

**Baltimore City, Maryland
Police Department
General Orders**



Subject: Persons in Police Custody

General Order K-14
September 18, 1997
Distribution: "A" Plus All Departmental Bulletin Boards

GENERAL RESPONSIBILITIES

Member of the Agency

* Whenever a person is taken into custody:

- Ensure the safety of the arrestee.
- Ensure medical treatment for a prisoner is obtained, when necessary, at the nearest emergency medical facility.

Note: When a juvenile is taken into custody refer to General Order L-2, "Juvenile Custody Procedures."

-- When a prisoner refuses treatment at a medical facility, get a copy of the prisoner's written refusal of treatment from the medical facility and give it to the appropriate booking personnel.

-- Whenever an arrestee is transported in a police vehicle, ensure:

> That he/she has been searched and handcuffed, (hands cuffed in the rear), before being placed in a prisoner transport vehicle or a "C. P." truck.

> The arrestee is secured with seat/restraint belts provided. This procedure should be evaluated on an individual basis so not to place oneself in any danger.

> That the seat/restraint belt is placed securely around the waist or upper body of the arrestee to prevent the arrestee from maneuvering out of the restraint and possibly causing injury to them or others.

> That the arrestee remains handcuffed when delivered to the appropriate holding facility, and that the handcuffs only be removed by the turnkey in the confines of the lock up area.

> Emergency flasher and dome lights are activated while in the process of transporting the prisoner.

> That whenever a member transports an arrestee of the opposite sex, KGA is advised of the 10-20 and odometer reading prior to transporting and again when reaching the destination. Male officers will not search female prisoners unless exigent circumstances exist.

> That the cruising patrol wagon or transport vehicle is inspected for weapons, contraband, etc. prior to placing the prisoner in the vehicle, and again after the prisoner is removed from the vehicle.

Note: If any contraband/CDS is found in the vehicle, the operating officer will recover same in keeping with established departmental policies and procedures.

-- Ensure that sufficient police personnel are present when moving prisoners from the transporting vehicle to the booking facilities or other locations that may afford the opportunity for the escape of the prisoner or injury to the officer.

-- At no time will a prisoner be left unattended in a transport vehicle.

-- Whenever an arrest is effected involving a wheelchair-bound person:

> Transport the person via Prisoner Transport Vehicle (sedans) to the appropriate facility; and

> The wheelchair, if portable, shall be folded up and placed in the trunk of the transporting vehicle. If the wheelchair is electric, it shall be secured in a cruising patrol and transported to the facility to which the arrestee has been taken.

* Ensure that reasonable accommodations are made for any handicapped prisoners. Ensure that the next shift is advised of any physical handicap or mental condition, if known.

* Handle all reports of persons with possible/obvious psychological problems, emergency evaluations and related offenses in keeping with established departmental policy.

* When observing an arrestee, look for the following:

-- Statements that may indicate suicidal intent;

-- Signs of depression or humiliation;

-- Evidence of prior suicide attempts (scars, etc.);

-- Activity which would lead a prudent individual to suspect a potential for danger;

-- Evidence/information received from family, friends or other sources; or

-- Information regarding previous arrests.

* Immediately transport a person who meets the criteria for emergency psychiatric evaluation to the appropriate medical facility. Provide the required supportive documentation to the medical facility with the prisoner.

* Request an emergency evaluation for any person coming into police custody who exhibits any intent toward suicide. (A prisoner need not voice suicidal intent to cause an emergency evaluation. Any combination of factors which may cause alarm on the part of an officer may trigger an evaluation. Any suicide attempt shall immediately require an evaluation). See General Order G-13, Emergency Evaluations.

* Upon arresting a person who is ill or seriously injured:

-- Administer first aid.

-- If necessary to control the individual, handcuff the prisoner, taking precautions not to aggravate the injury. Search the prisoner.

-- Write a follow-up report to an original offense/incident report or prepare a report for the appropriate offense/incident, when you take a prisoner into custody and the person has an injury/illness or receives any injury, with the following information in the narrative:

> Type of illness/injury.

> Location of injury on person's body.

> Whether the injury was present prior to coming into contact with the police or while being placed in police custody.

-- Ensure the prisoner is guarded at all times. (When the prisoner goes to a hospital for treatment before being taken to the Booking/Detention facility, ensure the prisoner is guarded during the transport and upon arrival at the medical facility).

-- Prior to transporting a prisoner to/from the booking facility, mental health facility or hospital, attempt to determine if the prisoner is under any prescribed medication, and ensure that the medication accompanies the prisoner in sufficient quantity to cover the anticipated time in this department's custody. The medication must:

> Be capable of being administered orally;

> Not require refrigeration; and

> Be prescribed by a medical professional authorized and licensed to prescribe medication.

