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Security of Inmates in Non-Prison Hospitals

Scott Crow, Director
Oklahoma Department of Corrections
Signature on File
It is the policy of the Oklahoma Department of Corrections (ODOC) to maintain security of inmates being transported and admitted to non-prison hospitals for medical care. These guidelines ensure that transportation, security and supervision after admission will occur in such a manner as to protect the public, the employees, and the inmates who are in the custody of ODOC. This procedure applies to ODOC facilities and to private prison contractors when transporting or supervising inmates at non-prison hospitals.

The Medical Security unit (MSU), under the supervision of the chief of security assigned to Classification and Population, will provide oversight to four distinct non-prison medical areas. These areas include the University of Oklahoma (OU) Medical Center Clinic, OU Medical Center dedicated hospital beds, Lindsay Municipal Hospital Clinic and Lindsay Municipal Hospital Ward dedicated beds. For all other beds at OU Hospital and all other non-prison hospitals, the sending facility is responsible for the custody and supervision of the inmate.

This operating procedure will apply to all inmates under the authority, custody or care of a prison or a community-based facility operated by or contracted with ODOC.

I. Definitions

For the purpose of this procedure, the following terms are defined and referenced as follows:

A. Dedicated beds

1. Lindsay Municipal Hospital (LMH) Ward - dedicated hospital beds in the ODOC secure area.

2. OU Medical Center (OUMC) - ODOC dedicated hospital beds.

B. Facility

Institutions/prisons or community-based facilities, operated by or contracted with the ODOC for the authority, custody or care (confinement) of inmate(s).

C. Lindsay Municipal Hospital Clinic (LMHC)

The clinic area at LMHC where inmates are seen on an outpatient basis for appointments/treatment, which do not require hospitalization.

D. Medical Security Unit (MSU) Officer(s)

Correctional officer(s) who are under the supervision of the chief of security assigned to Classification and Population unit, and who are responsible for the custody and supervision of an inmate admitted to dedicated beds (LMH Ward or OUMC).

E. Non-prison Hospitals
“Non-dedicated beds” at OU Medical Center and other hospitals located in the state where an inmate may be transported and admitted for medical care.

F. OU Medical Center (OUMC) Clinic

The clinic area at OUMC where inmates are seen on an outpatient basis for appointments/treatment, which do not require hospitalization.

G. Transport Officer

A sending facility’s correctional officer(s) who are under the supervision of the chief of security assigned to their facility, who are responsible for the custody of an inmate while they are receiving medical care off facility grounds and have not been admitted to dedicated beds at LMH Ward or OU Medical Center.

II. General Guidelines

While each non-prison medical area has procedures that are unique to them, general security guidelines are to be followed whenever an inmate requires medical care at a non-prison hospital. The following guidelines shall be followed whenever medical care at a non-prison hospital occurs:

A. Professional Conduct

1. Officers providing security for inmates receiving treatment or admitted to a non-prison hospital shall maintain a professional and courteous manner at all times.

2. Personal cell phones and electronic devices (e.g. iPods, iPads, laptops, MP3 players) or headphones are prohibited.

B. Transportation

The transportation of inmates will be conducted in accordance with OP-040111 entitled “Transportation of Inmates” and transport officers shall follow “Security Standards for Transportation of Inmates” (OP-040111, Attachment B).

All inmates being transported to outside medical appointments at OU Medical Center, Lindsay Hospital and all other non-prison hospitals will wear handcuffs, belly chains, leg irons and handcuff covers if held in a holding cell, with the exception of pregnant inmates unless an “Authorization to Apply Restraints to a Pregnant Inmate” form (DOC 040111A) has been approved.
C. **Weapon Security**

The security of weapons when providing transportation to non-prison hospitalsclinics shall be as outlined below for each area:

1. **Lindsay Municipal Hospital Clinic**:
   
   a. Upon arrival, one transport officer will remain in the sally port with the weapon(s). The second transport officer will secure the inmate(s) in the holding area. After the inmate is secured, the first officer will secure the weapon(s) in a lock box and retain the key until ready to leave, or secure the weapons in a lock box located in the vehicle as approved by the sending facility. The vehicle will then be moved to the parking area.

   b. After the inmate has completed the medical appointment/treatment and is ready to leave the holding area, the inmate’s restraints will be checked prior to the officers removing their weapons from the lock box.

   c. If only one transport officer is transporting minimum-security inmates or below, no weapons are required. The transport officer will secure the inmate in the holding area.

