drug use**
- **symptoms of psychosis, depression, anxiety and/or aggression**

Medical disposition of the inmate:

- **refusal of admission until inmate is medically cleared**
- **cleared for general population**
- **cleared for general population with prompt referral to appropriate medical or mental health care services**
- **referral to appropriate medical or mental health care service for emergency treatment**

- **process for observation for high risk events, such as seizures, detoxification, head wounds, and so forth**

Comment: Health screening is a system of structured inquiry and observation to prevent newly arrived inmates who pose a health or safety threat to themselves or others from being admitted to the general population and to identify inmates who require immediate medical attention. Receiving screening can be performed at the time of admission by health care personnel or by a health trained correctional officer. Examples of symptoms of serious, infectious or communicable diseases include a chronic cough, lethargy, weakness, weight loss, loss of appetite, fever, or night sweats that are suggestive of such illness.

Protocols: Written policy and procedure. Screening protocols. Mental health screening form.

Process Indicators: Health records. Completed mental health screening forms. Transfer logs. Interviews.

Intra-System Transfer and Health Screening

1-CORE-4C-10 (Mandatory) (Ref. 4-ALDF-4C-23)

All intra-system transfer inmates receive a health screening by health-trained or qualified health care personnel, which commences on their arrival at the facility. All findings are recorded on a screening form approved by the health authority. At a minimum, the screening includes the following:

- **a review of the inmate’s medical, dental, and mental health problems**
- **current medications**
- **current treatment plan**

Comment: Health screening of intrasystem transfers is necessary to detect inmates who pose a health or safety threat to themselves or others and who may require immediate health care.

Protocols: Written policy and procedure. Screening form.

Process Indicators: Health records. Completed screening forms. Transfer logs. Interviews.

Health Appraisal

1-CORE-4C-11 (Mandatory) (Ref. 4-ALDF-4C-24)

A comprehensive physical and mental health appraisal is completed for each inmate within 14 days after arrival at the facility in accordance with protocols established by the health authority, unless a health appraisal has been completed within the previous 90 days. The health appraisal includes the review of the previous receiving screening, a medical history and

physical examination by a qualified health care provider, and an individual treatment plan.

Comment: Test results, particularly for communicable diseases, should be received and evaluated before an inmate is assigned to housing in the general population. Information regarding the inmate's physical and mental status also may dictate housing and activity assignments. When appropriate, additional investigation should be conducted into alcohol and drug abuse and other related problems.

Protocols: Written policy and procedure. Health appraisal form.

Process Indicators: Health records. Completed health appraisal forms. Transfer logs. Interviews.

Mental Health Program

1-CORE-4C-12 (Mandatory) (Ref. 4-ALDF-4C-27, 4C-28)
Inmates have access to mental health services as clinically warranted in accordance with protocols established by the health authority that include:

- **screening for mental health problems**
- **referral to outpatient services, including psychiatric care**
- **crisis intervention and management of acute psychiatric episodes**
- **stabilization of the mentally ill and prevention of psychiatric deterioration in the facility**
- **referral and admission to inpatient facilities**
- **informed consent for treatment.**

Comment: An adequate number of qualified staff members should be available to deal directly with inmates who have severe mental health problems and to advise other correctional staff about their contacts with such individuals.

Protocols: Written policy and procedure. Screening form. Job descriptions for mental health personnel.

Process Indicators: Health records. Completed screening forms. Provider qualifications and time and attendance records. Observations. Interviews. Documentation of review by mental health personnel. Interviews.

Suicide Prevention and Intervention

1-CORE-4C-13 (Mandatory) (Ref. 4-ALDF-4C-32)
A suicide-prevention program is approved by the health authority and reviewed by the facility or program administrator. The program must include specific procedures for handling intake, screening, identifying, and continually supervising the suicide-prone inmate. All staff responsible for supervising suicide-prone inmates are trained annually on program expectations.

Comment: None.

Protocols: Written policy and procedures. Training curriculum and lesson plans. Suicide-watch logs or forms.

Process Indicators: Health records. Documentation of staff training. Documentation of suicide watches and critical incident debriefings. Observations. Interviews.

Detoxification

1-CORE-4C-14 (Mandatory) (Ref. 4-ALDF-4C-36)

Detoxification from alcohol, opiates, hypnotics, and other stimulants is conducted under medical supervision in accordance with local, state, and federal laws. When performed at the facility, detoxification is prescribed in accordance with clinical protocols approved by the health authority. Specific criteria are established for referring symptomatic inmates suffering from withdrawal or intoxication for more specialized care at a hospital or detoxification center.

Comment: None.

Protocols: Written policy and procedure. Community contract agreements.

Process Indicators: Health records. Transfer records. Interviews.

Pharmaceuticals

1-CORE-4C-15 (Mandatory) (Ref. 4-ALDF-4C-38)

Pharmaceuticals are managed in accordance with policies and procedures approved by the health authority and in compliance with state and federal laws and regulations. The policies require dispensing and administering prescribed medications by qualified personnel, adequate management of controlled medications, and provision of medications to inmates in special management units.

