

GENERAL ORDER



DISTRICT OF COLUMBIA

Title		
Medical Treatment and Hospitalization of Prisoners		
Topic	Series	Number
PCA	502	07
Effective Date		
April 1, 2014		
Replaces:		
General Order 502.07 (Medical Treatment and Hospitalization of Prisoners), Effective Date February 16, 2011		
Related to:		
GO-OPS-308.11 (Handling Fire/EMS Incidents)		
GO-PCR-502.01 (Transportation and Searches of Prisoners)		
Standard Operating Procedure (Holding Facilities)		

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I. POLICY

It is the policy of the Metropolitan Police Department (MPD) to provide prisoners who have sustained an injury or report an illness with timely medical care to ensure their safety and well being.

II. DEFINITIONS

1. Central Cellblock (CCB) – area designated within MPD Headquarters where prisoners are fingerprinted, photographed, and detained pending arraignment. This facility is operated and maintained by the District of Columbia (D.C.) Department of Corrections (DOC).
2. Crime of Violence – any offense listed under D.C. Official Code § 23-1331(4)] as of April 26, 2013 or later.

3. Station Cellblock – area designated within police stations where prisoners are fingerprinted, photographed, and detained pending arraignment.
4. Member – sworn or civilian MPD employee or MPD Reserve Corps member.
5. Official – member of the MPD the rank of sergeant or above or the civilian equivalent.
6. Papering – initial presentation of a member’s case to the prosecuting attorney.
7. Prisoner – person who has been arrested and is being held, transported, treated, booked, or otherwise detained pending arraignment, release, adjudication, transfer to another facility, or is otherwise being processed.
8. Security Risk Prisoner - a prisoner who poses a threat to him/herself, the facility in which he/she is being held, or to others with whom the prisoner may come into contact.

III. REGULATIONS

- A. Members shall transport prisoners who complain of illness or injury to a hospital in accordance with the procedures outlined in this order.
- B. Members shall prepare a PD Form 313 (Arrestee’s Injury/Illness Report) as soon as possible after a prisoner complains of illness or injury.
- C. Members shall not delay transporting a prisoner to a hospital in order to complete a PD Form 313.
- D. Members shall remain alert and keep prisoners under physical control and in view at all times.
 1. Members shall physically hold onto prisoners while escorting them from one location to another within a hospital, including to or from a treatment room, until they have been secured.
 2. Members shall make every effort to ensure prisoners remain secured at all times to prevent escape. At a minimum, one leg or arm shall be secured to a fixed object except at the

request of the hospital staff under exigent circumstances when restraint would impede medical treatment.

- E. While in the hospital, members shall not allow prisoners to:
 - 1. Have visitors without the approval of their watch commander;
 - 2. Watch television; or
 - 3. Use the telephone.
- F. Watch commanders shall determine if seriously injured or ill suspects at hospitals need to be placed under arrest or placed under guard (e.g., a suspect at the hospital whose condition is terminal or incapacitated does not need to be arrested and guarded).
- G. Members shall contact their watch commander if the hospital staff gives any directions or orders that contradict this order.

IV. PROCEDURES

A. Need for Medical Treatment

Members shall immediately notify an official and request appropriate medical assistance when they become aware that a prisoner is injured or reporting an illness.

- 1. Members who suspect, observe, or have knowledge that an individual has swallowed drugs shall immediately contact the Office of Unified Communication (OUC) to request an ambulance transport for the individual to the nearest hospital.
 - a. Members shall not attempt to retrieve items swallowed by individuals.
 - b. In cases of drug ingestion where no medical treatment is recommended by the hospital and the prisoner is medically cleared, the prisoner shall be considered "AT RISK" when placed in a holding cell and observed **no less than** every ten (10) minutes.

