Jail Administrator Training

Barry Edwards | Program Manager
Detention Program – Jail Inspections
Detention p. 405-426-8170 | f. 405-900-7575
jails@health.ok.gov | jails.health.ok.gov
Jail Administrator Training
March 8, 2022

- **Type of Inspections**
  - Annual
  - Follow-up/Revisit
  - Investigations (Complaints & Incidents)

- **Inspection Process**
  - Entrance Meeting (Complete Facility Contact and Data Form, Request Documents for Review)
  - Facility Tour (All Areas, Inmate Living, Food Service, Medical, Laundry, Recreation, Booking, Mechanical Rooms, Control Center, Etc.)
  - Exit Meeting (Administrator’s Opportunity to discuss findings, provide explanations, and provide supporting documentation prior to conclusion of the inspection)

- **Documenting Deficiencies**
  - Observation
  - Record Review
  - Interview

- **Deficiency Frequency**

- **Required Policies and Procedures / Post Orders**

- **Staff Training and Documentation**

- **Sight Checks**

- **Safety Fire Prevention**
  - Fire and Evacuation Plan Approval
  - Fire Drills (Quarterly)
  - Sample Fire Drill Form
  - Fire Watch

- **Incident Reporting to OSDH**

- **Questions?**

**Barry Edwards | Program Manager**
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Type of Inspections
• Type of Inspections
  o Annual
  o Follow-up/Revisit
  o Investigations (Complaints & Incidents)
Inspection Process
• Inspection Process
  
  o Entrance Meeting (Complete Facility Contact and Data Form, Request Documents for Review)
  
  o Facility Tour (All Areas, Inmate Living, Food Service, Medical, Laundry, Recreation, Booking, Mechanical Rooms, Control Center, Etc.)
  
  o Exit Meeting (Administrator’s Opportunity to discuss findings, provide explanations, and provide supporting documentation prior to conclusion of the inspection)
JAIL DATA & CONTACT FORM

Site Visit Purpose: ☐ Annual Inspection ☐ Investigation ☐ Follow-up Inspection

Facility Type (check two): ☐ City ☐ County ☐ Lock-Up ☐ Detention

Facility: ________________________________  Address: ________________________________

City: ________________________________  County: ________________________________  Zip: ______________

Sheriff/Chief: __________________________  Phone: __________________________  E-Mail: __________________________

Jail Admin: ____________________________  Phone: __________________________  E-Mail: __________________________

Escorting Staff: __________________________  Phone: __________________________  E-Mail: __________________________

Commissioners/Trust E-Mails: ____________________________________________________________

Staffing:  
Day Shift  (M) ________  (F) ________  
Evening Shift  (M) ________  (F) ________  
Night Shift  (M) ________  (F) ________

Rated Capacity: ________________

Population Today: ________________  DOC J&S ________________

Male: ________  Female: ________  Juvenile Male: ________  Juvenile Female: ________

Total Beds: Male: ________  Female: ________  Juvenile Male: ________  Juvenile Female: ________

Medical Authority: ____________________________________________________________

Food Service Operations By: __________________________________________________________

Automatic Fire & Smoke Alarm System: ☐ Yes ☐ No

Automatic Fire Sprinkler System: ☐ Yes ☐ No

Inspector/Investigator: ☐ Scott Kennedy ☐ David Boydston ☐ Barry Edwards

Date: ____________________________
### Admission/Release Records
- Booking Records
- Medical/Mental Health questionnaire
- Classification
- Admission and Release Log (outside hospital)

### Security and Control
- Inmate roster (24 hours) (show housing, sentenced and un-sentenced, male, female, juveniles)
- Sight Check Logs (24 hours/all areas)
- Count Logs (24 hours)
- Suicide/Observation (24 hours)
- Post Orders
- Weekly security inspection
- Backup Generator/Battery Log
- Emergency Generator/Locking system

### Supervision
- Staff Roster (24 hours)
- Posted name/number of Attorney/Bonds Person

### Rules/Discipline/Grievance
- Inmate Rule Book (issued at booking)
- Written rules, specify offense/sanction
- Staff Incident Reports
- Investigative Reports
- Grievance policy/procedure
- Written grievance denials/each level
- Grievance Log
- Staff grievance response

