

# POLICY AND PROCEDURES

NUMBER: 904

SUBJECT: Infirmary Housing

ACA STANDARDS: 4-ALDF-2A-34, 44; 4C-11; 6B-07

INTERIM DIRECTOR: *Lt. Col. Troy Doyle*

EFFECTIVE DATE: 9/97 REVISION DATE: 6/98, 3/00, 8/04,  
5/06, 11/12, 6/13, 1/19, 7/19



## I. POLICY

The St. Louis County Department of Justice Services, in cooperation with the Department of Health shall manage an Infirmary to provide medical and psychiatric care for inmates.

## II. RESPONSIBILITIES

All St. Louis County Department of Justice Services' Corrections staff, Social Services staff, Corrections Medicine staff and the Mental Health Team are responsible for the following procedures.

## III. Definitions

**Mental Health Team:** Any psychiatrist, psychologist, clinical social worker and corrections medicine staff trained in Mental Health.

## IV. PROCEDURES

A. Inmates will only be admitted to the Infirmary by the following providers:

1. The medical doctor(s)
2. The psychologist(s)
3. The psychiatrist(s).

4. The Corrections Medicine Manager or the lead nurse of a shift will contact the appropriate provider on call to obtain the necessary orders at times when the providers are not physically present.
5. In an emergency situation when the inmate is actively trying to hurt himself/herself or others, the Watch Commander/designee may place an inmate in the Special Needs Cell, which is located in the Infirmary.

**NOTE:** Every effort will be made to contact the Corrections Medicine staff to advise them of the emergency. The Corrections Medicine staff will inform a member of the Mental Health Team of the situation.

6. The Watch Commander can authorize lockdown inmates that are precautionary risk to the infirmary as well as inmates housed for intermittent incarceration if the jail is at capacity.

B. Inmates will only be released from the Infirmary by the following providers:

1. The medical doctor(s)
2. The psychiatrist(s)
3. The psychologist(s) (may release an inmate from the infirmary with consultation with the psychiatrist or if the psychiatrist(s) is on personal leave.)
4. The Corrections Medicine Manager or the lead nurse of a shift will contact the appropriate provider on call to obtain the necessary orders at times when the providers are not physically present.
5. The Watch Commander can place a lockdown inmate who is precautionary risk back in population as well as place an inmate housed on intermittent incarceration in population as space becomes available.

**NOTE:** *If an inmate is released by the appropriate Corrections Medicine staff and the Watch Commander has concerns about the inmate being housed in a direct or indirect housing unit, the Watch Commander is authorized to have that inmate remain in the infirmary for up to 24 hours as an observation period and/or until the inmate is cleared after assessment by a medical doctor. The Watch Commander will document in the Watch Commander Report the reason(s) for the infirmary classification.*

- C. The medical doctor(s) and the mental health doctor(s) will make rounds daily in the Infirmary on weekdays and write notes on contacts in the inmate's medical records. After hours and weekend coverage will be conducted on an on-call basis.
- D. The Corrections Medicine staff will inform the providers of significant changes in the medical/mental status of inmates as conditions require.
- E. The Infirmary will be equipped with:

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- 4. (9) medical rooms
  - 5. (14) mental health rooms
  - 6. (1) Corrections Medicine and Corrections Officer station with twenty-four (24) hour staffing (Corrections Medicine staff, Infirmary Officer and Suicide Prevention Officer.
  - 7. (1) medicine preparation room
  - 8. (1) tub room
  - 9. (1) dayroom for inmates with mental health problems
  - 10. (1) dayroom for inmates with medical problems
  - 11. (3) offices
  - 12. (3) visiting booths.
- F. The Corrections Medicine staff will see each inmate in the Infirmary at least once every shift or as necessary.
  - G. A medical record will be maintained for each inmate and an entry made by the Corrections Medicine staff at least once each shift or more frequently as necessary.

- H. Special instructions concerning inmates housed in the Infirmary will be noted and made available to staff assigned to the Infirmary.
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- J. When the Infirmary is full and another inmate must be admitted to the Infirmary, the Corrections Medicine staff will consult the Infirmary Bed Status Report to see which inmate may be reclassified to another housing unit.
- K. When an inmate is admitted to the infirmary for any reason, all food commissary items are to be removed from the inmates possession, marked in a bag with the inmates name, and placed in the storage closet. Inmates housed in the infirmary are not allowed to possess or order food commissary items.
- L. All basic rights and privileges, with the exception of the use of the recreation areas, will be granted to inmates in the Infirmary under the same conditions as the general population, such as:
1. Commissary Items (not to include food items)  
  
