



# Independence Police

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<b>GENERAL ORDER</b>	<b>No. 1995-027</b>	<b>Page 1 of 8</b>
<b>SUBJECT:</b>  Medical Assistance for Detainees	<b>EFFECTIVE DATE:</b>	1995
	<b>REVIEW/REVISION DATE:</b>	August 28, 2015
	<b>REFERENCE:</b>	State Cert. Standard 35.7

## PURPOSE

This directive establishes policies and procedures for when medical assistance is to be obtained for persons in the custody of the Independence Police Department or who are prisoners of the City of Independence.

## POLICY

It is the policy of the Independence Police Department to provide adequate and professional medical assistance to persons taken into custody by employees of the department who are prisoners of the City of Independence.

## PROCEDURE

### Requests for Non-Emergency Medical Treatment

- Any person taken into custody by an employee of the Independence Police Department or who is a prisoner of the City of Independence will be provided with access to professional medical care when there are symptoms of illness or injury and/or the person requests medical attention.
- A medical questionnaire will be completed on every prisoner before they are placed in a cell
- Non Insured Emergency care will be given at Centerpoint Medical Center
- Medical services are available 24 hours daily through the Centerpoint Medical Center Emergency Room

- Prisoner suffering from mental health problems will be interviewed by a trained CIT Officer and/or state mental health professional

### **Payment for Medical Service**

- Every person taken into custody or prisoner will be liable for their own medical and dental care expenses.
- Department employees will explain to prisoners their financial liability before transporting them for medical treatment
- Uninsured prisoners will be transported to Center Pointe Hospital for medical care.

### **Emergency Medical Assistance**

- Department employees will summon emergency medical services for prisoners whenever the following condition exists:
  - **Uncontrolled bleeding:** There is rapid and observable bleeding loss of blood before and during first aid
  - **Unconsciousness:** Even where the cause is known, an unconscious prisoner is a prima facie medical emergency
  - **Inability to breath or severe difficulty breathing**
  - **Persistent chest, arm and back pains**
  - **Head injury**
    - If the prisoner is dizzy and/or disoriented
    - When there are cuts and bruises about the head
    - When blood or clear fluid is flowing from the nose or ears
    - When one pupil is larger than the pupil of the other eye
    - When the prisoner has a temperature greater than 101 degrees
    - Severe headache
    - Persistent vomiting

- Neck pain
- Second degree burn
- Any other injury or illness which does not respond to first aid efforts or whose symptoms are not recognized by the employee
- When an emergency medical situation exists in the Detention Unit, the following personnel will be notified as soon as possible:
  - The Detention Unit Supervisor, the Detention Unit Commander or the Shift Commander

### **Other Emergency Medical Symptoms**

- Prisoners may exhibit other symptoms that are indicative of a medical emergency. Employees should summons emergency medical assistance when the symptoms exist.
- When a prisoner exhibits mental health disorders indicating he is dangerous to him/herself or others, a Police CIT Officer will be notified to determine if the prisoner needs to be placed on a 96 hour hold at a state mental health facility.
- **Mentally disturbed prisoner may exhibit**
  - Vast changes in behavior
  - Strange loss of memory
  - Feel people are plotting against him/her
  - Have grand ideas about themselves
  - Talk to themselves or hear voices
  - Have visions, smell odor or have peculiar tastes
  - Thinks they are being watched
  - Complains of body ailments that are not possible
  - Frightened or in a state of panic
  - Behavior that is dangerous to the prisoner or others

➤ **Intoxication-severe**

- Trouble breathing
- Pale face and hands/blue or pale lips, fingertips or toes
- Perspiring heavily
- Rapid or slow pulse
- Lack of odor of alcohol-the person may be diabetic and in distress

➤ **Mentally Challenged Prisoners**

- Appear confused or have a blank expression
- Cannot follow orders without special instructions
- Cannot follow detention rules or are easily tricked by other prisoners

➤ **Drug Addicts-Withdrawal**

- Severe muscle aching and twitching
- Abdominal pains
- Restlessness and insomnia
- Profuse sweating
- Hot and cold flashes
- Weakness
- Loss of appetite
- Weight loss
- Vomiting and diarrhea
- Anxiety and signs of hysteria
- Convulsive seizures

➤ **Depressed Prisoners**

(When a prisoner is depressed Detention Unit personnel should make frequent checks on the prisoner)

- Prisoner keeps to him/herself and avoids talking to others
- Prisoner does not speak or the language is slow
- Exhibits restlessness, pacing up and down
- Exhibits insomnia
- Decreased appetite