2. **OU Medical Center (OUMC) Clinic**:

   a. Upon arrival at the holding area, the transport officers will secure their weapons in the lock boxes or secure their weapons in a lock box located in the vehicle, as approved by the sending facility. One transport officer will secure weapons and the second transport officer will secure the inmate(s) in the holding cell. If the lock box area is not available at the holding area, one officer will remain outside with the weapons while the second officer secures the inmate in the holding area.

   b. After the inmate has completed the medical appointment/treatment and is ready to leave the holding area, the inmate’s restraints will be checked prior to the officers removing the weapons from the lock box.

   c. If only one transport officer is providing transport for minimum-security inmates or below, no weapons are required. The transport officer will secure the inmate in the holding area.

3. **OU Medical Center (dedicated beds)**

   Two officers will provide security and shall be armed for medium security or above inmates.
a. Officers will remain in the designated area with the inmate(s) at all times and maintain a safe distance from the inmate(s).

b. In the event an officer is required to physically restrain an inmate, the secondary officer shall take custody of the weapons to keep the weapons inaccessible to the inmate.

4. Non-prison hospitals (non-dedicated beds):

Two officers will provide security and shall be armed for medium security or above inmates.

a. Officers will remain in the room with the inmate at all times and maintain a safe distance from the inmate unless a medical condition warrants the officer(s) to remain outside the hospital room.

b. In the event an officer is required to physically restrain an inmate, the secondary officer will take custody of their weapons to keep the weapons inaccessible to the inmate.

D. Reduction of Security

In the event a medium security inmate is terminally ill and/or physically incapacitated, security coverage may be reduced from two officers to one based on the inmate’s medical condition. Reduction of security may also be considered when more than one inmate is housed in the same hospital or hospital room (e.g., two officers would not be required for each hospitalized inmate). Any reduction in security will be approved in advance by the affected administrator.

E. Restraints

Inmates will wear restraints while being transported and receiving treatment as outlined in OP-040111 entitled “Transportation of Inmates.”

1. In the event the attending physician requires removal of restraints to provide treatment to the inmate during a clinic appointment, only the restraints in the area of treatment will be removed. Upon completion of the inmate’s treatment, the restraints will be reapplied to the inmate.

2. Upon admission to any hospital, inmates (with the exception of pregnant inmates unless an “Authorization to Apply Restraints to a Pregnant Inmate” form (DOC 040111A) has been approved) will wear leg restraints attached to the bed unless the attending physician and the ODOC chief medical officer, in consultation with the sending facility head, determine that leg restraints would prove harmful to the
inmate. The ODOC chief medical officer will determine final approval for removal of leg restraints. Notification will be made to the sending facility’s chief of security for documentation.

F. Hospital Room Security

1. Prior to an inmate being placed in a room, officers shall search the room for contraband.

2. Officers shall remove items that could be used to aid in escape or cause harm to staff.

3. Officers shall ensure that any telephones in the room are removed.

4. Prior to each meal, officers shall check food trays and ensure that metal utensils are not issued. If there is no alternative, officers shall ensure that the utensils are returned with the tray.

5. Any time an inmate room is left unoccupied or non-security staff enters an inmate room, officers will search the room for contraband.

G. Reception of Inmates Housed in County Jails

If an inmate housed in a county jail is sentenced to ODOC but not yet received at Lexington Assessment and Reception Center (LARC) or Mabel Bassett Assessment and Reception Center (MBARC) and becomes in need of hospitalization, the county jail will notify the ODOC chief medical officer or their designee. The chief medical officer or their designee is responsible for contacting the Classification and Population unit to obtain authorization for MSU to accept the inmate at the LMH Ward or OU Medical Center dedicated beds. Once approved, the county will transport the inmate to the approved ward where the inmate will be received by MSU officer upon admission to the hospital and receipt of an appropriate Judgment and Sentence.

H. Discharges

When an inmate discharges from the LMH Ward or OU Medical Center dedicated beds, the sending facility will not assume responsibility for the inmate until the inmate is discharged from the hospital and facility staff receives physical custody of the inmate. Upon notification by MSU staff that the inmate is being discharged, the assigned facility is required to provide transportation, the inmate is required to be picked up the same day as notification.