### Safety, Sanitary/Hygiene
- Housekeeping plan
- Cleaning supply issue log
- Cleaning Safety Data Sheet
- Maintenance Records/Work Orders
- Pest Control Schedule/Log
- Pest Control Safety Data Sheets
- Clothing/Bedding issuance schedule
- Clothing/Bedding issuance log
- Laundry schedule
- Laundry exchange log
- Shower log
- Razor policy
- Razor issuance log
- Fire Protection/Inspection & Testing Documentation (Fire panel/Sprinkler/Hood Vent)
- Fire & Evacuation Plan approved by Local Fire Chief
- Fire Drills

### Food services/requirements
- Kitchen Supervisor
- Dietician approved Menu
- Special diet
- Meal record/log for last month
- Refusal to eat log
- Sanitation schedule
- Food Service OSDH Inspection
- Food Service Provider Contract

### Medical
- Intake screening upon admission/prior to placement in housing
- Medications at Booking
- Emergency plans (24hr care)
- Inmate request to staff for medical attention/prescription
- Staff response to inmate requesting medical attention/prescription
- Sick call log
- Medical Administration Report (MAR) for last 30 days
- Non Prescription issuance policy/procedure

### Training
- Approved Training Curriculum
- New Employee Orientation training log
- Initial training log (24Hrs first year)
- Annual training log

### Provide the following documents for each detainee/inmate listed below:

<table>
<thead>
<tr>
<th>#</th>
<th>Date</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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<tr>
<td>9</td>
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</tr>
</tbody>
</table>
• **Inspection Process**
  
  o Entrance Meeting (*Complete Facility Contact and Data Form, Request Documents for Review*)
  
  o Facility Tour (*All Areas, Inmate Living, Food Service, Medical, Laundry, Recreation, Booking, Mechanical Rooms, Control Center, Etc.*)
  
  o Exit Meeting (*Administrator’s Opportunity to discuss findings, provide explanations, and provide supporting documentation prior to conclusion of the inspection*)
Documenting Deficiencies
• Documenting Deficiencies
  o Observation
  o Record Review
  o Interview
Deficiency

Frequency
# ASPEN: Tag Summary Report (TAG1)

**from 01/01/2021 thru 12/31/2021**

**ST - G7E6 - P - Detention Facility**

<table>
<thead>
<tr>
<th>Tag</th>
<th>Cite Frequency</th>
<th>Average Severity</th>
<th>Average Scope</th>
</tr>
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<tbody>
<tr>
<td>5623 - Detention Facilities-Safety Fire Prevention</td>
<td>56</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>5202 - Detention Facilities-Hourly Sight Checks</td>
<td>27</td>
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<td>0.00</td>
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<tr>
<td>6218 - Detention Facilities-Bunks/Storage by Sq Foot</td>
<td>21</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>5601 - Detention Facilities-Kept Clean Condition</td>
<td>20</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>6101 - Detention Facilities-Double Cell Min 60sq ft</td>
<td>14</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>6103 - Detention Facilities-Light MIN 20 Ft Candles</td>
<td>13</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>5604 - Detention Facilities-Routine Cleaning Supply</td>
<td>12</td>
<td>0.00</td>
<td>0.00</td>
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<tr>
<td>5201 - Detention Facilities-Count At Start of Shift</td>
<td>11</td>
<td>0.00</td>
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<tr>
<td>5603 - Detention Facilities-Floors Clean/Dry/Clear</td>
<td>11</td>
<td>0.00</td>
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<tr>
<td>5302 - Detention Facilities-Staff Respond PHYS/CCTV</td>
<td>10</td>
<td>0.00</td>
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<tr>
<td>5626 - Detention Facilities-Material Fire Compliance</td>
<td>10</td>
<td>0.00</td>
<td>0.00</td>
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<tr>
<td>6216 - Detention Facilities-First 40sq; Second 20sq</td>
<td>10</td>
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<tr>
<td>5620 - Detention Facilities-Water Standards;Hot/Cold</td>
<td>8</td>
<td>0.00</td>
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<tr>
<td>6001 - Detention Facilities-New Staff Orientation</td>
<td>8</td>
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<td>0.00</td>
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<tr>
<td>5802 - Detention Facilities-Prescription Possession</td>
<td>7</td>
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<tr>
<td>6012 - Detention Facilities-Annual Required Training</td>
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<td>3021 - Lockup Facilities-MIN Fire Safety;Smoke/SPLR</td>
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<td>5608 - Detention Facilities-Issue Cleanable Mattress</td>
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<td>6011 - Detention Facilities-Requirements</td>
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<td>1505 - Policy and Procedures - Signature &amp; Dates</td>
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<tr>
<td>5102 - Detention Facilities-A&amp;R MED/Mental Screening</td>
<td>5</td>
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<tr>
<td>5501 - Detention Facilities-Opposite Sex Housing REQ</td>
<td>5</td>
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<tr>
<td>5606 - Detention Facilities-ADMIN Hygiene Issue</td>
<td>5</td>
<td>0.00</td>
<td>0.00</td>
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<tr>
<td>5708 - Detention Facilities-Menus Approved Dietician</td>
<td>5</td>
<td>0.00</td>
<td>0.00</td>
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<tr>
<td>5800 - Detention Facilities-Develop Health Care Plan</td>
<td>5</td>
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</tr>
</tbody>
</table>
Required Policies & Procedures
310:670 City and County Detention Facility Standards, (POLICY AND PROCEDURES)