Comment: The formulary should include all prescription and nonprescription medications stocked in a facility or routinely procured from outside sources. Controlled substances are those classified by the Drug Enforcement Agency as Schedule II-V.

Protocols: Written policy and procedure. Federal and state laws and regulations. Format for documentation of medication, inventory, and storage of medication.

Process Indicators: Health records. Completed medication administration, inventory, and storage forms. Documentation of compliance with federal and state laws.

PERFORMANCE STANDARD: Health Services Staff

- 4D. Health services are provided in a professionally acceptable manner. Staff are qualified, adequately trained, and demonstrate competency in their assigned duties.**

EXPECTED PRACTICES

Health Authority

1-CORE-4D-01 (Mandatory) (Ref. 4-ALDF-4D-01)

The facility has a designated health authority with responsibility for health care services pursuant to a written agreement, contract, or job description. The health authority may be a physician, health services administrator, or health agency. When the health authority is other than a physician, final clinical judgments rest with a single, designated, responsible physician. The health authority is authorized and responsible for making decisions about the deployment of health resources and the day-to-day operations of the health services program.

Comment: The health authority and health services administrator may be the same person. The responsibility of the health authority includes arranging for all levels of health services, assuring the quality of all health services, and assuring that inmates have access to them. Health services should ensure the physical and mental well-being of the inmate population and should include medical and dental services, mental health services, nursing care, personal hygiene, dietary services, health education, and attending to environmental conditions. While overall responsibility may be assumed at a central office level, it is essential that each facility have an onsite health services administrator.

Protocols: Written policy and procedure. Sample agreement or contract requirements with health care provider or authority. Job description.

Process Indicators: Documentation of health authority designation. Contract. Billing records. Interviews. Documentation of mission statement, operational policies and procedures, scope of services and required personnel, coordination of care, and a quality management program.

Health Care Quarterly Meetings

1-CORE-4D-02 (Ref. 4-ALDF-7D-25)

The health authority meets with the facility administrator at least quarterly.

Comment: Minutes of the quarterly administrative meetings may be used to meet the requirements for a quarterly report.

Protocols: Written policy and procedure.

Process Indicators: Documentation of meetings. Minutes and reports. Interviews.

Provision of Treatment

1-CORE-4D-03 (Mandatory) (Ref. 4-ALDF-4D-02)
Clinical decisions are the sole province of the responsible clinician and are not countermanded by non-clinicians.

Comment: The provision of health care is a joint effort of administrators and health care providers and can be achieved only through mutual trust and cooperation. The health authority arranges for the availability of health care services; the responsible clinician determines what services are needed; the official responsible for the facility provides the administrative support for making the services accessible to inmates.

Protocols: Written policy and procedure.

Process Indicators: Health record entries. Inmate grievances. Interviews.

Personnel Qualifications/Credentials

1-CORE-4D-04 (Mandatory) (Ref. 4-ALDF-4D-03, 4D-05)
All health care professional staff comply with applicable state and federal licensure, certification, or registration requirements. Verification of current credentials is on file at the facility. Health care staff work in accordance with profession-specific job descriptions approved by the health authority. If inmates are assessed or treated by nonlicensed health care personnel, the care is provided pursuant to written standing or direct orders by personnel authorized to give such orders.

Comment: Standing medical orders are for the definitive treatment of identified conditions and for the on-site emergency treatment of any person having such condition. Direct orders are those written specifically for the treatment of one person's particular condition.

Protocols: Written policy and procedures. Job descriptions. Standing orders. Copies of licensure requirements.

Process Indicators: Personnel records. Copies of credentials or licensure. Documentation of compliance with standing orders. Health record entries. Interviews. Documentation of current credentials.

Emergency Response

1-CORE-4D-05 (Mandatory) (Ref. 4-ALDF-4D-08)
Emergency medical care, including first aid and basic life support, is provided by all health care professionals and those health-trained correctional staff specifically designated by the facility administrator. All staff responding to medical emergencies are certified in cardiopulmonary resuscitation (CPR) in accordance with the recommendations of the certifying health organization. The health authority approves policies and

procedures that ensure that emergency supplies and equipment, including automatic external defibrillators, are readily available and in working order.

Comment: The facility administrator and the health care authority may designate those correctional officers who have responsibility for responding to health care emergencies. Staff not physically able to perform CPR are exempt from the expected practice.

Protocols: Written policy and procedure. Lesson plans and curriculum.

Process Indicators: Verification of training. Records and certificates. Interviews.

Notification

1-CORE-4D-06 (Ref. 4-ALDF-4D-12)

Individuals designated by an inmate are notified in case of serious illness, serious injury, or death, unless security reasons dictate otherwise.

Comment: The persons to be notified should be designated in writing as part of the facility's admissions procedures.

