

# Court Ordered Involuntary Antipsychotic Medication

## 916.1 PURPOSE AND SCOPE

This policy establishes procedures for administering court ordered involuntary antipsychotic medication to mental health inmates; pursuant to Penal Code Section 1370.

## 916.2 DEFINITIONS

1. **Jail Based Competency Treatment Program (JBCT):** Is a partnership between the California Department of State Hospitals, Shasta County Sheriff's Office, and the Shasta County contracted medical provider (Wellpath) to restore competency to PC 1368 offenders deemed incompetent to stand trial (1ST)
2. **Mental Health Providers:** Are licensed psychiatrists or psychiatric nurse practitioners, LMFT, LCSW, and licensed psychologists contracted to provide mental health and program services within the County's adult detention facility.
3. **Medical Provider or Staff:** Is Shasta County's contracted medical service provider; providing licensed medical services to the inmate population, in the County's adult detention facilities
4. **JBCT Deputy:** Correctional Deputy assigned to assist mental health practitioners on a full or part time basis or at the direction of the watch commander.
5. **JBCT Staff:** Mental health professionals working in conjunction with the County's contracted medical provider to restore the competency of mentally ill inmates to stand trial.
6. **Involuntary Antipsychotic Medication Review Order:** Is a court ordered review hearing of the inmate's status, prior to ordering involuntary medication.
7. **Involuntary Antipsychotic Medication Order:** A court order establishing the legal basis for administering involuntary antipsychotic medication to an inmate.

## 916.3 POLICY

Under the agreement of the Shasta County Board of Supervisors, the Shasta County Sheriff, California Department of State Hospitals and Shasta County's contracted medical provider (Wellpath); the jail may be designated to provide medically approved medication to inmates found to be mentally incompetent, unable to provide informed consent due to a mental disorder, and under a valid order from any Superior Court in the State of California.

1. The maximum period of time an inmate may be treated shall not exceed one year or the date specified on the court order.
2. Upon completion of the court designated treatment period, an antipsychotic medication review hearing shall be held by the court of jurisdiction to determine any continued treatment period.

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### **916.4 AN ANTIPSYCHOTIC MEDICATION ORDER, ISSUED BY A CALIFORNIA SUPERIOR COURT, IS REQUIRED BEFORE ANY INVOLUNTARY ANTIPSYCHOTIC MEDICATION IS ADMINISTERED TO A MENTAL HEALTH INMATE CONFINED TO THE CUSTODY OF THE SHERIFF UNLESS IT IS PROVIDED IN AN EMERGENCY.**

1. Except in a psychiatric emergency, involuntary antipsychotic medication shall only be administered to mental health inmates with a valid court order or who are temporarily housed in a county or state mental health facility, as directed by court order.
2. Only licensed medical professionals including Licensed Psychiatrists, Nurse Practitioners, Physicians Assistants, Registered Nurses and Licensed Vocational Nurses, contracted to provide mental health and program medical services within the County's adult detention facilities, shall administer medications to inmates.
3. Facility medical staff or emergency medical first responders may administer lifesaving medications in exigent circumstances to all inmates without consent.
4. If mechanical restraint devices are used to maintain the safety of the inmate and facility staff, all use shall be in accordance with established policy with watch commander approval.

### **916.5 PSYCHIATRIC MEDICATION SHALL NOT NORMALLY BE INVOLUNTARILY ADMINISTERED TO AN INMATE IN VIEW OF OTHER INMATES.**

1. An inmate who has a court order for involuntary medication in the JBCT program should be moved to the Medical Unit if that inmate refuses to take their psychiatric medication provided it is safe to do so.
2. If transferring the inmate to the Medical Unit would pose a greater risk to the inmate and staff, the watch commander shall be notified immediately.
3. Medication will only be involuntarily administered outside the Medical Unit with the approval of the Custody Division Commander, or Undersheriff.

### **916.6 AFTER BEING GIVEN INVOLUNTARY MEDICATION, THE INMATE SHALL BE OBSERVED BY MEDICAL AND CUSTODY STAFF AS FOLLOWS:**

1. Upon administering involuntary medication, custody personnel shall monitor the medicated inmate by conducting visual checks a minimum of two (2) times in the first 30 minutes with no more than 15 minutes between each check.
2. Custody personnel shall continue monitoring the affected inmate by continuing visual checks a minimum of four (4) times per hour with no more than 15 minutes between each check. Custody personnel will continue to conduct visual checks on medicated inmates at the rate of four (4) times per hour with no more than 15 minutes between each check. Visual checks will continue at the rate of four (4) times per hour with no more than 15 minutes between each check until the inmate is cleared by medical personnel for return to their designated housing unit.
3. If a significant adverse reaction to the medication is apparent, the inmate should immediately be transferred to a licensed medical or mental health setting for treatment.

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### **916.7 INMATES SUBJECT TO AN INVOLUNTARY MEDICATION ORDER ARE ALSO SUBJECT TO MONITORING OF HIS OR HER MEDICATION LEVELS TO ENSURE PRESENCE IN THE BLOODSTREAM.**

1. Inmates who are subject to involuntary medication may also be required, when clinically requested, to provide a blood or electrocardiogram test for side-effect monitoring.
2. Laboratory tests may include, but are not limited to electrolytes, liver functions, white blood cell count, cholesterol and glucose monitoring.
3. Inmates who are prescribed involuntary medication, may also be required, when clinically indicated, to take medication for side effects caused by the anti-psychotic medication.