310:670-1-3. Implementation and inspection

- A local facility administrator shall develop and implement written policies and procedures pertaining to the daily management and operation of the facility. Each facility shall develop and maintain an operations manual sufficient to demonstrate compliance with the standards in Section 1 of Subchapter 3 of this Chapter, or Section 1 of Subchapter 5 of this Chapter.
**Lockup Facilities:**

- **310:670-3-1 Basic Standards.** Written policy and procedures for the operation of a lockup facility.
Detention Facilities:

- 310:670-5-1. Written policies and procedures for admission, release, and records of inmates.
- 310:670-5-2. Written policies and procedures for the safety, security and control of staff, inmates and visitors.
- 310:670-5-3. Written policies and procedures for supervision of inmates.
- 310:670-5-5. Written policies and procedures for classification and segregation of inmates.
- 310:670-5-6. Written policies and procedures for the safety, sanitary and hygiene.
- 310:670-5-7. Written policies and procedures for Food Services and dietary requirements.
- 310:670-5-8. Written policies and procedures for Medical care and health services.
- 310:670-5-9. Written policies and procedures for Mail and visitation
- 310:670-5-10. Written policies and procedures for Training and staff development
- 310:670-5-11.(a) Existing facilities. Written policies and procedures for existing physical plant
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Lockup Facilities:

- 310:670-3-1 Basic Standards. Written policy and procedures for the operation of a lockup facility.

Detention Facilities:

- 310:670-5-1. Written policies and procedures for admission, release, and records of inmates.
- 310:670-5-2. Written policies and procedures for the safety, security and control of staff, inmates and visitors.
- 310:670-5-2-(17) A post order shall be prepared for each post or duty assignment to be performed, and it shall specify the procedure to be followed for completing the assignment
- 310:670-5-3. Written policies and procedures for supervision of inmates.
- 310:670-5-5. Written policies and procedures for classification and segregation of inmates.
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- 310:670-5-9. Written policies and procedures for Mail and visitation
- 310:670-5-10. Written policies and procedures for Training and staff development
- 310:670-5-11.(a) Existing facilities. Written policies and procedures for existing physical plant

Juvenile Offenders:

- 310:670-7-1. Standards for detention facilities holding juvenile offenders.
- 310:670-7-2. Certification of detention facilities holding juvenile offenders.
- 310:670-7-3. Recording and reporting the use of detention facilities to hold juvenile offenders.

Barry Edwards | Program Manager
Oklahoma State Department of Health | Detention Program
Detention p. 405-426-8170 | f. 405-900-7575
health.ok.gov | jails.health.ok.gov
Post Orders
TITLE 310. OKLAHOMA STATE DEPARTMENT OF HEALTH

CHAPTER 670. CITY AND COUNTY DETENTION FACILITY STANDARDS

SUBCHAPTER 5. STANDARDS FOR DETENTION FACILITIES

Post Orders

310:670-5-2. Security and control The facility administrator shall develop and implement written policies and procedures for the safety, security and control of staff, inmates and visitors. Policies and procedures shall address at least the following:

(17) A post order shall be prepared for each post or duty assignment to be performed, and it shall specify the procedure to be followed for completing the assignment.
Staff Training and Documentation
Training and staff development

(a) Training policies. The administrator shall develop policies and procedures for staff orientation and training. The training program shall be supervised by a designated employee. A facility with more than one hundred (100) employees shall employ a full-time person for staff orientation and training.