2. Members shall leave any medical identification on the individual (e.g., Life Alert, medical alert identification bracelets or devices).
3. An official shall respond to all scenes or to a station cellblock to interview prisoners that are complaining of injury and/or illness or who have visible injuries.
4. The official shall ensure that a PD Form 313 is prepared in conjunction with the interview.
 - a. The same complaint number obtained for the arrest report shall be utilized when preparing the PD Form 313.
 - b. If the illness or injury is the result of the arrest, the official shall ensure that the PD Form 313 is completed by a non-involved member.
 - c. Sufficient information shall be entered on the PD Form 313 to indicate clearly to the hospital staff the need for treatment or examination. The information shall include a notation of all cuts, bruises, or other injuries visible to the member at the time the person was arrested, as well as the results of the examination by the doctor.
5. A District Reserve Crime Scene Search Officer (RCSSO) shall be contacted by the investigating official to respond to the scene to photograph the injured prisoner when there are visible injuries and/or other visible evidence (e.g. torn clothing) and:
 - a. The injury is a result of police action (e.g., use of force).
 - b. The arrestee claims to have been a victim of police use of force.
 - c. A third party claims the arrestee was a victim of police use of force.
 - d. The injury occurs while the arrestee is in police custody.

- e. The arrestee is admitted to a hospital due to the injury.
 - f. Any instance in which the watch commander determines photographs are necessary based upon the circumstances.
 - g. In those instances when the watch commander determines photographs are unnecessary, he or she shall note that determination and justification in the narrative section of the PD Form 313.
6. In the event that medical evaluation is necessary prior to the RCSSO's arrival, the RCSSO shall be directed to the hospital where the individual was transported.
 7. In a non-emergency medical care situation, a member assigned to the station cellblock shall contact the OUC for a transport vehicle. Adult prisoners shall be transported in accordance with GO-PCA-502.01 (Transportation and Searches of Prisoners) to the **closest** emergency room facility from the district in which the prisoner is housed.
 8. If life threatening conditions exist, D.C. Fire and Emergency Medical Services (FEMS) shall be notified immediately and requested to respond to the location or the station cellblock.
 - a. A member assigned to the station cellblock shall notify the OUC to request a transport vehicle to escort the ambulance to the hospital.
 - b. If the ambulance crew arrives before the transport vehicle, and it is determined that the ambulance must depart immediately, an official shall assign a member to ride in the ambulance.
 - c. It will be the determination of FEMS staff as to what hospital they will transport the prisoner.
 9. A prisoner who has been taken to the hospital for medical treatment and returned to the station and who again complains of being ill shall be returned to the hospital for further examination and treatment. A separate and complete PD Form 313, using the original complaint number for each such report, shall be made for each medical examination and

treatment given a prisoner (i.e., one PD Form 313 shall be completed per hospital visit).

10. If an individual who is in custody dies, members shall immediately notify an official who shall notify the Internal Affairs Bureau who shall conduct an in-custody death investigation.

B. Prisoner Transports to Emergency Facilities

1. Members shall notify hospital security of the arrival of the prisoner.
2. Prisoners shall be handcuffed during the transport. Leg restraints may be used at the discretion of the member.
3. For safety reasons, members shall always attach leg restraints from the side of the prisoner.
4. Transportation of the prisoner to the hospital shall be conducted by two members, unless exigent circumstances exist. Security-risk prisoners shall always be transported by two members.
 - a. Whenever a member transports a prisoner of the opposite sex, the member shall notify the dispatcher of the beginning mileage and location before departure.
 - b. At the conclusion of the transport, the member shall notify the dispatcher of the ending mileage and location.
 - c. Any prolonged stops or delays during the transport shall be voiced to the dispatcher.
5. In the event that any prisoner is transported in an ambulance, one member shall ride inside the ambulance while another member follows the ambulance.
 - a. Any deviation from this policy shall require approval from the watch commander.
 - b. The watch commander who authorizes a departure from this policy shall be responsible for documenting

the circumstances on the PD Form 150 (Watch Commander Report).

6. Members shall notify the watch commander if a prisoner is transported to a hospital outside of MPD's jurisdiction.
7. When prisoners are transported to a hospital outside of MPD's jurisdiction, the watch commander shall:
 - a. Establish guard details for all warrant and felony arrests. Guard details **shall not** be established for misdemeanor arrests except for misdemeanor warrant or domestic violence cases.
 - b. If the prisoner committed a crime of violence, contact the OUC to advise the local law enforcement agency where the hospital is located that an MPD prisoner is in the hospital in their jurisdiction.
 - c. Consult with the local law enforcement agency concerning the guarding of the prisoner.