### **916.8 PROCEDURE**

Custodial personnel will complete the following procedures when assisting mental health clinicians and medical staff in administering involuntary antipsychotic medication to an inmate.

#### **916.8.1 PLANNING**

1. The JBCT deputy and/or medical staff will notify the shift supervisor when an involuntary antipsychotic medication court order is received.
2. The shift supervisor, JBCT staff, medical staff and mental health prescribers will review the court ordered findings, identify the inmate, and determine whether the inmate is in the JBCT Program or not.
3. The shift supervisor will coordinate with the following staff in developing a plan to identify a time and location for administering the medication:
  - i. JBCT Program Staff
  - ii. Medical and mental health personnel
  - iii. Custody Division Lieutenant

#### **916.8.2 COMPLIANT INMATE MEDICATION PROCEDURE:**

1. The JBCT deputy will communicate with the identified inmate to notify the individual that a court order has been issued to administer medication.
2. If the inmate voluntarily complies to receive medication, staff will check the inmate's armband and verify their identity matches the minute order from the court.
3. The preferred location for this procedure, with a compliant inmate, is in the housing unit.

#### **916.8.3 NON-COMPLIANT INMATE MEDICATION PROCEDURE:**

1. JBCT deputies or mental health deputies will communicate with the inmate identified to notify the individual that a court order has been issued to administer medication.

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Staff will verify the inmate's identity and ensure the minute order from the court is for the correct inmate.

2. JBCT or mental health deputies will attempt to gain voluntary compliance for the administration of medication.
3. For a non-compliant inmate; the preferred location for this procedure is inside the Medical Unit, or, another location deemed suitable by the watch commander.

### 916.8.4 NON-COMPLIANT PHYSICAL FORCE IMO

1. If the inmate does not agree to receive the medication, the shift supervisor will notify the Lieutenant who will confirm there is a valid court order [Involuntary Medication Order (IMO)] from a California Superior Court on file.
2. The Lieutenant or watch commander will brief the Division Commander regarding the situation.
3. Physical force to administer medication will only be used with the approval of the Division Commander or Undersheriff. Medications shall not be forcefully administered without the approval of the Division Commander or Undersheriff.
4. Upon receiving Division Commander or Undersheriff approval, the watch commander should request a LSU (ambulance) to stage in the sally port of the facility prior to medication being administered.
5. The watch commander and/or supervisor will follow cell entry and extraction policies as well as the use of reasonable force to ensure the administration of medication is accomplished as safely as possible and in accordance with the court order.
6. The full event and administering of medication is to be video recorded.
7. If extracted, the inmate shall be escorted to a safety cell, where medical staff will evaluate the inmate before administering the court ordered medication. Refer to Lexipol Policy No. 503.
8. The watch commander shall confer with medical personnel to determine when the inmate can safely return to their assigned housing unit or if a safety cell placement is necessary for observation.

### 916.8.5 MONITORING THE INMATE:

1. Qualified Health Professionals shall be responsible to monitor the condition and vital signs of the inmate, after the medication is administered.
2. The Qualified Health Professionals shall document their observations on the Involuntary Medication Log.
3. Inmates who receive psychiatric medication may be required to submit to blood draws for monitoring levels of medication in the inmate's bloodstream. Blood draws shall be conducted by medical personnel in the Medical Unit. If an inmate refuses to have their blood drawn, the watch commander shall be notified. The deputy who witnessed the refusal will document the refusal and their observations using a log entry or Incident Report. Information surrounding the refusal will be forwarded to the JBCT deputy.

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4. JBCT personnel shall attempt to gain the inmates compliance and conduct the blood draw voluntarily.
5. No force blood draws will be attempted on an inmate in the JBCT program without Division Commander or Undersheriff approval.
6. Inmates may also be required to take medications for side effects caused by the anti-psychotic medication.

### 916.8.6 WHEN THE INMATE IS REHOUSED TO THEIR CELL AFTER THE MEDICATION IS ADMINISTERED:

1. The inmate shall only be returned to their assigned housing unit upon receiving medical clearance from Wellpath personnel or another qualified physician (See 19.6.6)
2. Once medical personnel has cleared the inmate to return to his/ her cell and the prescribing physician deems checks by medical personnel are no longer necessary, custody personnel will visually check medicated inmates each hour while documenting those visual checks in accordance with department policy.

### 916.8.7 DOCUMENTATION:

1. When medication is administered by means of physical force, a detailed incident report is to be completed by all custodial personnel involved in the incident. The incident report shall then be forwarded to JBCT personnel and Jail Administration.
2. Nursing staff shall ensure that an Involuntary Medication Log is maintained, and each occasion of involuntary medication administered to any inmate is documented.
3. The log entries shall identify the inmate by name and number and shall include the reason for medication and the time and date of medication.
4. This information shall be maintained as part of an electronic health record system.
5. Upon request, such logs shall be made available for review by department medical and mental health executives.