-- When picking up a prisoner from a medical facility who is on prescribed medication, you shall refuse to accept the person if the medical facility does not provide the required medication.

-- Guard your prisoner, or if unable, arrange through your supervisor to have another officer respond to the medical facility and guard the prisoner until your arrival.

* When an arrestee is badly hurt or injured and is admitted to a hospital for an extended period of

time before being processed at BCBIC:

-- Have the arrestee fingerprinted by the Crime Lab or District personnel and hand deliver the prints to Central Records for identification along with a completed Form 185, Arrest Data Entry Form.

-- Hand write the probable cause and charging documents.

Note: If the charge is a misdemeanor, write a warrant for the arrestee and advise the hospital personnel to notify the police when the arrestee is to be released.

-- If bail is set, but unable to be met, contact the Warden, Security Chief, or Shift Commander of the BCBIC (410-5458132/8133/8134/8135). Within three (3) hours of that notice, BCBIC correctional staff will relieve the police officer at the hospital and assume custody/control of the hospitalized detainee.

Supervisor/OIC

* Ensure members assigned to guard prisoners are provided with a police radio.

* Provide advice and guidance to officers who are not relieved by BCBIC correctional staff within prescribed time in bail situations.

* Authorize a prisoner to have hospital visitors only upon exigent life-threatening circumstances. Prisoner visitation **SHOULD BE AUTHORIZED ONLY** after first consulting with the attending physician who has determined the condition. (Note the physician's name).

* Visitors should be limited to the following identified persons (one at a time):

-- Members of the immediate family. (Spouse, mother, father, sister, brother, son, daughter, grandmother, grandfather);

-- Clergy, as requested or authorized by the family;

-- Legal representative; or

-- Other person(s) deemed necessary and appropriate.

* Ensure that all hospital visitations are handled in keeping with established departmental policy.

* Provide relief for the guarding police officer(s), on a regular basis.

* Review reports to ensure compliance with this directive.

Shift Commander

* Provide for appropriate handling of the detainee according to background and circumstances.

* When notified by a Sergeant/O.I.C. that a prisoner arrested by a member of your

district/division is being/has been sent to a medical facility for treatment, ensure that a member of your shift responds to the designated medical facility to guard the prisoner. When necessary, detail an officer(s) to guard the prisoner.

* Whenever a subject is injured and consequently admitted to a medical facility as a result of police action, ensure that the Internal Investigation Division Duty Detective is immediately notified. In cases where the subject's injury is serious and/or potentially life-threatening, notification shall be made promptly, even if a decision as to the subject's admission to a medical facility has not yet been made. In cases of serious injury or death, which necessitates response and/or investigation by the Homicide Unit, the respective Shift Commander is not relieved of his/her responsibility to ensure that the Internal Investigation Division is notified, and shall do so in a prompt and timely fashion.

* Ensure the guidelines set forth in General Order 48-77, "Departmental Administrative Disciplinary Process," for reporting substantial force used in effecting an arrest, are followed.

Commanding Officer

* Ensure that the H & S Lieutenant forwards a correspondence to the Administrative judge requesting that a bail hearing is conducted by a court commissioner when an arrestee is badly hurt or injured and must go to a hospital for a long stay before going to BCBIC.

* Ensure that a member or members are placed on administrative duty when a person dies:

- while in the custody of a police officer; or
- soon after being in an officer's custody; or
- as a result of police action, i.e., traffic accident involving the officer, etc.

* Ensure a member placed on administrative duty, pursuant to a situation involving a person's death while in police custody, is not assigned any enforcement duties.

* Ensure that an officer is removed from administrative duties only when the investigation into the person's death has been concluded.

BALTIMORE CENTRAL BOOKING AND INTAKE CENTER

The Baltimore Central Booking and Intake Center (BCBIC) provides 800 beds for pretrial status offenders and provides a central location for the booking of offenders of the Baltimore Police Department. Prisoner information will be recorded "on line" as well as charging documents and reporting data. This method improves data quality and makes it available almost instantly to those persons and agencies needing it.

Member of the Agency

* Parking/Entry:

-- Enter the facility by vehicle through the door marked "Transport B," located on the Madison Street side of the building and park in the temporary space provided.

Note: Once inside your vehicle you will be in an area called a vehicular sallyport with overhead doors on each end. At this time, for security reasons, you, your vehicle, and your prisoner may be searched.

-- Provide your name, assignment, and other information that may be asked of you.

-- After receiving directions from the correctional officer about the securing of your weapon, the second overhead door will be opened allowing you to enter the ramp and processing area.