1. On weekends or designated state holidays, JHCC would be responsible for transporting male inmates that discharged (LMH and OU) and transporting them back to JHCC to be held temporarily until
the sending facility arrives to take custody. MBCC would be responsible for transporting female inmates that discharged (LMH and OU) and transporting them back to MBCC to be held temporarily until the sending facility arrives to take custody.

2. For discharges of inmates received directly from county jails, MSU will contact the appropriate assessment and reception center. MSU will transport the inmate to the appropriate assessment and reception center for processing.

I. Deaths

For all deaths that occur at any non-prison hospital (dedicated beds and non-dedicated beds) the sending facility will report the death to the appropriate administrator in accordance with OP-050108 entitled “Use of Force Standards and Reportable Incidents.”

1. Upon the death of an inmate admitted to the dedicated beds (LMH Ward or OU Medical Center), the MSU shift supervisor will immediately notify the sending facility and the Classification and Population chief of security.

2. Upon the death of an inmate admitted to a non-prison hospital, the sending facility transport officers will immediately notify the chief of security/duty officer from the sending facility.

J. Visitation

Visitation will not be granted for inmates receiving outpatient care at Lindsay Municipal Hospital Clinic and the OU Medical Center Clinic.

Inmates who are admitted to any non-prison hospital (dedicated beds (LMH Ward/OU Medical Center and non-dedicated beds)) may be granted visitation. Inmates may not normally have visitors or telephone calls except in extreme circumstances, such as when an inmate is in critical condition (life threatening/terminal) or admitted for an extended period, normally two weeks or longer.

1. Any visits or calls must be approved in advance by the sending facility head and all approved visitation shall be forwarded to the Classification and Population chief of security for scheduling.

2. Visits may be conducted with immediate family members only, as defined in OP-030118 entitled “Visitation.” A copy of the inmate’s approved visitor list or verification of the relationship will be obtained by the sending facility.
3. An attorney/clergy may visit the inmate in the hospital with advance written approval of the sending facility head. A copy of the approval will be forwarded to the Classification and Population chief of security for scheduling.

K. Death Row/High Risk Inmates

1. High Risk Inmates

If an inmate is considered high risk by the sending facility, the sending facility’s chief of security will notify the Classification and Population chief of security prior to the inmate’s arrival at LMH Ward or clinic, or the OU Medical Center (dedicated beds) or clinic, and appropriate arrangements will be made for the security of the inmate.

2. Death Row Inmates

a. When a death row inmate has an appointment at LMH clinic, OU Medical Clinic or on the OU Medical Center Complex, the security of the inmate will be the responsibility of the sending facility.

b. Death row inmates will be single-celled in holding cells at LMH or OU Medical Center clinics.

c. For death row inmates admitted to the LMH Ward (dedicated beds):

   (1) MSU will be responsible for the security of the inmate and will be coordinated between the administrator of Population and Classification and the administrator of Institutions.

   (2) One officer will be posted outside the inmate’s hospital room at all times and will document the inmate’s behavior every 30 minutes.

d. For death row inmates admitted to the OU Medical Center (dedicated beds):

   (1) The sending facility will be responsible for the security of the inmate.

   (2) Two sending facility officers will remain in the hospital room with the inmate at all times.

e. For death row inmates admitted to all other non-prison hospitals (non-dedicated beds):
(1) The sending facility will be responsible for the security of the inmate.

(2) Two sending facility officers will remain in the hospital room with the inmate at all times.

(3) A third facility officer will be posted outside the entrance to the inmate’s room at all times.

L. Escapes

1. For escapes that occur while the inmate is in the custody and supervision of MSU officers (dedicated beds at LMH Ward or OU Medical Center):
   a. The MSU shift supervisor for the assigned location will follow the escape procedures outlined in OP-050103 entitled “Escape Notification Procedures.”
   b. The Classification and Population chief of security and sending facility head or duty officer will be notified immediately.

2. For escapes from LMH clinic, OU Medical clinic and all other non-prison hospitals (non-dedicated beds):
   a. The sending facility transport officer will follow the escape procedures outlined in OP-050103 entitled “Escape Notification Procedures” and any post orders/field memorandums of the affected facility.
   b. The Classification and Population chief of security, and sending facility head will be notified immediately.