C. Admission of Prisoners to Emergency Facilities

1. A prisoner transported to the hospital with a PD Form 313 shall be taken to the emergency room for processing, examination, and treatment.
2. The transporting members shall immediately notify the district watch commander that the prisoner has been admitted for his or her injuries or illness, and the watch commander shall ensure a guard detail is established in accordance with Part IV.D of this order.
3. In the event that the prisoner has not been photographed and fingerprinted, the watch commander shall:
 - a. Notify the CCB to complete the fingerprinting process.
 - b. Ensure that the CCB receives a copy of the PD Form 163 (Arrest/Prosecution Report).
 - c. Record the name of the member contacted at CCB on the PD Form 150.

NOTE: The CCB is primarily responsible for fingerprinting all hospital cases when a prisoner is admitted to the hospital.

4. The watch commander shall query the member to determine if the prisoner can elect to forfeit collateral or receive citation release in accordance with MPD policy including, but not limited to, GO-PCA-502.06 (Citation Release Program).
5. In the event that the case against a hospitalized prisoner has been papered:
 - a. The papering member shall notify a Court Liaison Division (CLD) official and an official in his or her command of the hospital information prior to checking out of court.
 - b. A CLD official shall petition the court for a commitment order for the arrested subject.
 - c. Once the CLD official has obtained the commitment order, he or she shall notify CCB that the commitment order has been issued by the court and that the prisoner has been remanded to CCB custody.

D. Guard Details

1. Guard Detail Transfers to the CCB
 - a. A member shall notify his or her supervisor in cases where:
 - (1) A prisoner's hospital visit is expected to last more than two hours and MPD has completed processing/questioning the prisoner; or
 - (2) The prisoner is admitted to the hospital.
 - b. The supervisor shall contact the CCB on (202) 727-4222 and request that DOC assume responsibility for the guard detail.
 - c. The supervisor shall ensure that the PD Form 163, PD Form 313 and all other required documents are delivered to the CCB to facilitate the transfer of the guard detail. CCB will not begin the transfer of

custody without first receiving the PD Form 163, PD Form 313 and all other required documents.

- d. Supervisors shall notify the CIC that a request was made for the CCB to facilitate the transfer of the guard detail and provide the following:
 - (1) Date and time of arrest;
 - (2) Name of defendant;
 - (3) Arrest number, CCN and charge;
 - (4) Hospital and room number;
 - (5) Name of CCB member notified; and
 - (6) Time that the request was made.
- e. Should DOC state that they are unable to relieve the detail, or that there is an expected delay in responding, the watch commander shall notify the Field Commander.

2. Guard Details Handled by MPD

The following procedures outline MPD responsibilities for conducting a guard detail while awaiting transfer of a guard detail to DOC.

- a. Guard details shall be a two member detail unless otherwise directed by the watch commander.
 - (1) Consideration shall be given to the nature of the arresting charge, incapacitation, the medical or psychological condition of the prisoner, and the likelihood of escape from police custody.
 - (2) The watch commander shall make efforts to staff the hospital detail with members of the Patrol Support Team (PST) during the evening and midnight shifts. The watch commander shall coordinate with the CIC and the Field Commander as to the availability of PST members.

- b. Security-risk prisoners and violent prisoners shall be guarded by two members unless the prisoner is incapacitated, unconscious, or heavily medicated in which case the watch commander shall use his or her discretion to reduce the detail to one member.
 - (1) The watch commander shall include the reason for the reduction in the detail from two members to one member on the PD Form 150 and inform the oncoming watch commander of the reason.
 - (2) It shall be the responsibility of the oncoming watch commander to query the member on guard detail to evaluate the prisoner's condition and determine if his or her condition has changed requiring additional detail staffing.
- c. Every effort shall be made to have at least one member of the guard detail be of the same sex as the prisoner.
- d. At the beginning of each shift:
 - (1) Members reporting as relief for the detail shall contact the members they are relieving in-person.
 - (2) Both incoming and outgoing members shall make bed checks of the prisoner under guard.
 - (a) Each prisoner shall be identified by name and the charges on which he or she is being held.
 - (b) Special information concerning the prisoner shall be relayed to the incoming members.
 - (c) The incoming members shall then be responsible for the prisoner until relieved in the same manner at the expiration of their shift.