➤ **Epileptics**

- When the prisoner has advance warning of a seizure, the Detention Officer should have the prisoner immediately lie down
- Remove all objects around a prisoner about to have or having a seizure
- Loosen any clothing around the prisoner's neck
- Place a pillow under the prisoner's head if available
- Turn the prisoner's head to allow saliva to drain
- If the seizure begins, call for emergency medical services immediately

**Emergency Medical Procedures**

- When Detention Unit personnel discover or is made aware of a medical emergency, the following procedures shall be implemented:
  - The Emergency Communications Center will be notified of the nature of the emergency and shall call for an ambulance service to respond to the Detention Unit
  - Detention Unit personnel shall render first aid. First aid kits are available in the booking area and in all police vehicles
  - Do not move the injured party unless absolutely necessary

- Clear the area of all other prisoners by ordering them to return to their cells. Get assistance if necessary
- Cooperate with and assist ambulance personnel
- The Detention Unit Supervisor, Commander or the Uniform Unit Shift Commander should be notified
- Detention personnel will document the medical emergency in the electronic booking system. If a subject is being transported to the hospital, efforts may be made with Watch Commander or their designee's approval to have the subject released from the police department's custody. This will include released pending further investigation or a signature bond.
- In the event a detainee is transported to and admitted to a medical facility, a Detention Unit officer will prepare a Police Hold Form. The Patrol Unit Shift Commander will determine if the detainee needs to be placed under police guard

#### **Transportation of Detainees in Non-Emergency Medical Situations**

- In the event a detainee, in the opinion of a Detention Unit officer, is in need of non-emergency medical treatment at a medical facility, the following procedure will be followed:
  - A police supervisor will be notified of the situation and determine if the detainee is to be sent for treatment.
  - The detainee will be transported to the medical facility or doctor on approval of a police supervisor. The detainee will be transported either by ambulance or by a uniform police officer, whichever is available.
  - In the event the detainee is admitted, a Police Hold Form will be completed and delivered as stated above. The Uniform Unit Shift Commander will determine if the detainee needs to be placed under police guard.

#### **Medication of Prisoners**

- Only Detention Unit personnel will issue current prescription medication to prisoners.

#### **Prescription Medication**

- At the beginning of each shift the detention officer will:
  - Review the names of prisoners requiring prescribed medication as shown on the detention cell assignment board.

- Make certain if a prisoner was booked with medication on their person that the prescription is for the correct person before it is administered. If there is any question regarding the prescription, the issuing doctor should be contacted. In the event it is not possible to contact the issuing doctor, then an emergency room doctor should be contacted with any matters concerning the medication.
- The prescribed medication should be taken in the prescribed amount in the presence of the detention officer. Detention Unit personnel will not administer injections.
- If medication is not given at the prescribed time, the detention officer will write a report of the incident to the Detention Unit Commander, detailing why the medication was not administered and when it was administered.
- If a prisoner refuses to take prescribed medication, the detention officer shall so note in the detention log, initial it and notify the Detention Unit Supervisor or Commander.

### **Storage of Medication**

- Medication used in a standing order or prescribed by a physician for a particular prisoner will be handled in the following manner:
  - Secured in the detainee's personal locker
  - Narcotic drugs will only be stored in the quantities and for the duration of the written orders
  - Only Detention Unit personnel will have access to the keys and lockers

### **Standing Orders for Non-Prescription Medication**

- The Independence Police Department has established the following orders for most common minor health complaints. In every case where the standing orders are implemented, their use will not exceed 24 hours and, if symptoms persist, the Detention Unit Supervisor or Commander will be notified to determine if medication should be continued, discontinued or medical attention sought.
- Always check with the prisoner to determine if they have any allergies before issuing any medication.
- **Simple headache:** If there is no history of bleeding, a prisoner may have two aspirin as standard dose for a male or female weighing 100-140 pound or more, every four hours. Aspirin will not be given to a prisoner with a history of bleeding problems, gastrointestinal ulcers or allergies, asthma, and hypertension. Prisoner having any of the above problems shall be given generic pain reliever for headache or muscular skeleton pain. They will be issued a rate of two tablets every four hours, if needed.

- **Cold symptoms:** Follow the same procedure as above. Non-prescription medicines for common ailments will be dispensed per label instruction when provided to a prisoner.
- **Minor stomach upset:** Over the counter medication for prisoners with minor stomach upset at a rate of two before or after meals. Notify the Detention Unit Supervisor or Commander if the problem persists.

### **Record of Medication**

- Any medication given to a prisoner by Detention Unit personnel will be entered into the prisoner's record.

### **Prisoner Security**

- The level of security used when transporting a prisoner to a medical facility is outlined in General Order 1995-010, Prisoner Transportation and General Order 1995-026, Prisoner Security.