M. Inmate Disciplinary Procedures

All inmates at non-prison hospitals remain subject to OP-060125 entitled “Inmate/Offender Disciplinary Procedures.” All inmates will comply with “Rules for Hospitalized Inmates” (Attachment A, attached) and with hospital and patient rules, regardless of their custody level. If the inmate is unable to sign, the transport officer will note the inmate is unable to sign and the officer will then initial and date the form. Once the inmate is able, the rules will be conveyed by MSU staff and the inmate will sign the acknowledgement.

III. Lindsay Municipal Hospital Ward
A. General Security Guidelines

1. All arrivals to the LMH Ward will enter through the designated west entrance sally port.

2. For inmates at the LMH Ward who are referred to another non-prison hospital for treatment, MSU officers will provide transportation to the non-prison hospital. If the inmate is admitted to another non-prison hospital, the inmates sending facility’s chief of security will be notified by MSU and upon notification of admission to the hospital will be responsible for assuming custody of the inmate and providing security.

3. Only inmates with appointments at the hospital are allowed in the holding cell unsupervised. Any inmate transported for reasons other than treatment must be supervised by the sending facility.

4. Hospital Admittance

Hospital staff will normally provide notification to the shift supervisor at LMH of admission to the LMH Ward (dedicated beds) for all ODOC inmates, to include community custody inmates.

a. Inmates will be escorted to their assigned bed by MSU staff and a copy of the “Consolidated Record Card” (DOC 060211H) will be provided to the MSU shift supervisor by sending facility officers.

b. Upon admission, inmates at the LMH Ward will sign an acknowledgement of “Rules for Hospitalized Inmates” (Attachment A, attached). If the inmate is unable to sign, the MSU shift supervisor will note the inmate is unable to sign and the officer will then initial and date the form. Once the inmate is able, the rules will be conveyed by MSU staff and the inmate will sign the acknowledgement.

B. Inmate Supervision

1. All inmates will remain in the officer’s direct line of sight when outside the hospital medical unit or holding cell, with the following exceptions:

   a. Surgery

   After anesthesia is applied and medical personnel take the inmate into surgery, MSU officers are to remain outside the recovery room until the surgery is completed, unless hospital staff requests assistance.

   b. Recovery
After a surgical procedure, hospital staff will notify the assigned MSU officer(s) when the inmate is out of surgery. At that time, the MSU officer(s) will enter and remain in the recovery room until the inmate is ready to return to ambulatory surgery or transfer to the hospital ward.

(1) At the discretion of the Classification and Population chief of security, more than one MSU officer may be assigned to the recovery room detail if the inmate is high profile, death row, escape risk, behavior risk, etc.

c. Emergency Room Visits

(1) Transport officer(s) will bring the inmate through the west entrance of the building, through the sally port. The inmate will be evaluated by hospital staff in a designated room on the ward. Transport officers are not to take inmates' directly into the emergency room.

(2) If an inmate is transported by ambulance, the officer will stay with the inmate and allow the ambulance Emergency Medical Technicians (EMT’s) to take the inmate to the appropriate area.

(3) Transport officers will remain with the inmate at all times.

IV. Lindsay Municipal Hospital Clinic

A. General Security Procedures

1. Transporting Inmates

   a. All arrivals to the LMH clinic will enter through the designated west entrance sally port.

   b. Transport officers must escort and supervise inmates while at the LMH clinic until the inmates’ appointments are finished, or they are admitted to the hospital.

2. All inmates brought to the LMH clinic will be held in the holding cell until they are seen for their appointment or admitted to the hospital.

   a. Only inmates with appointments at the hospital are allowed into the holding areas.

   b. The holding area will remain open until all inmates have left the clinic.
B. Clinic Security

1. Outpatient Procedures

At LMH clinic, all inmates will remain in the transport officer’s direct line of sight when outside the hospital medical unit or holding cell, with the following exceptions:

a. Surgery

After anesthesia is applied and medical personnel take the inmate into surgery, transport officers will remain outside the recovery room until the surgery is completed, unless hospital staff requests assistance.

b. Recovery

After a surgical procedure, hospital staff will notify the assigned transport officer(s) when the inmate is out of surgery. At that time, the transport officer will enter and remain in the recovery room until the inmate is ready to return to ambulatory surgery or transfer to the hospital medical unit.

