



PRISONERS REQUIRING MEDICAL CARE

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I. PURPOSE

To provide guidance to sworn members of Department of General Services Maryland Capitol Police (DGS-MCP) when handling prisoners who require medical care.

II. POLICY

The Maryland Capitol Police will promptly provide help for prisoners needing medical care and ensure the safety of medical personnel and the public during the treatment.

III. PROCEDURES

A. GENERAL PROCEDURES

1. When a prisoner is sick or injured, the arresting officer will immediately call for assistance and arrange for appropriate medical treatment.
 - a. The officer may request an ambulance or transport the person himself if appropriate.
 - b. No prisoner may be transported in a prone position while restrained.
2. Under no circumstances will an unconscious prisoner be placed, or allowed to remain on a DGS owned or managed facility without medical treatment, even though the prisoner's condition may have been caused by intoxicants.
3. The MCP does not assume financial responsibility for medical treatment of prisoners.
4. Pursuant to state law obligations incurred for medical services of persons in custody are assumed either by the patient or the county having jurisdiction.

B. FIREARMS

1. Properly identified sworn officers are permitted by state law to wear a firearm while guarding patients in a hospital or medical treatment facility.

2. MCP sworn personnel will be mindful of officer safety and gun retention at all times.
3. Handgun lockers at hospitals may be used at the officer's discretion.
4. An officer entering a secure psychiatric unit will secure his firearm in a weapon locker at the facility or secure his firearm in his vehicle prior to entering the secure area of the facility.

C. TRANSPORT OF PRISONERS BY AMBULANCE

1. An officer will ride in the back of ambulance with the prisoner to maintain security of the prisoner while in transit unless riding in the ambulance is impractical or impossible.
 - a. If an officer rides in the ambulance, the shift supervisor will arrange for his vehicle to be transported to the hospital or another appropriate location.
 - b. If an officer does not ride in the ambulance, the prisoner will be physically secured in the ambulance and the officer will follow the ambulance to the hospital.
2. If a prisoner is to be transported by ambulance, the arresting officer will notify the shift supervisor.
3. Restraining devices will be used during transport:
 - a. The arresting officer will ensure that a prisoner is restrained by at least one restraining device (e.g., handcuffs, leg irons).
 - b. Flex-cuffs will be used only when other devices are unavailable or when medical personnel request their use.
 - c. If the officer believes that it will be safe to do so, the prisoner may be handcuffed to the ambulance stretcher if requested by EMS personnel.
 - d. The officer will decide which type of restraints to use with input from EMS providers and consideration of the situation and the extent of injuries or nature of the illness.
4. Upon being notified of a prisoner being transported to the hospital, the shift supervisor will:
 - a. Dispatch a second officer to assist in guarding the prisoner at the hospital; and
 - d. Contact the hospital's security office to notify them of the transport and, if available, provide the prisoner's name, any special security or health concerns and the contact information for the shift supervisor.
 - c. Notify the Detachment Commander of the circumstances of the arrest and transport.

D. SECURITY OF ADMITTED PRISONERS:

1. When a prisoner is admitted to a hospital, the arresting officer will immediately notify the shift supervisor the prisoner's room number.
2. The Detachment Commander will be responsible for ensuring at least two sworn officers guard the prisoner at all times unless this requirement has been modified by the Chief of Police or his designee.
 - a. One of the two officers assigned to the hospital detail will be the same sex as the arrested person if possible.
 - d. Both of the officers assigned should be in uniform.
 - c. If non-uniformed officers are needed to temporarily guard a prisoner, they will ensure their badges and identification cards are displayed in plain view.
3. As soon as possible after hospitalization, the Detachment Commander will contact the State's Attorney's Office to determine whether the prisoner should be considered for bond reduction or release if being held on an active warrant.
4. If a prisoner is detained on pending criminal charges, the Detachment Commander will contact the District Court Commissioner's Office to arrange for an off-site Initial Appearance Hearing.

E. HOSPITAL PROCEDURES

1. Prisoners will be supervised and secured with proper restraints at all times in any area of the hospital.
 - a. Leg irons and handcuffs will be used to restrain a prisoner unless the attending physician requests other devices be used which will not interfere with patient care.
 - b. Flex cuffs may be required in certain areas (e.g., radiology) where the use of metal restraints could conflict with patient care.
 - c. All prisoners, regardless of security status, will be secured to the bed by at least one arm and one leg unless prohibited in writing by the physician.
2. Officers will determine if they have clear radio communications with the Detachment in the area of the hospital.
 - a. If the officers do not have radio communications, they will notify the Shift Supervisor and identify a phone number where they can be contacted.

