

MILWAUKEE POLICE DEPARTMENT

STANDARD OPERATING PROCEDURE

090 - PRISONERS AND BOOKING

| GENERAL ORDER: 2023-55 ISSUED: October 13, 2023 | EFFECTIVE: October 13, 2023 | REVIEWED/APPROVED BY: Assistant Chief Nicole Waldner DATE: August 28, 2023 |
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| ACTION: Amends General Order 2022-17 (June 3, 2022) | | WILEAG STANDARD(S): 1.7.4., 1.7.5, 7.1.1, 7.1.2, 7.1.3, 7.1.4, 7.1.5, 7.1.6, 7.1.7, 7.1.8, 7.1.9, 7.2.1, 7.2.2, 7.2.3, 7.2.5, 7.2.6, 7.2.7, 7.3.1, 7.3.2, 7.3.3, 7.3.4, 7.3.5, 7.3.6, 7.3.7, 7.3.8, 7.3.9, 7.3.10, 7.3.11, 7.3.12, 7.3.14, 7.3.15. 13.1.1 |

ROLL CALL VERSION

Contains only changes to current policy. For complete version of SOP, see SharePoint.

090.15 PRISONERS IN NEED OF MEDICAL ATTENTION (WILEAG 7.1.8, 7.3.15. 7.3.17)

D. MEDICATION

5. Adult Prisoner In Need of Medication (prescription medication not available in accordance with SOP 090.17)

Prisoners requiring frequent medications shall be conveyed to the Criminal Justice Facility (CJF) as soon as practical to avoid continuous medical runs by district personnel. If no other medical conditions exist, the PA-45 and the CR-215, if applicable, must be completed and signed by the shift commander. The prisoner shall be conveyed to CJF, in time for the next necessary dosage.

090.17 WELLPATH MEDICAL CARE

- A. The purpose of this section to establish operational guidelines between the Milwaukee Police Department and Wellpath, the private medical care agency contracted to provide medical care to prisoners in custody within Central Booking.
- B. The safety of the on-site Wellpath medical providers is the responsibility of all sworn members in proximity to the medical providers while they render medical services to prisoners.

C. SCOPE OF OPERATIONS

- Wellpath will work on-site within Central Booking and is not responsible for providing direct medical care to prisoners held in other municipal lockup facilities within the Milwaukee Police Department.
- 2. During their hours of operation, Wellpath can serve in an advisory capacity to other

municipal lockup facilities throughout the department that have medical questions regarding their prisoners. These advisory services are not a substitute for the requirement to provide appropriate medical services to prisoners as necessary.

D. WELLPATH HOURS OF OPERATION AND STAFFING

- 1. Wellpath will staff a Registered Nurse (RN) at Central Booking every day from 10:00am to 6:30pm.
- Wellpath will staff a Nurse Practitioner (NP) who will work on-site for five hours per week at irregular intervals Monday through Friday. The on-site registered RN will have 24-hour access to other providers when needed.

E. MEDICAL SERVICES RENDERED

Wellpath will provide the following medical services to prisoners while they remain in custody at Central Booking:

- 1. Comprehensive intake medical screening of prisoners.
- 2. Creating prisoner medical intake screening records for transfer to CJF.
- Administering regular medication prescribed to prisoners for identified, prediagnosed medical conditions.
- 4. Perform medical assessments for prisoners in custody at Central Booking who report they are experiencing medical issues.
- 5. Wellpath staff will render medical treatment to prisoners for minor medical issues within their scope of practice commensurate to their training, certifications and onsite resources. These medical issues include, but are not limited to, routine preventative care, first aid, and care for cardiac, respiratory, gastrointestinal and pain management.

F. SCOPE OF CARE

- If the medical needs of the prisoner extend beyond the on-site capabilities of the Wellpath medical staff at Central Booking, the prisoner shall be conveyed to a hospital or other medical facility.
- The on-site Wellpath medical practitioner will have final authority in determining if the Central Booking prisoner is in need of medical attention from a hospital or other medical facility.

G. ARRESTING AND/OR CONVEYING MEMBERS RESPONSIBILITY

1. Wellpath services cannot be used as a substitute for initial medical clearances and members with arrests shall continue to have a prisoner receive medical aid in accordance with SOP 090.15 in the following incidents:

- a. uses of force;
- b. new injuries from any source;
- c. other identified serious medical conditions:
- d. any indications the prisoner has ingested suspected narcotics or any other potentially harmful substances in accordance with SOP 090.15(B)(2);
- e. notification of pregnancy with no prior pre-natal care received; and/or
- f. whenever prisoners request medical services for any reason in accordance with SOP 090.250(B).

Note: This does not include when prisoners advise members that they take regular medical for a pre-diagnosed medical condition.

2. A Central Booking supervisor will continue to have authority to refuse a prisoner if it is determined that arresting or conveying members failed to obtain necessary initial medical clearance for their prisoner under circumstances described above. If present, the Wellpath RN or NP may advise the Central Booking supervisor to refuse the prisoner until they are conveyed to a medical facility for clearance or additional care.