(1) At the discretion of the sending facility’s chief of security, more than one transport officer may be assigned to the recovery room detail if the inmate is high profile, death row, escape risk, behavior risk, etc.

V. OU Medical Clinic

A. General Security Procedures

1. Transporting Inmates

All inmates must be escorted by the transport officer(s) from their facilities when brought to OU Medical Clinic for scheduled medical appointments.

2. All inmates brought to OU Medical Clinic will be held in the holding cell until they are seen for their appointment or admitted to the hospital.

a. Only inmates with appointments at the hospital are allowed in the holding cell. Any inmate transported for reasons other than treatment must be supervised by the sending facility.
b. The holding area will remain open until all inmates have left the clinic.

B. OU Clinic Appointments

1. After weapons have been secured and the inmate(s) has been placed in the holding cell, transport officers will report to the MSU shift supervisor and sign-in on the designated log.

2. Transport officers from the sending facility will supervise inmate(s) who have appointments within the OU Medical Clinic.

3. At the time of the inmate’s appointment, the transport officer will retrieve the inmate from the holding cell and escort the inmate to the designated examination room.

4. The inmate will remain restrained at all times in accordance with OP-040111 entitled “Transportation of Inmates” unless the attending physician needs the restraints removed to complete their exam. If so, only the restraints in the respective area of treatment will be removed. As soon as the inmate’s treatment is concluded, the restraints will be placed on the inmate.

5. Transport officers will remain with the inmate during the course of the examination/treatment.

6. Upon completion of the appointment, the inmate will be escorted back to the holding cell.

7. Prior to departure to the sending facility, the transport officers will report to the MSU shift supervisor and sign-out on the designated log.

C. All Other Appointments on the OU Health Center Complex

1. Any appointments that are not inside the OU Medical Clinic but occur at the OU Health Center Complex shall be reported to the MSU holding shift supervisor via telephone.

   a. Each inmate being transported throughout the complex will be individually reported/logged in.

   b. The appointment time, location and transport officer(s) name/rank and facility will be noted on the MSU sign-in log.

   c. After an inmate has finished treatment at the complex, transport officers will notify the MSU shift supervisor of their departure to the sending facility. The MSU shift supervisor will sign them out on the MSU log.
2. For appointments on the OU Health Center Complex, transport officers will adhere to hospital procedures in accordance with "OU Medical Center Rules for Escorting Inmates" (Attachment B, attached) regarding the transport of inmates while on the complex. A copy of hospital procedures for transporting inmates will be kept in the OU Medical Clinic holding area.

D. After Hours Transport to OU Medical Center

If transport officers arrive at the OU Medical Clinic outside of normal business hours and MSU security staff is not present, the transport officers from the sending facility will contact MSU security, located at the OU Medical Center to advise of their arrival. MSU officers will give transport officers access to the OU Medical Clinic area.

VI. OU Medical Center (Dedicated Beds)

A. General Security Procedures

1. Supervision of Inmates

Transport officers will maintain supervision of an inmate until physical custody of the inmate is transferred to MSU officers.

2. For inmates who are referred for services in another location on the OU Health Center Complex or another non-prison hospital for treatment, MSU officers will provide transportation. If the inmate is admitted to a non-prison hospital, the inmate’s assigned facility will be notified by MSU and will be responsible for assuming custody of the inmate upon notification of admission to the hospital.

3. Hospital Admittance

Inmates admitted to the OU Medical Center (dedicated beds) will normally be admitted via notification by hospital staff to the MSU shift supervisor at OU Medical Center. Transport officers will maintain supervision of the inmate until physical custody has been transferred to MSU officers at the OU Medical Center.

   a. Inmates will be escorted to their assigned bed by MSU staff and a copy of the “Consolidated Record Card” (DOC 060211H) will be provided to the MSU shift supervisor by sending facility officers.

   b. Upon admission, inmates at the OU Medical Center will sign an acknowledgement of “Rules for Hospitalized Inmates” (Attachment A, attached). If the inmate is unable to sign, the
MSU shift supervisor will initial and date the form and note the inmate was unable to sign. Once the inmate is able, the rules will be conveyed and the inmate will sign the acknowledgement.