Protocols: Written policy and procedure.

Process Indicators: Notification records.

Confidentiality

1-CORE-4D-07 (Mandatory) (Ref. 4-ALDF-4D-13, 4D-14)

Information about an inmate's health status is confidential. Nonmedical staff only have access to specific medical information on a "need to know" basis in order to preserve the health and safety of the specific inmate, other inmates, volunteers, visitors, or correctional staff. The active health record is maintained separately from the confinement case record and access is controlled in accordance with state and federal laws.

Comment: The principle of confidentiality protects inmate patients from disclosure of confidences entrusted to a health care provider during the course of treatment.

Protocols: Policy and procedure.

Process Indicators: Observation. Interviews.

Informed Consent

1-CORE-4D-08 (Mandatory) (Ref. 4-ALDF-4D-15)

Informed consent standards of the jurisdiction are observed and documented for inmate care in a language understood by the inmate. In the case of minors, the informed consent of a parent, guardian, or a legal custodian applies, when required by law. Inmates routinely have the right to refuse medical interventions. When health care is rendered against the

inmate's will, it is in accordance with state and federal laws and regulations.

Comment: None.

Protocols: Written policy and procedure. Consent or authorization forms.

Process Indicators: Health records. Completed consent forms. Completed refusal forms. Interviews.

Involuntary Administration

1-CORE-4D-09 (Mandatory) (Ref. 4-ALDF-4D-17)

Involuntary administration of psychotropic medication(s) to inmates is authorized by a physician and provided in accordance with policies and procedures approved by the health authority, and in accordance with applicable laws and regulations of the jurisdiction.

Comment: None.

Protocols: Written policy and procedure. Laws and regulations.

Process Indicators: A health record. Interviews.

Research

1-CORE-4D-10 (Mandatory) (Ref. 4-ALDF-4D-18)

The use of inmates in medical, pharmaceutical, or cosmetic experiments is prohibited. This expected practice does not preclude inmate access to investigational medications on a case-by-case basis for therapeutic purposes in accordance with state and federal regulations.

Comment: Experimental programs include aversive conditioning, psychosurgery, and the application of cosmetic substances being tested prior to sale to the general public.

Protocols: Written policy and procedure. Laws and regulations.

Process Indicators: Health records. Interviews.

Privacy

1-CORE-4D-11 (Ref. 4-ALDF-4D-19)

Health care encounters, including medical and mental health interviews, examinations, and procedures are conducted in a setting that respects the inmates' privacy.

Comment: None.

Protocols: Written policy and procedure. Facility diagram.

Process Indicators: Observation. Interviews.

Use of Restraints

1-CORE-4D-12 (Mandatory) (Ref. 4-ALDF-4D-21)

Restraints on inmates for medical and psychiatric purposes are only applied in accordance with policies and procedures approved by the health authority, including:

- **conditions under which restraints may be applied**
- **types of restraints to be applied**
- **identification of a qualified medical or mental health professional who may authorize the use of restraints after reaching the conclusion that less intrusive measures are not a viable alternative**
- **monitoring procedures**
- **length of time restraints are to be applied**
- **documentation of efforts for less restrictive treatment alternatives**
- **an after-incident review.**

Comment: None.

Protocols: Written policy and procedure. Monitoring form.

Process Indicators: Health records. Restraint logs. Completed monitoring forms. List of providers authorized to order restraints. Interviews.

Sexual Assault

1-CORE-4D-13 (Ref. 4-ALDF-2A-29)

Information is provided to inmates about sexual abuse/assault including:

- **prevention/intervention**
- **self-protection**
- **reporting sexual abuse/assault**
- **treatment and counseling**

The information is communicated orally and in writing, in a language clearly understood by the inmate, upon arrival at the facility.

Comment: None.

Protocols: Policy and procedure

Process Indicators: Observation, inmate interviews, inmate handbook, completed receipt forms.

Sexual Conduct of Staff

1-CORE-4D-14 (Ref. 4-ALDF-4D-22-1, 4D-22-5)

Sexual conduct between staff and detainees, volunteers or contract personnel and detainees, regardless of consensual status, is prohibited and subject to administrative, disciplinary and criminal sanctions.

Comment: None.

Protocols: Written policy and procedure.

Process Indicators: Screening records. Admission logs. Classification records. Documentation of staff awareness, e.g. annual in-service training curriculum.

Investigation of Sexual Assault

1-CORE-4D-15 (Ref. 4-ALDF-4D-22-2)

An investigation is conducted and documented whenever a sexual assault or threat is reported.

Comment: The agency should report occurrences/allegations of sexual assault or threat in accordance with the laws of the jurisdiction. The investigation may be limited by what is allowed by the laws of the jurisdiction.

Protocols: Written policy and procedure.

Process Indicators: Referral records. Investigative reports.