H. PROCESSING OF ARRESTS AT CENTRAL BOOKING

The arresting and/or conveying member shall remain with their prisoner during the Wellpath medical screening.

I. PROCESSING OF OTHER DISTRICT ARRESTS DETAINED AT CENTRAL BOOKING TO RECEIVE REGULAR MEDICATION

The following procedures shall apply for prisoners who would ordinarily be processed and detained at a district municipal lock up facility, but who require Wellpath to administer regular medication to them during their detention:

- 1. District prisoners shall be pre-booked at the district where they were arrested prior to their conveyance to Central Booking.
- District arresting and booking officers shall make every effort to determine what medication the prisoner takes and the condition requiring its prescription. A Central Booking supervisor shall be notified of this information prior to the prisoner's conveyance to Central Booking.
- 3. Following a re-search, and during the hours of Wellpath operations, arresting/conveying officers shall remain with their prisoner(s) while they are medically screened by a Wellpath nurse.
- 4. Before the arresting or conveying officers leave Central Booking, they shall provide

- a Central Booking supervisor with signed copies of the PA-45, a notarized CR-215 (if applicable), and an NCIC package.
- 5. In the event that an investigative hold is required for the district prisoner, the arresting or conveying officer shall be responsible for completing the hold paperwork and providing it to a Central Booking supervisor, along with the name and phone number of the investigating officer. The arresting/conveying officer shall also provide the Central Booking supervisor and the shift commander from their work location with a date and time the interviews will be completed.

J. PROCESSING OF PRISONERS RETURNING TO CENTRAL BOOKING FROM MEDICAL RUNS

- During the hours of Wellpath operations, all prisoners who are returning from a
 medical run to a hospital must see the Wellpath nurse immediately following the research conducted by a member of the Central Booking staff. Conveying officers shall
 also remain with the prisoner until the prisoner is finished with the Wellpath nurse
 and placed in a cell.
- Members conveying prisoners back to Central Booking from medical runs to medical facilities shall make three (3) copies of the prisoner's medical clearance paperwork from the treating facility. Members shall provide the clearance paperwork to a Central Booking supervisor.

K. CENTRAL BOOKING SECTION RESPONSIBILITY

- Municipal Lock-up Facility Administrator
 - a. The Municipal Lock-up Facility Administrator shall be primarily responsible for overseeing the overall operations between the Milwaukee Police Department and Wellpath.
 - b. The Municipal Lock-up Facility Administrator shall remain in regular contact with Wellpath administrators and support staff to facilitate efficient and effective operations and implementation of the contractual agreement.

2. Central Booking Supervisors

- Central Booking supervisors shall be primarily responsible for overseeing the day-to-day operations between Central Booking personnel and Wellpath staff members.
- b. Central Booking supervisors shall be primarily responsible to ensure necessary protocols are followed to ensure the safety of the Wellpath staff members as they render medical treatment to prisoners.
- c. Central Booking supervisors shall provide the incoming Wellpath nurse with all necessary medical and situational updates from the previous hours when Wellpath operations were not in service.

d. Central Booking supervisors shall ensure the incoming Wellpath nurse receives all medical paperwork from prisoners obtained during the previous hours when Wellpath operations were not in service.

3. Central Booking Officers

- a. Officers assigned to Central Booking shall work cooperatively with Wellpath staff members to ensure prisoners receive efficient and necessary medical care.
- b. Central Booking officers shall communicate with Central Booking supervisors regarding their operations with Wellpath staff members.
- c. When assigned to booking duties, Central Booking officers performing the initial medical screening for prisoners during the initial intake process will make three (3) copies of the signed prisoner medical intake screening form and provide a copy to the Wellpath nurse.
- d. Whenever a Wellpath staff member has contact with a prisoner after the arresting or conveying officer has departed, a Central Booking officer shall accompany the Wellpath staff member for the duration of that contact.
- e. During hours of Wellpath operations, Central Booking officers will perform rounds with the Wellpath nurse to administer medication to prisoners who require it. These rounds can coincide with regular cell checks, if applicable.
- f. During hours of Wellpath operations, Central Booking officers shall be responsible for escorting prisoners in need of medical assessment to and from the wellness room within Central Booking
- g. Central Booking officers shall be responsible for making detailed notational entries in JMS whenever a prisoner received medical treatment or medication from a Wellpath practitioner. These entries shall include:
 - 1. The name of the treating staff member;
 - 2. The time of the treatment:
 - 3. The reason for the treatment (specific medical complaint, regular medication administered, etc.);
 - 4. The outcome of the treatment; and
 - 5. Any other significant information.