(b) Training and testing requirements. Policies and procedures shall include at least the following requirements for training:

1. New employee orientation (Prior to job assignment)
2. New employee training 24 hours (during 1st year)
3. Annual Training 8 hours
(4) A documentation log shall be maintained by the Administrator to record the courses completed by each employee for their initial and annual training and include test results.
Sight Checks
310:670-1-2. Definitions

"Sight check" means when a Detention Officer physically observes an inmate.
SUBCHAPTER 3. STANDARDS FOR LOCKUP FACILITIES

310:670-3-1. Basic standards
   (10) Hourly visual sight checks shall be conducted and documented.
SUBCHAPTER 5. STANDARDS FOR DETENTION FACILITIES

310:670-5-2. Security and control

(3) There shall be at least one (1) visual sight check every hour which shall include all areas of each cell, and such sight checks shall be documented.
310:670-5-8. Medical care and health services

(2) Intake screening shall be performed on all inmates immediately upon admission to the facility and before being placed in the general population or housing area. An inmate whose screening indicates a significant medical or psychiatric problem, or who may be a suicide risk, shall be observed frequently by the staff consistent with the facility's policy and the identified need until the appropriate medical evaluation has been completed. After medical evaluation, these inmates may be assigned to housing consistent with the medical evaluation.
Fire Safety Prevention
SUBCHAPTER 3. STANDARDS FOR LOCKUP FACILITIES

310:670-3-1. Basic standards

(12) The facility shall comply with applicable building and fire safety codes of the State Fire Marshall as provided in Title 74 O.S. § 317 et seq.

(14) Minimum Fire Safety Requirements:
(A) Automatic smoke detection. The facility shall be equipped with a smoke detection system and a sprinkler system that is approved by the Fire Marshal.
(B) Bedding. Polyurethane foam mattresses, pads and pillows are prohibited. Mattresses that are in compliance with the requirements of the State Fire Marshall shall be used.
(C) Emergency lighting. Each facility shall have emergency lighting that meets the minimum standards of the State Fire Marshall.
(D) Supervision of inmates. Detention Officer posts shall be located and staffed close enough to the lockup area to permit Detention Officers to hear and respond promptly to calls for assistance, and provide immediate response to emergencies.
(E) Exits. There shall be designated and marked emergency evacuation exits that comply with the requirements of the State Fire Marshall.
310:670-5-6. Safety, sanitary and hygiene standards

(21) The facility's fire prevention policies and procedures shall ensure the safety of staff, inmates and visitors and shall conform to the requirements of the Oklahoma State Fire Marshal, as provided in Title 74 O.S. § 317 et seq. These shall include, but not be limited to an adequate fire protection service; a system of fire inspection and testing of equipment and documentation on a weekly basis; and the availability of fire hoses or extinguishers at appropriate locations throughout the facility. The facility shall have an automatic fire alarm and heat and smoke detection system approved by the Oklahoma State Fire Marshal, as provided in Title 74 O.S. § 317 et seq.

(22) The facility shall have a written evacuation plan in the event of fire or major emergency. Inmates shall be instructed on emergency procedures.

(23) There shall be a reliable means to permit prompt release of inmates from locked areas in case of emergency. The route of evacuation shall be posted in conspicuous locations throughout the facility.

(24) Facility furnishings, walls, ceilings and floors shall be constructed of material that meets the code requirements of the Oklahoma State Fire Marshal, as provided in Title 74 O.S. § 317 et seq.
• Fire Safety Prevention
  o Fire and Evacuation Plan Approval
  o Fire Drills (Quarterly)
  o Sample Fire Drill Form
  o Fire Watch
403.7.1.4 Emergency drills.
Emergency drills of the on-site emergency response team shall be conducted on a regular basis but not less than once every three months. Records of drills conducted shall be maintained.