-- After parking your vehicle in the area provided, proceed to the gun locker, secure your weapon and take the key after you locked the locker.

Note: No firearms, ammunition, knives, or other weapons will be allowed inside the prisoner pedestrian sallyport. You will be able to retain your baton and pepper mace.

-- Remove the prisoner from your vehicle and take him/her to the prisoner sallyport. Announce your presence through the intercom and the door will be opened for you. The prisoner will remain handcuffed during this process.

-- You will be met by a correctional officer assigned to the BCBIC who will search your prisoner for contraband, conduct an evaluation of the prisoner and obtain information about the prisoner. At this time you may also be searched for weapons.

Note: If any narcotics, weapons, or contraband warranting criminal charges are found, you will immediately assume responsibility for it.

-- Relinquish responsibility of the prisoner to the correctional officer when all the conditions set forth by the BCBIC are met for the booking process. You will then retrieve your handcuffs when a wristband and handcuffs are placed on the prisoner by the correctional officer.

-- You will retain custody and provide emergency treatment for your prisoner when:

- > There is obvious trauma and a need for immediate medical care;
- > There is a life threatening injury or condition that requires immediate medical care;
- > They claim to have one of the above conditions and present some symptoms that verify those conditions; or
- > They are unconscious or unable to walk under their own power. This does not apply to handicapped/physically challenged persons whose functions may be limited by their disabilities).

-- Accompany the correctional officer and the prisoner to the booking station where you will remain until the booking process begins.

-- Prisoner's personal property will be accepted but limited to:

- > Clothing being worn by the offender upon arrival; and
- > Non-contraband personal property limited to a total of two cubic feet.

* Booking Process:

- Answer questions asked of you for data entry into the Automated Arrest Booking System (ABS).
- Respond to the Case Preparation area and fill out the “Arrest Report” and the “Arresting Police Officer Worksheet” provided.
- Enter your “Statement of Probable Cause and Charges” on the ABS work station in the case preparation room.
- After completing your reports and placing the information in the ABS, ensure all information is correct. The information is then locked to prohibit any alterations or revisions. After the information is printed you must sign the copies for court presentation.
- Exit the building through the sallyport door you entered, taking any evidence that was discovered in the search process.
- Retrieve your weapon and leave the locker key in the locker.
- Exit in your vehicle through the Eager Street exit where the exit process is much like the entry process.

Shift Commander

- * Notify BCBIC (410-545-8132/8133/8134/8135) of all anticipated operations where large numbers of arrests are expected. This notification should be made to the Office of the Assistant Warden no later than 24 hours prior to such operations.

RESPONSIBILITIES FOR HANDLING PRISONERS AS PATIENTS

Area Hospitals (other than Johns Hopkins Medical Institutions):

Member of the Agency

- * Transport all prisoners in need of medical care to the nearest hospital emergency room via the ambulance entrance.
- * Ensure the prisoner is thoroughly searched.

Note: Hospital civilian security officers will not become involved in the search of the prisoner.

* Prisoners to be admitted:

-- will be assigned a single room.

-- will be served meals that can be eaten without utensils (sandwiches, hotdogs, or soup in a mug).

* Search/survey the room/cubicle where the prisoner is being treated to ensure officer safety and to prevent possible prisoner escape.

* Secure prisoners to beds, stretchers, or wheelchairs with handcuffs and leg irons. Ambulatory prisoners, who must leave their beds (stretchers) for any purpose, are to be in a wheelchair or stretcher, and must be secured with handcuffs and leg irons as a minimum-security measure.

* If medical personnel request that the handcuffs or leg irons be removed from the prisoner for examination, ensure that one (leg irons or handcuffs) remains in place at all times.

* Stand inside the prisoner's room/cubicle. When security conditions permit, be sensitive to cross-gender situations.

* Stand directly outside the cubicle/room if you are directed by the attending physician for medical reasons, and attempt to keep visual contact. When possible, suggest the use of curtains to allow you to remain in the hospital room.

* At the physician's or patient's request, stay out of hearing range of the conversation between the physician and prisoner, preserving the physician/patient confidentiality.

* Do not absent yourself unless another officer responds to stand guard during your absence.

* Do not enter hospital areas designated for psychiatric treatment while armed. Officers will not enter these areas except under police supervisory approval. Follow appropriate procedures designated by the hospital for securing your weapon.

* Call medical personnel to provide for the prisoner's needs. Do not obtain anything for the prisoner (i.e. water, food, clothes, linen, magazines, etc.).

* Ensure the prisoner does not have any communication or contact with anyone except identified medical facility personnel.