<u>090.40 PRISONERS CONVEYED TO A DEPARTMENT MUNICIPAL LOCKUP FACILITY</u> (WILEAG 1.7.4, 7.2.2, 7.2.4, 7.2.5, 7.3.4, 7.3.8, 7.3.9)

A. ARRESTING/CONVEYING OFFICER'S RESPONSIBILITIES

4. Prior to entering the booking area of a district or the prisoner elevator of the PAB, all officers shall secure their firearms, knives, O.C., ECD conducted energy weapon, and batons in lockers provided by the department. (WILEAG 7.2.2.1)

B. PRISONER PROPERTY

4. The prisoner shall remove all items except necessary clothing, including but not limited to watches, all jewelry, shoelaces, belts, drawstrings and hats. If the prisoner does not want drawstrings removed, the item shall be taken from the prisoner and transferred with the prisoner to the Criminal Justice Facility (CJF) for adults and VPJJC for juveniles.

Note: A booker shall conduct a complete custodial re-search following the requirements set forth in sections 1-4 above whenever a prisoner is removed from, and returned to, the secure detention area of any municipal lockup facility (e.g., for an interview, medical clearance).

<u>090.170 HOSPITALIZED PRISONERS</u> (WILEAG 1.7.5, 7.1.9)

A. PRISONER ADMITTED TO HOSPITAL

As a result of HIPAA and Wisconsin privacy laws, area hospitals are not required to contact our department to inform shift commanders regarding the condition of or provide discharge information on prisoners. The federal Health Insurance Portability and Accountability Act (HIPAA) of 1996 mandated regulations that govern privacy standards for health care information. HIPAA's privacy regulation became effective April 2003, and specifies the circumstances under which protected health information may or may not be released. In general under HIPAA, either a patient or a patient's representative must authorize disclosure or protected health information or the disclosure must fit a specific exception in order for protected health information to be disclosed to law enforcement. Should an arrestee be conveyed to a hospital for medical treatment and subsequently admitted to the hospital, the arresting officer(s) shall do the following:

- 4. Members shall never place a "hospital hold" on a prisoner, thereby leaving them alone at the hospital or the Mental Health Emergency Center (MHEC).
- 5. Prisoners Held Under Chapter 51 Provisions
 - a. If a prisoner with criminal charges is being held under Chapter 51 provisions at a hospital, the member shall consult with their shift commanders to determine if they should:
 - Issue the prisoner a municipal citation
 - Release the prisoner from custody on their criminal charges with an Arrestee / Suspect Referral Memo (form PR-3A) and process the case at the District Attorney's Office in accordance with SOP 150 Court Procedures
 - Release the prisoner from custody on their criminal charges and apply for an arrest warrant

- b. If the prisoner can be released under one of the provisions in subsection a, the member shall follow SOP 160.35 as the prisoner will now only be in custody under Chapter 51 provisions.
- c. If the prisoner cannot be released from custody for their criminal charges or warrants, the member shall consult with their shift commander to evaluate if a hospital guard should be initiated.

Note: This section does not apply to prisoners being held under Chapter 51 provisions at MHEC. The member shall never place a "hospital hold" on a prisoner at MHEC and shall remain with the prisoner until a decision is made by MHEC staff to clear the prisoner or on where the prisoner should be transported.

The only exception to this will be for those prisoners being held under Chapter 51 provisions at a hospital only or when a hospital guard is initiated. The use of "hospital holds" shall only continue as it relates to prisoners who need to be medically cleared prior to being transferred to MHEC to be held under Chapter 51 provisions. The officer shall complete a blue *Medical Discharge Notice* (PD-35ED) and request that the charge nurse place it on the prisoner's medical chart. Officer(s) shall request that the charge nurse notify the shift commander of the district in which the arrest occurred when the person is about to be released.

- 6. For prisoners arrested for felonies or domestic violence related incidents, officers shall not place a hospital hold on them.
 - Note: Officers shall consult with their shift commanders and perform risk assessments of each prisoner to determine if leaving them unguarded at a hospital will pose a danger to hospital staff or result in the high probability of escape. If this risk is too great, officers should stay at the hospital until the prisoner is cleared.
- 67. Officers shall consult with their shift commanders of prisoners in need of medical attention to determine if they should:
 - Issue the prisoner a municipal citation
 - Release the prisoner with an order-in date to the district attorney's office from custody with an Arrestee / Suspect Referral Memo (form PR-3A) and process the case at the District Attorney's Office in accordance with SOP 150 Court Procedures
 - Administratively Release the prisoner from custody and apply for an arrest warrant
 - Evaluate with the shift commander if a hospital guard should be initiated
- 78. If a prisoner is admitted to a hospital under a hospital guard, the prisoner's property shall be placed on inventory.
- 89. In the event that hospital issues arise that cannot be resolved at the shift commander level, a referral shall be made to the respective commanding officer or the night watch commander (depending on the time of the day).

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090.200 PRISON RAPE ELIMINATION ACT- PREA

- B. DEPARTMENT PREA POLICY
 - 4. For a definition of sexual harassment refer to SOP 520.0510 Sexual Harassment.

JEFFREY B. NORMAN CHIEF OF POLICE

JBN:mfk