- b. The officers will contact hospital security and request the use of a hospital radio while guarding the prisoner in that facility.
3. Officers will search the hospital room and the prisoner before and after all room changes, movements within the hospital facility and during shift changes.
4. Officers assigned to the prisoner detail will remain in the prisoner's room at all times unless the treating physician requests that the officers exit the room (e.g., for an examination).
5. If the officers must leave the room, they will remain immediately outside the doorway of the prisoner's room.
6. Officers will not use any devices or cellphones for non-work related matters that will distract them from the constant monitoring of the prisoner and will remain alert at all times.
7. The officers will comply with the hospital rules unless those regulations interfere with securing the prisoner.
 - a. If hospital orders interfere with appropriate security measures, the officer will notify the Shift Supervisor immediately.
 - b. The Shift Supervisor will resolve the conflict after consulting with the hospital staff and its security office.
8. If the prisoner needs additional care in another area of the hospital, officers will accompany the hospital staff on all movements and notify hospital security prior to any movement.
 - a. During prisoner movements within the hospital, the prisoner will be secured with leg irons and handcuffs.
9. When an officer must leave the immediate area of the prisoner for relief or another matter of short duration, they will request a hospital security officer respond to assist the other officer with security.
 - a. Such reliefs will be kept to a minimum and will not extend for more than a few minutes.
 - b. If an absence of a more extended period of time is required, the officer will notify the Shift Supervisor and arrange for another officer to respond.
 - c. Hospital security officers will never be left as sole persons guarding a prisoner.
10. If a prisoner becomes violent or disruptive, officers will use the appropriate amount of force consistent with MCP policy.
 - a. OC should generally not be used as it may contaminate the medical facility.

F. PRISONER RESTROOM USAGE

1. At least one officer of the same sex will escort a prisoner, who is restrained with at least leg shackles, into a restroom if the officer feels it is safe to do so.
2. If leg shackles are not available, officers may request a portable commode chair to be delivered to the prisoner's room for the prisoner to use to minimize risk at the discretion of the assigned officers.
3. When used, the portable commode chair will be placed next to the bed and the prisoner's arm will remain handcuffed to the bed during use; and/or legs will be secured together with leg irons if available.

G. TELEPHONE USE

1. Officers will request that hospital phone service to a prisoners' room is disconnected.
2. If the phone cannot be removed or disconnected, the officers will answer all incoming telephone calls.
3. Cell phones in the possession of the prisoner will be taken by the officer, turned off and stored in accordance with MCP policy; prisoners may not retain or use personal cell phones while in the hospital.
4. The prisoner will not be allowed to receive any calls unless authorized by the Detachment Commander.

H. VISITORS & VISITING PROCEDURES

1. Other than the prisoner's attorney, prisoners will not be permitted to have visitors except in extraordinary circumstances.
2. The Detachment Commander may approve a visit after consultation with hospital staff and the Chief of Police or designee.
 - a. Hospital security will be advised of all approved visits.
 - b. Authorized visits will be consistent with hospital policy and procedure.
 - c. Visits will be limited to one adult visitor at a time.
 - d. Visitors will provide photo identification and will submit to a wanted check and search of their person and belongings prior to entering the prisoner's room.
3. Officers will ensure that no person other than hospital staff or the prisoner's attorney communicates with the prisoner without the consent of the Detachment Commander.

I. RELEASE OF PRISONER FROM THE HOSPITAL

1. When a prisoner is released from a hospital, hospital security will be notified.
2. The officers guarding the prisoner will notify the Shift Supervisor prior to the transport of a prisoner to the appropriate booking or detention facility.
3. If a prisoner's custody status should change while inside the hospital, (e.g., released on bond or on own recognizance) the officers guarding the prisoner must first notify the hospital staff treating the prisoner and hospital security prior to removing the prisoner's restraints and before leaving the hospital.

J. FINANCIAL RESPONSIBILITIES

1. The MCP does not assume financial responsibility for medical treatment of prisoners.
2. Pursuant to state law obligations incurred for medical services of persons in custody are assumed either by the patient or the county having jurisdiction.
3. Claims submitted to the MCP will be referred to the Assistant Attorney General assigned to DGS.