B. **Hospital Security**

1. At the OU Medical Center, all inmates will remain in the MSU officer's direct line of sight when outside the hospital room with the following exceptions:

   a. **Surgery**

      After anesthesia is applied and medical personnel take the inmate into surgery, officers are to remain outside the recovery room until the surgery is completed, unless called by hospital staff.

   b. **Recovery**

      After a surgical procedure, hospital staff will notify the assigned MSU officer(s) when the inmate is out of surgery. At that time, the officer will enter the recovery room until the inmate is ready to return to ambulatory surgery or transfer to the hospital medical unit.

      (1) For inpatient procedures, MSU officers will be notified upon completion of surgery and will wait inside the recovery room with the inmate until the inmate is returned to their assigned bed.

      (2) At the discretion of the Classification and Population chief of security, more than one officer may be assigned to the recovery room detail if the inmate is high profile, death row, escape risk, behavior risk, etc.

   c. **Emergency Room Transports**

      (1) The transport officer will register the inmate at the main desk in the emergency room waiting area. The triage nurse will assess the inmate's medical condition.

      (2) Depending on the inmate's medical condition, the officer may be directed to wait in the main emergency waiting area until a room is available, or until the inmate is taken into the emergency room treatment area. Transport officer(s) will remain with the inmate at all times while in the emergency room.
(3) If the inmate is transported by ambulance, the officer will stay with the inmate and allow the ambulance Emergency Medical Technicians (EMT) to take the inmate to the appropriate area.

(4) Transport officers are to remain in the treatment room with the inmate.

VII. All Other Non-Prison Hospitals

A. General Security Guidelines

For an inmate who is transported and subsequently admitted to non-prison hospital, the following shall occur:

1. Transporting Inmate
   a. Transport officers must escort and supervise the inmate while at non-prison hospitals.

2. Admission
   a. Upon admission, the inmate will sign an acknowledgement of “Rules for Hospitalized Inmates.” ([Attachment A](attachmentA), attached). If the inmate is unable to sign, the transport officer will initial and date the form and note the inmate was unable to sign. Once the inmate is able, the rules will be conveyed and the inmate will sign the acknowledgement.

B. Hospital Security

All inmates will remain in the transport officer's direct line of sight with the following exceptions:

1. Surgery

   After anesthesia is applied and medical personnel take the inmate into surgery, officers are to remain outside the recovery room until the surgery is completed, unless called by hospital staff.

2. Recovery

   After a surgical procedure, hospital staff will notify the assigned officer(s) when the inmate is out of surgery. At that time, the officer(s) will enter the recovery room until the inmate is ready to return to ambulatory surgery or transfer to a hospital ward/room.
C. **Emergency Room Transport**

1. The transport officer will register the inmate at the main desk in the emergency room waiting area. The triage nurse will assess the inmate’s medical condition.

2. Depending on the inmate’s medical condition, the officer may be directed to wait in the main emergency waiting area until a room is available, or until the inmate is taken into the emergency room treatment area. Transport officer(s) will remain with the inmate at all times while in the emergency room.

3. If the inmate is transported by ambulance, the officer will stay with the inmate and allow the ambulance EMT’s to take the inmate to the appropriate area.

4. Transport officers are to remain in the treatment room with the inmate.

VIII. **References**

Policy Statement P-040100 entitled “Security Standards for the Oklahoma Department of Corrections”

OP-030118 entitled “Visitation”

OP-040111 entitled “Transportation of Inmates”

OP-050103 entitled “Escape Notification Procedures”

OP-050108 entitled “Use of Force Standards and Reportable Incidents”

OP-060125 entitled “Inmate/Offender Disciplinary Procedures”

IX. **Action**

The facility/unit head will be responsible for the development of local procedure/post orders.

The chief administrator of Institutions/Community Corrections and Contract Services will be responsible for compliance with this procedure.

The chief administrator of Institutions will be responsible for the annual review and revisions.

Any exceptions to this procedure will require prior written approval from the agency director.

This procedure is effective as indicated.
Replaced: OP-040114 entitled “Security of Inmates in Non-Prison Hospitals”
dated December 10, 2020

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Agency Website
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