



FCAC SRIC

February 20, 2024
1:00 p.m.

Agenda

4.03M

6.02

8.04

12.03

18.01M

Health Screening

Evaluations

Fentanyl Exposure

Administrative Confinement

Bedding

4.03M

A *written directive* requires all *employees* whose primary responsibility is the supervision, protection, care, custody, and/or control of inmates be given a health~~medical~~ screening prior to job assignment. The agency determines job classifications requiring a health~~medical~~ screening.

I. Bullets

II. Proofs of Compliance

- *Written directive* addressing elements of the standard (Qty Initial: 1) (Qty Reaccred: 1)
- Documentation of health~~medical~~ screening (Qty Initial: 1 each type) (Qty Reaccred: 1 each year)
- List of job classifications requiring a health~~medical~~ screening. (Qty Initial: 1) (Qty Reaccred: 1)

III. Required References

IV. Assessor Guidelines

V. Accreditation Manager Notes

The file must contain documentation for both certified and civilian personnel.

Justification:

The request that the term "medical screening" be replaced by "health screening" is made because of the way "medical screening" is defined in the glossary.

Medical Screening - A systematic examination or assessment done by a health care professional to determine the presence or absence of medical problems. The screening includes physical observation and completion of a medical screening form.

Health Care Professional - Licensed, or certified individuals whose primary duty is to provide health services to inmates in keeping with their respective levels of health care training or experience.

If you follow the definitions in the glossary, employees must get a medical screening from a health care professional who primarily sees inmates. Most agencies do not ask their employees to be seen by a jail doctor to complete a health care assessment/physical. They see their own physician or one provided by the agency's

participating clinic. The intent of the standard is not to make employees go to inmate medical/infirmary.

The terms "medical screening" and "health care professional" as used in the FCAC manual are correctly tied to inmate health care in other places. Rather than having to redefine glossary terms which would affect several standards, it seems simplest to change the screening language in this one standard so that it's clear the employee doesn't have to be seen by a jail doctor.

6.02

If the agency conducts performance evaluations, a *written directive* describes the evaluation system, and includes:

I. Bullets

- A. Members are counseled on expectations for the assigned position at the beginning of the evaluation period;
- B. Objectives of the performance evaluation system;
- C. Measurement definitions;
- D. When explanatory comments are required;
- E. A requirement for evaluations, with exceptions noted, to be conducted at least annually;
- F. Criteria are based on the member's job description during that evaluation period;
- G. Review of the completed evaluation between the evaluator and the member;
- H. Provisions for written comments by the member;
- I. The opportunity to acknowledge the completed evaluation indicating the member has read it;
- J. Evaluator responsibility and training;
- K. The immediate supervisor evaluates the member;
- L. The completed evaluation is available to the member; and
- M. Procedures for contesting performance evaluations.

II. Proofs of Compliance

- *Written directive* addressing elements of the standard (Qty Initial: 1) (Qty Reaccred: 1)
- Completed performance evaluations demonstrating compliance with each bullet or observation of electronic system (Qty Initial: 1 each type) (Qty Reaccred: 1 each year)
- Documentation of a contested evaluation (Qty Initial: 1) (Qty Reaccred: 1)
- Documentation of evaluator training (Qty Initial: 3) (Qty Reaccred: 3)
- Interviews with supervisors and members both sworn and civilian.

III. Assessor Guidelines

Bullet A- Expectations discussed with employee(s) at the beginning of the rating period may be verified through interview.

Bullet E - Exceptions allow the CEO flexibility for Senior Management, Command and Executive Level *employees*.

IV. Accreditation Manager Notes

Types include civilians, sworn or certified members, supervisors, and line personnel.

Justification:

To remain consistent with the evaluation requirements of CFA.

New Standard

8.04

The agency provides training to members on recognizing the signs and symptoms of exposure to Fentanyl and has procedures for decontamination of uniforms and equipment. The training includes:

I. Bullets

- A. Wearing the proper PPE;
- B. Victim assessment to identify the signs and symptoms of opioid overdose;
- C. Deploying Naloxone (Narcan), if available to the agency;
- D. Calling for emergency medical assistance;
- E. Treating the member until the arrival of medical assistance;
- F. Procedures for decontamination of uniforms and equipment.

II. Proofs of Compliance

- Documentation showing training on all elements of the standard. (Qty Initial: 1)
(Qty Reaccred: 1 each year)
- Interviews.

III. Required References

IV. Assessor Guidelines

V. Accreditation Manager Notes

Justification: Due to the risks involved with fentanyl and other dangerous synthetic opioids, agencies should have procedures in place for treatment and decontamination of uniforms and equipment if a member is exposed.

12.03

A *written directive* specifies inmates in *administrative confinement* receive services and privileges comparable to those in general population, unless classified as a *special management inmate*.

I. Bullets

II. Proofs of Compliance

- *Written directive* addressing elements of the standard (Qty Initial: 1) (Qty Reaccred: 1)
- Documentation demonstrating comparable services and privileges (Qty Initial: 1) (Qty Reaccred: 1 each year)
- *Employee* and inmate interviews

III. Required References

| Section 13.153(b), Florida Model Jail Standards

IV. Assessor Guidelines

V. Accreditation Manager Notes

Justification: The section that speaks about administrative confinement in the FMJS manual is 15.13(B).

18.01M

A *written directive* requires inmates to be provided with the following:

I. **Bullets**

- A. Mattress meeting the applicable Florida Fire Marshal standards and be in good repair;
- B. ~~Pillow;~~ A complete set of linens as determined by the agency; and
- C. ~~Pillow case, if applicable;~~
- D. ~~Sheets; and~~
- E. Blankets, as needed.

II. **Proofs of Compliance**

- *Written directive* addressing elements of the standard (Qty Initial: 1) (Qty Reaccred: 1)
- Observation of items listed in standard
- Fire Marshal certification (Qty Initial: 1) (Qty Reaccred: 1)

III. **Required References**

IV. **Assessor Guidelines**

V. **Accreditation Manager Notes**

The initial issuance of a sheet may be substituted with a second blanket. A sheet shall be issued no later than 7 days after incarceration.

Justification: Most agencies do not issue a pillow or a pillow case. The issued mattress has an integrated pillow inside the mattress. Inmates use sheets to cause flooding in their cells. There are other products on the market that will afford inmates the same level of comfort under existing temperature controls. A complete set of linens as determined by the agency could include a quilted mattress cover with attached quilted sheet made of a heavy material that would not allow the inmates to flush them down the toilet. The new products make it simpler to manage contraband, stock fewer products to launder, and helps with accountability; inmates are responsible for one set of linen products rather than multiple products.