Victims of Sexual Assault

1-CORE-4D-16 (Mandatory) (Ref. 4-ALDF-4D-22-6)

Victims of sexual assault are referred under appropriate security provisions to a community facility for treatment and gathering of evidence. If these procedures are performed in-house, the following guidelines are used:

- **A history is taken by health care professionals who conduct an examination to document the extent of physical injury and to determine if referral to another medical facility is indicated. With the victim's consent, the examination includes collection of evidence from the victim, using a kit approved by the appropriate authority.**
- **Provision is made for testing for sexually transmitted diseases (for example HIV, gonorrhea, hepatitis, and other diseases) and counseling, as appropriate.**
- **Prophylactic treatment and follow-up for sexually transmitted diseases are offered to all victims, as appropriate.**

- **Following the physical examination, there is availability of an evaluation by a mental health professional to assess the need for crisis intervention counseling and long-term follow-up.**
- **A report is made to the facility administrator or designee to assure separation of the victim from his or her assailant.**

Comment: None.

Protocols: Written policy and procedure. Referral documents.

Process Indicators: Completed referral forms. Medical records. Classification records.

Inmate Death/Health Care Internal Review and Quality Assurance

1-CORE-4D-17 (Mandatory) (Ref. 4-ALDF-4D-23, 4D-24)
The health authority approves policies and procedures for identifying and evaluating major risk management events related to inmate health care, including inmate deaths, preventable adverse outcomes, and serious medication errors.

Comment: The medical examiner or coroner should be notified of the inmate's death immediately. A postmortem examination should be performed, according to the laws of the jurisdiction, if the cause of death is unknown, the death occurred under suspicious circumstances, or the inmate was not under current medical care. Reports can be facilitated by regular participation of the facility administrator, health administrator, and responsible physician. It is suggested that a physician act as the supervisor of the program. Evaluating data should result in more effective access, improved quality of care, and better utilization of resources.

Protocols: Written policy and procedure. Record review format.

Process Indicators: Documentation of completed record review. Quality improvement committee minutes. Quarterly report. Interviews.

Health Records

1-CORE-4D-18 (Ref. 4-ALDF-4D-26)
An individual health record is maintained for all inmates in accordance with policies and procedures established by the health authority and in accordance with applicable state and federal regulations. The method of recording entries in the records, the form and format of the records, and the procedures for their maintenance and safekeeping are approved by the health authority. The health record is made available to, and is used for documentation by all practitioners.

Comment: The receiving screening form should become a part of the record at the time of the first health encounter. Records may be maintained electronically. Examples of health

service reports include emergency department, dental, mental health, telemedicine, or other consultations.

Protocols: Policy and procedure. Health record forms.

Process Indicators: Health records. Completed forms. Interviews.

V. PROGRAM AND ACTIVITY

GOAL: Help inmates to successfully return to the community and reduce the negative effects of confinement.

PERFORMANCE STANDARD: Inmate Opportunities for Improvement

5A. Inmates have opportunities to improve themselves while confined.

EXPECTED PRACTICES

Programs and Services

1-CORE-5A-01 (Ref. 4-ALDF-5A-01)

Inmate programs, services and counseling are available. Community resources are used to supplement these programs and services.

Comment: None.

Protocols: Written policy and procedure. Facility program and activity schedule.

Process Indicators: Activity schedules. Facility logs. Inmate interviews. Observation.

PERFORMANCE STANDARD: Family and Community Ties

5B. Inmates maintain ties with their families and the community.

EXPECTED PRACTICES

Visiting

1-CORE-5B-01 (Ref. 4-ALDF-5B-01, 5B-02, 5B-03, 5B-04)

The number of visitors an inmate may receive and the length of visits are limited only by the facility's schedule, space, and personnel constraints or when there are substantial reasons to justify such limitations. Visitors are required to identify themselves and register on entry into the facility. Conditions under which visits may be denied and visitors may be searched are defined in writing. Provisions are made for special visits.

Comment: None.

Protocols: Written policy and procedure. Facility program, service plan and activity schedule. Staffing plan. Contracts for service.

Process Indicators: Activity schedules. Facility logs. Inmate interviews. Observation. Documentation of the identification and use of community resources. Review of contractual services. Program records. Inmate interviews.

Mail

1-CORE-5B-02 (Ref. 4-ALDF-5B-06, 5B-08, 5B-09)

Inmates may send and receive mail. Indigent inmates receive a specified postage allowance. Both incoming and outgoing mail may be opened to intercept cash, checks, and money orders and inspected for contraband. Mail is read, censored, or rejected when based on legitimate facility interests of order and security. Inmates are notified in writing when incoming or outgoing letters are withheld in part or in full. Staff, in the presence of the inmate, may be allowed to inspect outgoing privileged mail for contraband before it is sealed. Mail to inmates from this privileged class of persons and organizations may be opened only to inspect for contraband and only in the presence of the inmate, unless waived in writing, or in circumstances, which may indicate contamination.