- e. Members on guard detail at hospitals shall not leave their post at the expiration of their shift until properly relieved.
- f. Whenever possible, members who are guarding a prisoner shall be notified over the radio that they have been relieved of a guard detail. In the event that members receive a telephone message from their official advising them that they are relieved, they shall not be considered officially relieved until personally returning the telephone call to that district and verifying the order from the same official.
- g. Members detailed to guard prisoners at hospitals shall exercise every precaution to prevent the escape of such prisoners.
 - (1) Members shall ensure that at least one arm or leg is secured to a fixed object at all times.
 - (2) At no time shall the prisoner be left alone without a member in attendance or in view, except under exigent circumstances. This includes those times when the prisoner may need to use the restroom. Members shall ensure the restroom door is open while in use.
 - (3) Members shall check the restroom, prior to the prisoner's use of it, to:
 - (a) Ensure there is nothing the prisoner could use as a weapon or a potential escape device.
 - (b) Ensure there is no window or other passage through which the prisoner could escape.
 - (c) Ensure the prisoner is in full view and cannot lock the bathroom door from the inside.
- h. Should it become necessary for members to leave the immediate vicinity of the room for any purpose, it shall be their duty, and they shall be held personally

responsible, for seeing that all measures are taken to prevent the escape of any prisoner.

- i. If for any reason during a guard detail, a member must be relieved before their relief is scheduled to report, the member shall notify his or her official and the official shall make arrangements for their relief.
 - j. Members shall retain and wear their service weapon while detailed to guard prisoners at any hospital.
 - k. Members shall avoid socializing with prisoners at any time.
 - l. Members shall prevent unauthorized contact and access to prisoners.
 - m. Members on guard detail shall follow up on the medical status of prisoners under guard in order to determine when the prisoner may be released from the hospital.
 - n. Members shall remain in communication with their respective officials to advise them as to the treatment and pending return of the prisoner back to the District.
 - o. Members shall ensure that they retrieve their handcuffs, and leg restraints if used, when they are relieved from a guard detail.
3. Release of Guard Details

When a prisoner's case is "no-papered", a member shall contact the Court Liaison Division (CLD) to verify that **all charges** are "no-papered" prior to releasing the detail.

E. Juveniles

- 1. Juveniles injured or in need of medical treatment shall be transported to Children's Hospital. This information shall be noted on the PD Form 150.
- 2. Members shall guard juveniles in accordance with the provisions in Part IV.D.2 of this order.

3. Misdemeanor Offense
 - a. Members shall place juveniles, who are charged with misdemeanor offenses and admitted to the hospital, under guard detail until their identity is verified by Automated Fingerprint Identification System Section (AFIS).
 - b. Members shall immediately notify the Juvenile Processing Center (JPC) that the juvenile is being admitted to the hospital.
 - c. A member at the JPC shall:
 - (1) Document the juvenile arrest in the Hospital Log Book.
 - (2) Respond to the hospital to photograph and fingerprint the juvenile, as soon as possible.
 - (3) Submit the fingerprints to AFIS for identification.
 - d. Members, in coordination with the JPC, shall take reasonable means to identify the juvenile.
 - e. Members on guard detail shall notify the JPC of the juvenile's status at the beginning of each shift until the juvenile's identity has been verified by AFIS.
 - f. Members shall complete a PD Form 379 (Delinquency Report) and a PD Form 252 (Supplement Report) upon positive identification of the juvenile.
 - g. Members of the JPC may release the juvenile at the hospital and discontinue the guard detail if:
 - (1) The parent or guardian is present;
 - (2) The arrestee is for a nonviolent misdemeanor; **and**
 - (3) The juvenile has been identified and it has been determined that there is no other reason to seek detention.