405.5 Record keeping.
Records shall be maintained of required emergency evacuation drills and include the following information:

1. Identity of the person conducting the drill.
2. Date and time of the drill.
3. Notification method used.
4. Employees on duty and participating.
5. Number of occupants evacuated. (this is simulated)
6. Special conditions simulated.
7. Problems encountered.
8. Weather conditions when occupants were evacuated.
9. Time required to accomplish complete evacuation.
# FIRE DRILL EVALUATION

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Department</th>
<th>Shift</th>
</tr>
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<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Morning Day Evening</td>
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<table>
<thead>
<tr>
<th>Location</th>
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<table>
<thead>
<tr>
<th>How was fire reported</th>
<th>Phone</th>
<th>Radio</th>
<th>Alarm</th>
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</table>

1. Time drill began:
2. Time exit doors unlocked:
3. Time area evacuated:
4. Total Time to evacuate (Time #3-Time #1):
5. Time emergency keys drawn from drill site:
6. Time emergency keys arrived at the drill site:
7. Total time for emergency key response (Time #6-Time #5):

<table>
<thead>
<tr>
<th>Custody staff responding (Names)</th>
<th>Assigned staff assisting (names)</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

<table>
<thead>
<tr>
<th>Was Fire Drill Simulated?</th>
<th>Yes</th>
<th>No</th>
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<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Were all exit doors unlocked?</th>
<th>Yes</th>
<th>No</th>
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<tr>
<td></td>
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<table>
<thead>
<tr>
<th>Staff opening exit doors</th>
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</table>

<table>
<thead>
<tr>
<th>Did all locks and doors function properly</th>
<th>Yes</th>
<th>No</th>
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<table>
<thead>
<tr>
<th>How many inmates were evacuated</th>
<th>To what location?</th>
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<table>
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<tr>
<th>Staff directing evacuation</th>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Were all fire exits clearly marked?</th>
<th>Yes</th>
<th>No</th>
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<table>
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<tr>
<th>Were fire exits and aisles clear?</th>
<th>Yes</th>
<th>No</th>
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<table>
<thead>
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<th>Did control center simulating calling the local fire department?</th>
<th>Yes</th>
<th>No</th>
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<table>
<thead>
<tr>
<th>Were emergency keys issued?</th>
<th>Yes</th>
<th>No</th>
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<table>
<thead>
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<th>Comments:</th>
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</table>

<table>
<thead>
<tr>
<th>Supervisor's Signature</th>
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</thead>
</table>
Fire Watch Requirements

Effective June 1, 2013 (Revised 2-12-2018)

This directive is to provide clarification and guidance in the usage of an approved fire watch.

The Oklahoma Uniform Building Code Commission (OUBCC) adopted the International Fire Code (IFC). The adopted IFC, section 901 states that “Where a required fire protection system is out of service, the fire department and the fire code official shall be notified immediately and, where required by the fire code official, the building shall either be evacuated or an approved fire watch shall be provided for all occupants left unprotected by the shutdown until the fire protection system has been returned to service”.

“Where utilized, fire watches shall be provided with at least one approved means for notification to the fire department and their only duty shall be to perform constant patrols of the protected premises and keep watch for fires”

To provide clarification:

1) Fire watch personnel shall patrol the building, floor or site to observe the environment for fire hazards. Fire watch personnel shall have no other assigned duties.

2) Fire watch personnel shall have a reliable means to notify the fire department in the event of an emergency. The means of communication may be site dependent and a conversation with the local fire department may be necessary to establish a preferred method. The means of communication shall be specifically addressed in the required Fire Safety Plans per International Fire Code Section 404.

This directive is in compliance with Title 74 O.S., § 324.8 “Uniform Force and Effect – Authority of Cities, Towns and Counties” in that nothing in this directive shall prevent or take away from any city, town or county, the authority to enact and enforce rules containing higher standards and requirements than those provided herein.

Robert Doke
State Fire Marshal
Incident Reporting
SUBCHAPTER 5. STANDARDS FOR DETENTION FACILITIES

310:670-5-2. Security and control The facility administrator shall develop and implement written policies and procedures for the safety, security and control of staff, inmates and visitors. Policies and procedures shall address at least the following:

Incident Reporting
(27) The Department shall be notified no later than the next working day if any of the following incidents occur:
(A) Extensive damage to detention facility property;
(B) Serious injury to staff or inmate defined as life threatening or requiring transfer to outside medical facility;
(C) Escape;
(D) Serious suicide attempt, defined as life threatening or requiring transfer to outside medical facility; and
(E) Death.
QUESTIONS?

Please submit questions thru the chat function of TEAMS or you can send questions to: jails@health.ok.gov