Comment: Suspicious mail may include packages and letters unusual in appearance or which appear different from mail normally received or sent by the individual; packages and letters of a size or shape not customarily received or sent by the individual; packages and letters with a city and/or state postmark that is different from the return address; or packages and letters leaking, stained or emitting a strange or unusual odor, or which have a powdery residue.

Protocols: Written policy and procedure. Budget. Forms. Inmate handbook.

Process Indicators: Documentation of postage provided to indigent inmates. Mail logs and records. Documentation of justification for reading, censoring, or rejecting mail. Documentation that inmates are notified when mail is withheld. Staff and Inmate interviews. Observation.

Telephone

1-CORE-5B-03 (Ref. 4-ALDF-5B-11)

Inmates are provided with access to telephones.

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications.

Process Indicators: Observation. Inmate interviews. Documentation of inmate access to telephones.

Release

1-CORE-5B-04 (Ref. 4-ALDF-5B-18)

Procedures for releasing inmates from the facility include, but are not limited to, the following:

- identification of outstanding warrants, wants, or detainers
- verification of identity
- verification of release papers
- completion of release arrangements, including notification of the parole authorities in the jurisdiction of release, if required
- return of personal property
- provision of a listing of available community resources
- provision of medication as directed by the health authority

Comment: None.

Protocols: Written policy and procedure. Release forms and procedures.

Process Indicators: Completed release forms and documents. Facility records and logs. Inmate records. Observation.

PERFORMANCE STANDARD: Programs

5C. The negative impact of confinement is reduced.

EXPECTED PRACTICES

Exercise and Recreation Access

1-CORE-5C-01 (Ref. 4-ALDF-5C-01, 5C-02)

Inmates have access to exercise and recreation opportunities. When available, at least one hour daily is outside the cell or outdoors.

In cases where cover is not provided to mitigate the inclement weather, appropriate weather-related equipment and attire should be made available to the inmates who desire to take advantage of their authorized exercise time.

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications. Schedules.

Process Indicators: Observation. Measurement. Facility logs and activity records.

Outdoor and Covered/Enclosed Recreation Area

1-CORE-5C-01 (Ref. 4-ALDF-5C-03)

Both outdoor and covered/enclosed exercise areas for general population inmates are provided in sufficient number to ensure that each inmate is offered at least one hour of access daily. Use of outdoor areas is preferred, but covered/enclosed are available for use in inclement weather.

Covered/enclosed areas may be designed for multiple uses as long as the design and furnishings do not interfere with scheduled exercise activities.

The minimum space requirements for exercise areas are as follows:

- **Outdoor exercise areas in facilities where 100 or more inmates utilize one recreation area – 15 square feet per inmate for the maximum number of inmates expected to use the space at one time, but not less than 1,500 square feet of unencumbered space**
- **Outdoor exercise areas in facilities where less than 100 inmates have unlimited access to an individual recreation area – 15 square feet per inmate for the maximum number of inmates expected to use the space at one time, but not less than 750 square feet of unencumbered space**
- **Covered/enclosed exercise areas in facilities where 100 or more inmates utilize one recreation area have 15 square feet per inmate for the maximum number of inmates expected to use the space at one time, but not less than 1,000 square feet of unencumbered space**
- **Covered/enclosed exercise areas in facilities where less than 100 inmates utilize one recreation area have 15 square feet per inmate for the maximum number of inmates expected to use the space at one time, but not less than 500 square feet of unencumbered space.**

Comment: Exercise/recreation spaces are not the same as dayrooms, although dayrooms can provide added opportunities for some exercise and recreation activities. The standard establishes performance requirements for exercise spaces, offering design and operational flexibility. It allows facilities in some climates to cover and/or enclose a yard, while others will have to provide indoor space. These spaces do not have to be “indoors” but must be fully functional when the outdoor areas are not feasible for use.

Protocols: Written policy and procedure. Facility plans/specifications. Schedules.

Process Indicators: Observation. Measurement. Facility logs and activity records.

Segregated Inmates

1-CORE-5C-03 (Ref. 4-ALDF-5C-04)

Segregated inmates have access to both outdoor and covered/enclosed exercise areas. The minimum space requirements for outdoor and covered/enclosed exercise areas for segregation units are as follows:

- **Group yard modules– 15 square feet per inmate expected to use the space at one time, but not less than 500 square feet of unencumbered space**
- **Individual yard modules– 180 square feet of unencumbered space**

In cases where cover is not provided to mitigate the inclement weather, appropriate weather-related equipment and attire should be made available to the inmates who desire to take advantage of their authorized exercise time.

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications. Schedules.

Process Indicators: Observation. Measurement. Facility logs and activity records.

Library Services

**1-CORE-5C-04 (Ref. 4-ALDF-5C-05)
Library services are available to inmates.**

Comment: None.

Protocols: Written policy and procedure. Activity schedule.

Process Indicators: Observation. Inmate interviews. Qualifications of staff member.