- h. Members of the JPC shall serve the parent or guardian with a PD Form 694 (Notice to Appear in Family Court, Office of the Attorney General).
 - i. Members shall use the same release conditions as they would if the juvenile was brought to the JPC.
 - j. Members shall be released from guard detail upon the full execution of the PD Form 694 by the JPC.
4. Felony Offenses
- a. Members shall place juveniles charged with a felony offense and admitted to the hospital under guard detail.
 - b. Members shall immediately notify the JPC that the juvenile is being admitted to the hospital.
 - c. A member at the JPC shall:
 - (1) Document the juvenile arrest in the Hospital Log Book.
 - (2) Respond to the hospital to photograph and fingerprint the juvenile, prior to the end of the shift.
 - (3) Submit the fingerprints to AFIS for identification.
 - d. Members on guard detail shall notify the JPC of the juvenile's status at the beginning of each shift.
 - e. Arresting members shall paper the case on the next day that court hearings are held in cases where the juvenile cannot be identified.
 - (1) Members shall complete the papering process in the same manner as if the juvenile were in the JPC.
 - (2) Members shall identify the juvenile as "John or Jane Doe" on the PD Form 379 and PD Form 252.

- f. A member of the JPC shall respond to the hospital and serve the release order or notice on the juvenile and the guard detail shall be lifted if the court decides to release the juvenile.
- g. A member of the JPC shall notify the watch commander of the unit maintaining the guard detail if the court decides to detain the juvenile. The Department of Youth Rehabilitation Services (DYRS) will take over the guard detail.
- h. DYRS personnel will present a copy of the detention order and proper government identification to the member when they assume the guard detail. DYRS will assume the guard detail until the juvenile is transported to the DYRS.

V. ROLES AND RESPONSIBILITIES

A. Roll call officials shall:

- 1. Query the check-off sergeant of the previous shift to determine if any hospital details exist.
- 2. Upon being notified that a hospital detail exists, query the check-off sergeant to provide information concerning the location, room number, charges, and information about the prisoner.
- 3. Ensure that DOC has been notified of the two hour mark for relieving MPD guard details.
- 4. Contact the guard detail to ensure:
 - a. The detail is set in accordance with MPD policy and procedure including this order (e.g. handcuffed prisoner, adequate security detail).
 - b. An updated decision on the detail is made on each shift along with meeting any staffing needs.
 - c. Breaks and relief are arranged as needed for a single member detail.
 - d. Risk of escape is minimized.

- e. Member safety issues are addressed by providing specifics of the case (e.g., charge history, violent tendencies, family issues).
 5. Staff the detail and denote the detail information next to the member's name on the daily roll call sheet.
 6. Ensure that the members on the detail are relieved in a timely manner by the members who are beginning the next shift.
 7. Contact and advise the watch commander of the guard detail status.
- B. Watch Commanders shall:
1. Contact the DOC when a commitment order is issued to relieve the Department of the hospital detail. This notification shall be recorded on the PD Form 150.
 2. Notify the Field Commander should DOC state they are unable to relieve the detail or when there is an expected delay in responding.

NOTE: Should DOC state they are unable to relieve the detail, or there is an expected delay in responding, the watch commander shall notify the Field Commander who in turn shall contact DOC and, if not resolved, the Mayor's Command Center.
 3. Ensure that a transport is sent to the hospital for prisoner discharge, when applicable.
 4. Upon being notified of a prisoner who shows indications of a recent wound or injury, initiate an immediate investigation into how the injury was sustained.
 - a. A summary of this preliminary investigation shall then be entered in the "Supervisory Official's Report" section on the PD Form 313.
 - b. Completion of this report shall in no way delay transporting the prisoner to a hospital.
 5. Manage suspected use of force cases in accordance with MPD policy and procedures including, but not limited to, GO-RAR-901.08 (Use of Force Investigations).

VI. CROSS REFERENCES

- A. D.C. Official Code, Section 23-1331.04 Crime of Violence
- B. GO-PCA-502.01 (Transportation and Searches of Prisoners)
- C. GO-PCA-502.06 (Citation Release Program)
- D. GO-RAR-901.08 (Use of Force Investigations)



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