**NOTE:** Inmates housed in the infirmary will not be allowed to possess or obtain food products from the commissary. The commissary order form for the infirmary does not include any food products.
  2. Telephone access
  3. Visiting privileges (legal, religious and the public)
  4. Television viewing
  5. Hygiene, including access to a barber and showers  
  
**NOTE:** Inmates housed in the Mental Health Infirmary will not be allowed to purchase or have access to a razor. These inmates will be given access to an inmate barber for beard trimming and shaving at least (3) times a week on the second shift under the supervision of a Corrections Officer.
  6. Housing unit incentives

M. Any limitations of privileges, programs or services for inmates in the Infirmary will be for disciplinary measures, space considerations or the safety and security of the institution/staff and inmates or clinically justified by a medical/mental health provider. For example:

1. Inmates will be escorted by the Housing Unit Officer to and from visiting and offices.
2. Efforts will be made to allow inmates to use the day room and interact with each other within the mental health side or the medical side of the Infirmary. The Corrections Case Manager will decide whether inmates will be allowed to use their designated dayroom together or separately. An inmate's behavior, conflicts, custody level and medical/surgical/psychiatric condition, along with feedback from the Housing Unit Officers and Corrections Medicine staff, will assist in making the determination.
3. Certain classifications of inmates will only be allowed to use the day room together:

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b. Female inmates

**NOTE:** Due to the inmate's behavior, etc., these inmates may only be allowed to use the day room separately.

4. When activities such as passing out meal trays, clothing and linen exchange and medication distribution are conducted, inmates access to the day room may be restricted when deemed necessary by the Corrections Officer on the post.
5. An inmate worker will be assigned to the Infirmary to launder the inmate's personal clothes and to assist the Infirmary Officer in exchanging the clothing and linen and distributing meals, as needed. This inmate will also be responsible for cleaning the hallways and day rooms.
6. If an inmate uses the dayroom individually, the inmate's cell door may remain unlocked.

- N. All inmates will be expected to follow the rules and regulations of the St. Louis County Department of Justice Services. (See Policy #1804 rules and Discipline) Failure to do so will result in disciplinary proceedings.
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- P. All inmates who are physically and mentally able, are responsible for keeping their cells clean. Inmates who are unable to keep their cells clean, will have their cells straightened by Corrections Medicine staff and cleaned by inmate worker who is observed by staff or Department of Health staff if there is a contagious disease present. Any inmate using the dayroom is responsible for keeping the dayroom in order.
- Q. Portions of this record are closed pursuant to Section 610.021 (19) or (21) RSMo and Section 114.020 (18) or (20) SLCRO because public disclosure of such portions would threaten public safety by compromising the safe and secure operation of the Jail, and the public interest in nondisclosure outweighs the public interest in disclosure of the portions of such records.
- R. The Infirmary Officer will:
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  2. Portions of this record are closed pursuant to Section 610.021 (19) or (21) RSMo and Section 114.020 (18) or (20) SLCRO because public disclosure of such portions would threaten public safety by compromising the safe and secure operation of the Jail, and the public interest in nondisclosure outweighs the public interest in disclosure of the portions of such records.

**NOTE:** All inmates will be observed during the tours, but certain inmates housed in the Infirmary may require more frequent observation, due to medical and/or psychiatric needs. (See Policy

#906 Suicide Prevention and Response, and/or Policy #907 Use of Special Needs Cell)

3. Log all tours in JMS
4. Physically check all doors to ensure each door is locked.

**NOTE:** All doors in the Infirmary must be closed manually.

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6. Issue meals, clothing, linen, mail and commissary (excluding food items) to inmates.
7. Inspect the cells, dayrooms and hallways for cleanliness.
8. Escort Department of Justice Services staff and Corrections Medicine staff as necessary
9. Refer to the Housing Unit Supervision Policy #830 and Infirmary Officer post orders for further information.

S. The Suicide Prevention Officer will:

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T. The Infirmary Corrections Case Manager will:

1. Tour the Infirmary daily.
2. Review all inmate files and reports.
3. Check with Corrections Medicine staff daily to determine when reclassification is appropriate for inmates in the medical Infirmary.

4. Check with the Mental Health Team and Corrections Medicine staff daily to determine when reclassification is appropriate for inmates in the mental health Infirmary.
5. Receive feedback from the Housing Unit Officer in determining the possible reclassification of inmate within the Infirmary.
6. Ensure each inmate receives privileges according to the inmate's custody level
7. Consult with Mental Health Team, Corrections Medicine to determine if any inmate in the mental health Infirmary will need an assisted release upon being released from the Justice Center. The Infirmary Caseworker will complete all necessary paperwork.
8. Answer questions and review court concerns of the inmates.
9. Refer to the job description for further information on additional responsibilities.