Work and Correctional Industries

**1-CORE-5C-05 (Mandatory) (Ref. 4-ALDF-5C-11)
Inmate working conditions comply with all applicable federal, state, or local work safety laws and regulations.**

Comment: None.

Protocols: Written policy and procedure. Applicable laws and regulations.

Process Indicators: External inspection reports, completed forms, including documentation that identified deficiencies were corrected. Work records. Inmate and staff interviews.

Religious Programs

**1-CORE-5C-06 (Ref. 4-ALDF-5C-17)
Inmates have the opportunity to participate in practices of their religious faith consistent with existing state and federal statutes.**

Comment: None.

Protocols: Written policy and procedure.

Process Indicators: Documentation of inmate religious activities. Documentation of reasons for limitations. Chaplain interviews. Inmate interviews.

Commissary/Canteen

1-CORE-5C-07 (Ref. 4-ALDF-5C-25)

An inmate commissary or canteen may be available from which inmates can purchase approved items that are not furnished by the facility. The commissary/canteen's operations are strictly controlled using standard accounting procedures

Comment: None.

Protocols: Written policy and procedure. Commissary forms and formats. Fiscal procedures. Budgets.

Process Indicators: Commissary records. Budgets.

VI. JUSTICE

GOAL: Treat inmates fairly and respect their legal rights. Provide services that hold inmates accountable for their actions, and encourage them to make restitution to their victims and the community.

PERFORMANCE STANDARD: Inmate rights

6A. Inmates' rights are not violated.

EXPECTED PRACTICES

Access to Courts

1-CORE-6A-01 (Ref. 4-ALDF-6A-01)

The right of inmates to have access to courts is ensured.

Comment: None.

Protocols: Written policy and procedure.

Process Indicators: Facility logs. Inmate interviews. Attorney interviews.

Access to Counsel

1-CORE-6A-02 (Ref. 4-ALDF-6A-02)

Inmate access to counsel is ensured. Such contact includes, but is not limited to, telephone communications, uncensored correspondence, and visits.

Comment: None.

Protocols: Written policy and procedure.

Process Indicators: Inmate interviews. Facility log. Attorney interviews. Observation.

Access to Legal Materials

1-CORE-6A-03 (Ref. 4-ALDF-6A-03)

Inmates have access to legal materials.

Comment: None.

Protocols: Written policy and procedure. Legal assistance/resources plan.

Process Indicators: Observation. Facility logs. Inmate interviews.

Communications/Telephone

1-CORE-6A-04 (Ref. 4-ALDF-6A-05)

New inmates are allowed the opportunity to complete at least one telephone call during the admission process and are assisted, as needed, to notify persons of their admission to custody.

Comment: None.

Protocols: Written policy and procedure.

Process Indicators: Observation. Intake records. Inmate interviews.

Foreign Nationals

1-CORE-6A-05 (Ref. 4-ALDF-6A-06)

Foreign nationals have access to the diplomatic representative of their country of citizenship.

Comment: None.

Protocols: Written policy and procedure.

Process Indicators: Inmate interviews. Staff interviews.

Protection from Abuse

1-CORE-6A-06 (Mandatory) (Ref. 4-ALDF-6A-07)
Inmates are not subjected to personal abuse, corporal punishment, personal injury, disease, property damage or harassment.

Comment: None.

Protocols: Written policy and procedure. Training curricula.

Process Indicators: Facility logs. Incident reports. Inmate interviews. Staff training records.

Grooming

1-CORE-6A-07 (Ref. 4-ALDF-6A-08)
Inmates are allowed freedom in personal grooming except when a valid governmental interest justifies otherwise.

Comment: None.

Protocols: Written policy and procedure. Grooming regulations. Inmate handbook.

Process Indicators: Documentation of instances in which personal grooming choices were denied. Observation. Inmate interviews.

Indigence

1-CORE-6A-08 (Ref. 4-ALDF-6A-09)
An indigent inmate's access to health care, programs, services and activities is not precluded by inability to pay.

Comment: None.

Protocols: Written policy and procedure. Definition of indigence.

Process Indicators: Inmate interviews. Records and logs. Inmate accounts.

PERFORMANCE STANDARD: Fair Treatment of Inmates

6B. Inmates are treated fairly.

EXPECTED PRACTICES

Grievance Procedure

1-CORE-6B-01 (Ref. 4-ALDF-6B-01)
An inmate grievance procedure is made available to all inmates and includes at least one level of appeal.

Comment: None.

Protocols: Written policy and procedure. Grievance procedure. Inmate handbook.
Process Indicators: Grievance records. Inmate interviews.

Discrimination

1-CORE-6B-02 (Ref. 4-ALDF-6B-02, 6B-03)

There is no discrimination regarding administrative decisions or program access based on an inmate's race, religion, national origin, gender, sexual orientation, or disability. When both males and females are housed in the same facility, available services and programs are comparable.