Exception: When a prisoner is in a life-threatening condition in which sensitivity should be demonstrated, only clearly identified visitors, as defined below, (one at a time) may be allowed visitation, but only when authorized by a supervisor (rank of Sergeant/OIC or higher).

-- Member(s) of the immediate family. (Spouse, mother, father, sister, brother, son, daughter, grandmother, grandfather);

-- Clergy, as requested or authorized by the family;

-- Legal representative; or

-- Other person(s) deemed necessary and appropriate.

* When authorization has been granted by a supervisor for visitor(s):

-- Set up a specific/limited visitation period in accordance with the directions of the attending physician.

-- Require identification of each visitor. (Picture identification such as driver's license, age of majority card, professional identification, etc).

-- Write the date, time, and visitor identification information on the PAR, Prisoner Activity Report, (if available) or administrative report. Include the name of the physician who determined the life-threatening condition.

-- Ask to inspect all articles in the possession of visitors (e.g., briefcase, carrying case, handbag, etc.) in which contraband material or weapons could be secreted. If a visitor refuses inspection, they may not visit the prisoner.

-- Conduct a careful pat-down of the garments worn by the visitor(s).

Note: For cross-gender encounters, have an officer of the same sex conduct the pat-down (female visitor -- female officer, male visitor -- male officer).

-- Do not leave the prisoner during the visitation.

* Provide the relief officer who will guard the prisoner with the following information:

-- Charges placed or to be placed against the prisoner;

-- Who may or may not visit the prisoner;

-- The approximate amount of time the prisoner will be hospitalized; and

-- Where the prisoner will be taken when released.

* Submit written reports involving persons taken into police custody immediately to your supervisor.

* Comply with direction from command concerning placement on administrative duty pursuant to the death of a person who was in your custody.

Johns Hopkins Medical Institutions:

Member of the Agency

* Transport all prisoners in need of medical care to the hospital emergency room via the ambulance entrance.

* Before responding to the Johns Hopkins Medical Institution with a prisoner, notify the off-duty

Baltimore Police Officer working secondary employment at the hospital via police radio (Call number 3093, using the Eastern District channel). Information should include the nature of the prisoner's injury and the estimated time of arrival (ETA).

* Ensure the prisoner is thoroughly searched.

Note: Hospital civilian security officers will not become involved in the search of the prisoner.

* The off-duty officer will then respond to the Nurse's Station in the treatment area and ascertain in which cubicle the prisoner will receive treatment.

* After ascertaining this information, and upon the arrival of the officer and his prisoner, the off-duty officer will then respond to the Emergency Room stationary post and secure his weapon in the gun locker provided.

* Upon the arrival of the officer and the prisoner, the off-duty officer will determine the need for additional manpower anticipating the removal of the handcuffs, leg irons, etc. If supplementary help is deemed appropriate, same should be obtained from unarmed Hopkins civilian security personnel.

* The on-duty and off-duty officers will escort the prisoner throughout the entire treatment process.

* Prisoners should be secured at all times to beds, stretchers, or wheelchairs with handcuffs and leg irons.

* Ambulatory prisoners, who must leave their beds (stretchers) for any purpose, are to be in a wheelchair or stretcher, and must be secured with handcuffs and leg irons as a minimum security measure.

* Prisoners to be admitted:

-- will be assigned a single room; and

-- will be served meals that can be eaten without utensils (sandwiches, hotdogs, or soup in a mug).

* Remain in the prisoner's room, in direct line of sight of the prisoner at all times. Each prisoner must have at least one officer in attendance at all times.

* Prisoner visitation:

-- Provide Johns Hopkins Security with the name(s) of those persons authorized to visit the prisoner. Patients in custody who are admitted as emergencies will be allowed two visitors on the day of admission, unless prohibited by the responsible law enforcement organization or correctional institution. Beyond this as a general rule, prisoner patients who do not have a life threatening illness or injuries, and those hospitalized for less than five days, shall not be allowed

visitors during their hospitalization.

-- When a prisoner is being treated as an outpatient do not allow visitors.

-- Under no circumstances are weapons allowed in hospital areas designated for psychiatric treatment. Officers will not enter these areas except under police supervisory direction.

-- Under nearly all circumstances, the treating physician will permit you to remain with the prisoner at all times during the examination and treatment. At the physician's or patient's request, stay out of hearing range of the conversation between the physician and prisoner, preserving the physician/patient confidentiality.

-- Provide the relief officer who will guard the prisoner with information in keeping with established departmental policy.

-- Submit written reports involving persons taken into police custody, to your supervisor immediately.

-- Comply with direction from command concerning placement on administrative duty pursuant to the death of a person who was in your custody.

By order of Thomas C. Frazier, Commissioner
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