Comment: None.

Protocols: Written policy and procedure. Program and service descriptions and eligibility requirements. Inmate handbook.

Process Indicators: Inmate interviews. Facility records. Grievances. activity logs. Program records. Staff and inmate interviews.

Disabled Inmates

1-CORE-6B-03 (Ref. 4-ALDF-6B-04)

Inmates with disabilities, including temporary disabilities, are housed and managed in a manner that provides for their safety and security. Housing used by inmates with disabilities, including temporary disabilities, is designed for their use and provides for integration with other inmates. Program and service areas are accessible to inmates with disabilities.

Comment: Temporary disabilities are conditions that can be treated with an expectation of healing. Temporary disabilities are not the result of chronic conditions, are short-term in nature and resolve over time.

Protocols: Written policy/procedure. Facility plans/specifications.

Process Indicators: Inmate records. Observation. Interviews. Inmate health records.

PERFORMANCE STANDARD: Due Process for inmates

6C. Alleged rule violations are handled in a manner that provides inmates with appropriate procedural safeguards.

EXPECTED PRACTICES

Inmate Discipline

Written Guidelines

1-CORE-6C-01 (Ref. 4-ALDF-6C-01)

There are written guidelines for resolving minor inmate infractions. Serious infractions are handled consistent with the requirements for limited due process.

Comment: None.

Protocols: Written policy and procedure. Disciplinary guidelines.

Process Indicators: None.

Disciplinary Report

1-CORE-6C-02 (Ref. 4-ALDF-6C-03)

When rule violations require formal resolutions, a staff member prepares a disciplinary report that describes the alleged violation and forwards it to the designated supervisor.

Comment: None.

Protocols: Written policy and procedure. Disciplinary forms.

Process Indicators: Completed disciplinary forms. Inmate records.

Written Statement

1-CORE-6C-03 (Ref. 4-ALDF-6C-07, 6C-11)

An inmate charged with a rule violation receives a written statement of the charge(s), including a description of the incident and specific rules violated. The inmate is given the statement at the same time the disciplinary report is filed with the disciplinary committee but no less than 24 hours prior to the disciplinary hearing. The hearing, conducted by an impartial person or panel of persons, may only be held in less than 24 hours, with the inmate's written consent. A record of the proceedings is made and retained.

Comment: None.

Protocols: Written policy and procedure. Disciplinary forms.

Process Indicators: Disciplinary records. Inmate records.

Hearing

1-CORE-6C-04 (Ref. 4-ALDF-6C-08, 6C-18)

An inmate charged with rule violations is present at the hearing, unless the inmate waives that right in writing or through behavior. An inmate may be excluded during testimony. An inmate's absence or exclusion is documented. Inmates have an opportunity to appeal disciplinary decisions.

Comment: None.

Protocols: Written policy and procedure. Waiver form.

Process Indicators: Disciplinary records. Inmate records. Documentation of absence. Inmate interviews. Staff interviews.

VII. ADMINISTRATION AND MANAGEMENT

GOAL: Administer and manage the facility in a professional and responsible manner, consistent with legal requirements.

PERFORMANCE STANDARD: Recruitment, Retention, and Promotion

7B. Staff, contractors, and volunteers demonstrate competency in their assigned duties.

EXPECTED PRACTICES

Selection, Retention and Promotion

1-CORE-7B-01 (Ref. 4-ALDF-7B-03)

A criminal record check is conducted on all new employees, contractors, and volunteers prior to their assuming duties to identify if there are criminal convictions that have a specific relationship to job performance. This record check includes comprehensive identifier information to be collected and run against law enforcement indices. If suspect information on matters with potential terrorism connections is returned on a desirable applicant, it is forwarded to the local Joint Terrorism Task Force (JTTF) or another similar agency.

Comment: None.

Protocols: Written policy and procedure.

Process Indicators: Personnel records.

Training and Staff Development

1-CORE-7B-02 (Ref. 4-ALDF-7B-05)

Prior to assuming duties, each employee is provided with an orientation, which may include:

- working conditions
- code of ethics
- personnel policy manual
- employees' rights and responsibilities
- overview of the criminal justice system
- tour of the facility
- facility goals and objectives
- facility organization
- staff rules and regulations
- personnel policies
- program overview

Comment: Orientation is distinct from training because it acquaints personnel with the setting in which they will be working but does not necessarily address the knowledge, skills, and abilities needed to implement assigned duties.

Protocols: Written policy and procedure. Orientation materials and schedule.

Process Indicators: Personnel records. Staff interviews.

Annual Training

1-CORE-7B-03 (Ref. 4-ALDF-7B-08)

All professional, support, clerical, and health care employees, including contractors, receive continuing annual training, which may include:

- security procedures and regulations
- supervision of inmates
- signs of suicide risk
- suicide precautions
- use-of-force regulations and tactics
- report writing
- inmate rules and regulations
- key control
- rights and responsibilities of inmates
- safety procedures
- all emergency plans and procedures
- interpersonal relations
- social/cultural lifestyles of the inmate population
- cultural diversity

- **CPR/first aid**
- **counseling techniques**
- **sexual harassment/sexual misconduct awareness**
- **purpose, goals, policies, and procedures for the facility and parent agency**
- **security and contraband regulations**
- **appropriate conduct with inmates**
- **responsibilities and rights of employees**
- **universal precautions**
- **occupational exposure**
- **personal protective equipment**
- **bio-hazardous waste disposal**
- **overview of the correctional field**

Comment: None.

Protocols: Written policy and procedure. Job descriptions. Training curriculum. Training record forms and formats.

Process Indicators: Personnel records. Training records.

Training Prior to Assuming Duties

1-CORE-7B-04 (Ref. 4-ALDF-7B-10)

Prior to assuming duties, all correctional officers receive training in the facility under the supervision of a qualified officer. Training may include:

- **facility policies and procedures**
- **suicide prevention**
- **use of force**
- **report writing**
- **inmate rules and regulations**
- **key control**
- **emergency plans and procedures**
- **cultural diversity**
- **communication skills**
- **cardiopulmonary resuscitation (CPR)/first aid**
- **sexual misconduct**

Comment: These training requirements apply to all correctional officers, whether they are full-time or part-time.

Protocols: Written policy and procedure. Job descriptions. Training curriculum. Training record forms and formats.

Process Indicators: Personnel records. Training records.

In-Service Training

1-CORE-7B-05 (Ref. 4-ALDF-7B-10-1)

In each subsequent year of employment correctional officers receive documented in-service training in critical areas of the operation.

Comment: This training will enable employees to sharpen skills, maintain certification and keep abreast of changes in policies, procedures, and legislation, judicial, or executive sessions.

Protocols: Written policy and procedure. Job descriptions. Training curriculum. Training record forms and formats.

Process Indicators: Personnel records. Training records.

Weapons Training

1-CORE-7B-06 (Mandatory) (Ref. 4-ALDF-7B-15)

All personnel authorized to use firearms and less-lethal weapons must demonstrate competency in their use at least annually. Training includes decontamination procedures for individuals exposed to chemical agents.

Comment: None

Protocols: Written policy and procedure. Job descriptions. Training curriculum. Training record forms and formats.

Process Indicators: Personnel records. Training records.

PERFORMANCE STANDARD: Facility Administration

7D. The facility is administered efficiently and responsibly.

EXPECTED PRACTICES

Organization

1-CORE-7D-01 (Ref. 4-ALDF-7D-06, 7D-08)

Written policies and procedures describe all facets of facility operation, maintenance, and administration, are reviewed annually and updated as needed. New or revised policies and procedures are disseminated to staff, and, where appropriate, to contractors, volunteers, and inmates, prior to implementation.

Comment: None.

Protocols: Written policy and procedure. Policy and procedure manual. Distribution lists. Dissemination plan.

Process Indicators: Documentation of annual review. Documentation of timely dissemination.

Financial Practices

1-CORE-7D-02 (Ref. 4-ALDF-7D-10)

The facility administrator prepares and submits an annual budget that requests necessary resources for facility operations and programs.

Comment: None.

Protocols: Written policy and procedure. Budget.

Process Indicators: Staff interviews.

Inmate Funds

1-CORE-7D-03 (Ref. 4-ALDF-7D-16)

Procedures govern the operation of any fund established for inmates. Any interest earned on monies, other than operating funds, accrues to the benefit of the inmates.

Comment: None.

Protocols: Written policy and procedure. Budgets.

Process Indicators: Inmate records. Financial records. Budgets.

Inmate Records

1-CORE-7D-04 (Ref. 4-ALDF-7D-20)

The facility maintains custody records on all inmates committed or assigned to the facility, which include but are not limited to the following:

- **intake/booking information**
- **court-generated background information**
- **cash and property receipts**
- **reports of disciplinary actions, grievances, incidents, or crime(s) committed while in custody**
- **disposition of court hearings**
- **records of program participation**
- **work assignments**
- **classification records**

Inmates have reasonable access to information in their records. Access is only limited due to safety or security concerns for the inmate, other

inmates, or the facility. The contents of inmate records are identified and separated according to a format approved by the facility administrator.

Comment: None.

Protocols: Written policy and procedure. Forms. File organization format.

Process Indicators: Inmate records and files.

PERFORMANCE STANDARD: Staff Treatment

7E. Staff are treated fairly.

EXPECTED PRACTICES

Facility and Equipment

1-CORE-7E-01 (Ref. 4-ALDF-7E-05)

Reasonable accommodation is made to ensure that all parts of the facility that are accessible to the public are accessible and usable by staff and visitors with disabilities.

Comment: None.

Protocols: Written policy and procedure. Facility plans/specifications.

Process Indicators: Observation.

American Correctional Association

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